

MALLEN

ACORD\*

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/6/2022

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).

tl	nis certificate does not confer rights to	o the	cert	ificate holder in lieu of su	ıch end	lorsement(s)		,			
PRO	DUCER				CONTA NAME:	<sup>c⊤</sup> Mason A	llen				
American Insurance & Investment Corp. 448 South 400 East Salt Lake City, UT 84111						PHONE (A/C, No, Ext): (801) 364-3434 FAX (A/C, No): (801) 355-5234					
						E-MAIL ADDRESS: mason.allen@american-ins.com					
						INSURER(S) AFFORDING COVERAGE NAIC #					
		INSURE	INSURER A : American Hallmark Insurance Compan of Texas								
INSURED Bear Hollow Ridge HOA						INSURER B:					
						INSURER C:					
	c/o All Seasons HOA Manag	eme	nt		INSURER D :						
1794 Olympic Pkwy #200 Park City, UT 84098					INSURER E :						
	. a o,			INSURER F:							
CO	VERAGES CER	TIFI	CATI	E NUMBER:				REVISION NUI	MRFR:	I	
T IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	ES O EQU PER	F INS IREM TAIN,	SURANCE LISTED BELOW ENT, TERM OR CONDITIO , THE INSURANCE AFFOR	N OF A	NY CONTRAC	CT OR OTHEFIES DESCRIE	RED NAMED ABC R DOCUMENT WI BED HEREIN IS S	VE FOR T	CT TO \	WHICH THIS
INSR TYPE OF INSURANCE			SUBR				POLICY EXP (MM/DD/YYYY)			s	
A	X COMMERCIAL GENERAL LIABILITY	IIVOD	WVD			(IVIIVI/DU/TTTT)		EACH OCCURREN		\$	1,000,000
	CLAIMS-MADE X OCCUR			44CL629611		4/21/2022	4/21/2023	DAMAGE TO RENT PREMISES (Ea occ	LED	\$	100,000
										\$	5,000
								, ,	1	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							PERSONAL & ADV INJURY \$  GENERAL AGGREGATE \$		2,000,000	
	POLICY PRO- JECT X LOC							PRODUCTS - COM		\$	Included
	OTHER:							COMBINED SINGL	E LIMIT	\$	
	AUTOMOBILE LIABILITY							(Ea accident)		\$	
	ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (P	•	\$	
								BODILY INJURY (P	er accident) GE	\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)		\$	
										\$	
	UMBRELLA LIAB OCCUR							EACH OCCURREN	ICE	\$	
	EXCESS LIAB CLAIMS-MADE	-						AGGREGATE		\$	
	DED RETENTION \$							PER	OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE \$		\$	
	(Mandatory in NH)										
_	If yes, describe under DESCRIPTION OF OPERATIONS below			4401 000044		4/04/0000	4/04/0000	E.L. DISEASE - PO	LICY LIMIT	\$	40.040.000
Α	Property			44CL629611		4/21/2022	4/21/2023	Building			10,618,608
Α	Replacement Cost			44CL629611		4/21/2022	4/21/2023	Deductible			10,000
Wal Nun Nun	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Is-in Coverage is Included Per Utah Stat nber of Buildings: 1 nber of Units: 26 cy includes automatic inflation guard ar	te La	w (in	cludes improvements & be	ule, may b ttermei	e attached if mor	e space is requi	red)			
CERTIFICATE HOLDER  Insurance Verification Only						CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					