

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
03/22/2017

PRODUCER
Berg Insurance Agency
23651 Birtcher Dr

Lake Forest, CA 92630
(949) 830-4590

INSURED
CORONA LAURELWOOD HOMEOWNERS ASSOCIATION
C/O DIVERSIFIED REAL PROPERTY MANAGEMENT
180 EAST MAIN STREET, SUITE 101
TUSTIN, CA 92780

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

- (A) FARMERS INSURANCE EXCHANGE
- (B) FIREMAN'S FUND INSURANCE CO.
- (C) MID CENTURY INSURANCE CO
- (D) CNA (Continental Casualty Company)

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS LTR	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	LIMITS	
A	GENERAL LIABILITY	606224842	04/01/2017	04/01/2018	EACH OCCURRENCE	\$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$75,000
	<input type="checkbox"/> CLAIMS <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$5,000
	GEN'L AGGREGATE LIMIT APPLIES PER				PERSONAL & ADV INJURY	\$1,000,000
<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC				GENERAL AGGREGATE	\$2,000,000	
				PRODUCTS - COMPIO P AGG	\$1,000,000	
A	AUTOMOBILE LIABILITY	606224842	04/01/2017	04/01/2018	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	
<input checked="" type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT		
<input checked="" type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY EA ACC AGG		
	GARAGE LIABILITY					
	<input type="checkbox"/> ANY AUTO					
B	UMBRELLA	SUO000322183	04/01/2017	04/01/2018	EACH OCCURRENCE	\$15,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS				AGGREGATE	\$15,000,000
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
C	WORKERS COMPENSATION & EMPLOYER'S LIABILITY	A09478418	04/01/2017	04/01/2018	<input checked="" type="checkbox"/> WC LIMITS <input type="checkbox"/> OTHER	
	EL EACH ACCIDENT				\$1,000,000	
	EL DISEASE - EACH EMPLOYEE				\$1,000,000	
	EL DISEASE - POLICY LIMIT				\$1,000,000	
A	OTHER	606224842	04/01/2017	04/01/2018	\$35,450,000	\$25,000 Ded
A	Building	606224842	04/01/2017	04/01/2018	\$1,000,000	\$1,000 Ded
D	Directors/Officers	05990022227	04/01/2017	04/01/2018	\$3,000,000	\$25,000 Ded
D	Fidelity					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

"Bare Walls"; Special Form; 100% Replacement Cost Policy with 150% Extended Replacement Cost Endorsement; Management Company named Additional Insured on GL, D&O and Fidelity Bond; 228 units

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE