



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
04/08/2024

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.

PRODUCER Symphony Risk Solutions, LLC 2425 N Central Expy Suite 900 Richardson TX 75080	CONTACT NAME: Sophia Jones PHONE (A/C, No, Ext): (972) 864-0400 E-MAIL ADDRESS: sjones@symphonyrisk.com PRODUCER CUSTOMER ID: 00018007	FAX (A/C, No): (972) 278-8400
	INSURER(S) AFFORDING COVERAGE	
INSURED Windhaven Crossing Townhome Owners Association, Inc. % Essex Association Management 1512 Crescent Dr. Ste 112 Carrollton TX 75006	INSURER A: The Princeton Excess & Surplus Lines Ins Co	10786
	INSURER B: Philadelphia Indemnity Ins Co	18058
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 2024-2025 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
358 Units per statement of values on file with the insurance carrier located at Windhaven Crossing in Lewisville, TX Guaranteed Replacement Cost Applies; day NOC for Non-Pay; Unit Property Limitation Coverage Applies / Structure Coverage Only no interior or improvements or betterments included. 10

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	CAUC100202-4	04/08/2024	04/08/2025	BUILDING	\$	
		CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
		BASIC				BUILDING 25,000	BUSINESS INCOME	\$
		BROAD				CONTENTS	EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/>	SPECIAL					RENTAL VALUE	\$
		EARTHQUAKE					<input checked="" type="checkbox"/> BLANKET BUILDING	\$ 115,045,000
		WIND					BLANKET PERS PROP	\$
		FLOOD					BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Wind/Hail	3% per bldg.	<input checked="" type="checkbox"/> Outdoor Property	\$ Included				
	<input checked="" type="checkbox"/> NameStorm	4% per bldg.	<input checked="" type="checkbox"/> Ord Law Cov A,B,C	\$ Included				
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$	
		CAUSES OF LOSS	POLICY NUMBER				\$	
		NAMED PERILS					\$	
A	<input checked="" type="checkbox"/>	CRIME	PCAC012137-0420	10/05/2023	10/05/2024	<input checked="" type="checkbox"/> Employee Theft	\$ 100,000	
	TYPE OF POLICY					Deductible \$250	\$	
						Mgmt. Co Included	\$	
A	<input checked="" type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN	CAUC100202-4	04/08/2024	04/08/2025	<input checked="" type="checkbox"/> Equip. Breakdown	\$ Included	
							\$	
							\$	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Insured's Copy - Coverage Confirmation	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 <i>Michael C. Mason</i>

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