



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/16/2025

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Prendiville Insurance Agency 24661 Del Prado, Suite 3 License# 0740433 Dana Point CA 92629	CONTACT NAME: PHONE (A/C, No, Ext): (949) 487-9696	FAX (A/C, No): (949) 487-9626
	E-MAIL ADDRESS:	
INSURED Sunrise at Parkhill  c/o SoCal Property Enterprise 1855 Sampson Ave Corona CA 92879	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Truck Insurance Exchange	21709
	INSURER B: Federal Insurance Company	20281
	INSURER C: AmTrust North America	15954
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES AV CERTIFICATE NUMBER: Cert ID 39338 (1) REVISION NUMBER:

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		ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS						
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		Y	60712-77-99	05/13/2025	05/13/2026	EACH OCCURRENCE	\$ 1,000,000						
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 75,000						
	<input checked="" type="checkbox"/> *D&O is Claims Made						MED EXP (Any one person)	\$ 5,000						
	<input checked="" type="checkbox"/> D&O Retention \$1,000						PERSONAL & ADV INJURY	\$ 1,000,000						
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000						
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 1,000,000						
OTHER:							D&O Liability*	\$ 1,000,000						
	AUTOMOBILE LIABILITY				G75115623	05/13/2025	05/13/2026	COMBINED SINGLE LIMIT (Ea accident)	\$					
	ANY AUTO						BODILY INJURY (Per person)	\$						
	OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$						
	Hired AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$						
								\$						
B	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR	Y	G75115623	05/13/2025	05/13/2026	EACH OCCURRENCE	\$ 3,000,000						
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$ 3,000,000						
	DED <input type="checkbox"/> RETENTION \$							\$						
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		Y/N <input checked="" type="checkbox"/> N	N/A	TWC4626698	05/29/2025	05/29/2026	<input checked="" type="checkbox"/> PER STATUTE	OTH- ER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	\$ 1,000,000						
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000						
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000						
A	Fidelity Bond		Y		60712-77-99	05/13/2025	05/13/2026	Fidelity Bond Deductible: \$500	\$ 150,000					
A	Property (R/C)				60712-77-99	05/13/2025	05/13/2026	Property Deductible: \$1,000	\$ 107,800					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

SoCal Property Enterprise is Named as Additional Insured as Their Interests May Appear, as Respects: CGL, D&O Liability, Fidelity Bond, and Umbrella Liability.

Property Coverage Applies to Common Area Structures Only (No Property Coverage Applies to Residential Units).

134 Units. 125% Extended Replacement Cost. Wind & Hail Coverage is Included. 8% Inflation Guard.

Building Ordinance Coverage:

A(Undamaged)=Included, B(Demolition)=\$25,000, C(Increased Construction Costs)=\$10,000

\*CANCELLATION: 30 DAY NOTICE, EXCEPT 10 DAY NOTICE FOR NON-PAYMENT OF PREMIUM.

CERTIFICATE HOLDER	CANCELLATION
SoCal Property Enterprise 1855 Sampson Avenue Corona CA 92879	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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