



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
06/05/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER Association Underwriters of Washington 1500 112th Avenue NE Bellevue WA 98004	CONTACT NAME: Scott Reilly PHONE (A/C, No. Ext): (425) 637-0419 E-MAIL ADDRESS: scott.reilly@associationunderwriters.com PRODUCER CUSTOMER ID:	FAX (A/C, No): (425) 467-9304
	INSURER(S) AFFORDING COVERAGE	
INSURED Daybreak at Issaquah Ridge, A Condominium c/o Kappes Miller Management Post Office Box 50330 Bellevue, WA 98015-0330	INSURER A: Fair American Select Insurance Company	15201
	INSURER B: Palomar Specialty Insurance Company	20338
	INSURER C: Continental Casualty Co.	20443
	INSURER D: Scottsdale Insurance Co.	41297
	INSURER E: Continental Casualty Co.	20443
	INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:****LOCATION OF PREMISES / DESCRIPTION OF PROPERTY** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Hold no reserves; premium paid by Association. At the time this was issued, the Property policy covers the permanent improvements/betterments inside the residential units (walls in). Total of 90 units. Separation of Insureds included in General Liability wording. Property Management entity covered under Fidelity.

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> PROPERTY CAUSES OF LOSS	CPP100051700 includes \$10 million EQ. and Flood	06/12/2018	06/12/2019	<input checked="" type="checkbox"/> BUILDING	\$ 14,135,000
	BASIC				<input type="checkbox"/> PERSONAL PROPERTY	\$
	BROAD				<input checked="" type="checkbox"/> BUSINESS INCOME	\$ 365,000
	<input checked="" type="checkbox"/> SPECIAL				EXTRA EXPENSE	\$
B	<input checked="" type="checkbox"/> EARTHQUAKE	CPP100051700/ CPP18014364000 \$4.5 million excess of \$10 million	06/12/2018	06/12/2019	RENTAL VALUE	\$
	WIND				BLANKET BUILDING	\$
	FLOOD				BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/> RC End				BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Water Ded.				<input checked="" type="checkbox"/> Bldg Ord A	\$ Up to Bldg Lmt
			<input checked="" type="checkbox"/> Bldg Ord B & C	\$ 15% Bldg. limit		
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS	POLICY NUMBER				\$
	<input type="checkbox"/> NAMED PERILS					\$
E	<input checked="" type="checkbox"/> CRIME TYPE OF POLICY	618679174	06/12/2018	06/12/2019	<input checked="" type="checkbox"/> Emp Dishonesty	\$ 275,000
	Fidelity				<input checked="" type="checkbox"/> Deductible	\$ 1,000
C	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	6072358604	06/12/2018	06/12/2019	<input checked="" type="checkbox"/> Equip Breakdown	\$ Up to Bldg Lmt
D	General Liability	CPS3051166	06/12/2018	06/12/2019	<input checked="" type="checkbox"/> Occurrence	\$ 1,000,000
					<input checked="" type="checkbox"/> Aggregate	\$ 2,000,000

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**CERTIFICATE HOLDER****CANCELLATION**

FOR INFORMATION PURPOSE ONLY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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