

## **CERTIFICATE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 10/13/2023

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

_			OKPRODUCE	R, AND THE CERTIFICATE HOLDER						
L NA				NAME: John Inibodeau						
Sta	nte Far	W John Historiaan			(A/C, No, Ext): (4	(A/C, No, Ext): (410) 208-3101 (AC, NO): (410) 974-9226				974-9228
(	<b>5</b> 5.	1214 West St		E-MAIL :_u	E-MAIL ADDRESS: john.thibodeau.lr6f@statefarm.com					
· · · · · · · · · · · · · · · · · · ·			PRODUCER	PRODUCER CUSTOMER ID						
		Annaj	polis,	MD 21401-429					NAIC#	
INSU	JRED				INCHES A Str					25143
		VILLAS AT	CATTAIL CRE	EK CONDOMINIUM INC		INSURER A: State Farm Fire and Casualty Company			20140	
		C/O UTZ F	PROPERTY MAI	NAGEMENT 532 BALTIMORE BLVD S	INSURER B :					
					INSURER C:					
					INSURER D :	INSURER D :				
ŀ		WESTMIN	STED	MD 21157-612	INSURER E :	<del></del>		···		
<u> </u>					INSURER F:	INSURER F:				
	VERA			CERTIFICATE NUMBER:		REVISION NUMBER:				
		OF PREMISES / I		ROPERTY (Attach ACORD 101, Additional Remar	ks Schedule, If more sp	ace is required)				
C IV	IDICAT ERTIF	FED. NOTWIT ICATE MAY B	"HSTANDING AN" E ISSUED OR MA	CIES OF INSURANCE LISTED BELOW HA Y REQUIREMENT, TERM OR CONDITION AY PERTAIN, THE INSURANCE AFFORDE BUCH POLICIES. LIMITS SHOWN MAY HA	OF ANY CONTRACED BY THE POLICIE	CT OR OTHER DOC S DESCRIBED HER	CUMENT WITH REIN IS SUBJ	H RESPECT T	O WHICI	H THIS
INSR		TYPE OF IN:	SURANCE	POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION		PROPERTY		LIMITS
LTR	\J.				DATE (MM/DD/YYYY)	DATE (MM/DD/YYYY)	ļ.,			
	$\overline{}$	PROPERTY	DEDILOT:-:				BUILDIN		\$	
		SES OF LOSS	DEDUCTIBLES	1				NAL PROPERTY	\$	
		BASIC	\$10,000.00				BUSINE	SS INCOME	7	ACORD 101
	F	BROAD	CONTENTS	1			EXTRA E	EXPENSE	s SEE	ACORD 101
	X	SPECIAL		90-BQ-Q396-5	06/15/2023	06/15/2024	RENTAL	VALUE	\$ SEE	ACORD 101
		EARTHQUAKE		<del>                                    </del>	00/13/2023	06/15/2024	X BLANKE	T BUILDING	s \$61.	,177,400
	Τ,	WIND		1			BLANKE	T PERS PROP	\$	
		FLOOD		1			BLANKE	T BLDG & PP	s	
				1			<del>  </del>			
				1			H		\$	
	Hi	NLAND MARINE	<u> </u>	TYPE OF POLICY					\$	
	⊢⊢	ES OF LOSS					$\vdash$		\$	
	-	NAMED PERILS		POLICY NUMBER	1		Н		5	
	⊢  '	NAMED FERILS		POLICE NONDER			<del>                                     </del>		\$	
	-								\$	
	₩,	CRIME							\$	
TYPE OF P		OF POLICY							\$	
									\$	
	X	BOILER & MACH	INERY /						\$	
	L'	LEVIEMENI BRI	LANDOWN.	1					\$	
									\$	
									\$	
		O ACORD 1	· · · · · · · · · · · · · · · · · · ·	I ACORD 101, Additional Remarks Schedule, may b	e attached if more space	ce is required)			1.9	
CE	RTIFIC	CATE HOLD	ER		CANCELLAT	ION				
VILLAS AT CATTAIL CREEK CONDOMINIUM INC				THE EXPIRA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
C/O UTZ PROPERTY MANAGEMENT				AUTHORIZED REF	AUTHORIZED REPRESENTATIVE					
532 BALTIMORE BLVD SUITE 405										
WESTMINSTER, MD 21157				IF SIGNATUR	IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.					
	WU ZITO/									

AGENCY CUSTOMER ID:	
LOC#	



### ADDITIONAL REMARKS SCHEDULE

lage or	Page	1	of	1
---------	------	---	----	---

AGENCY		NAMED INSURED
John Thibodeau		VILLAS AT CATTAIL CREEK CONDOMINIUM INC
POLICY NUMBER		
90-BQ-Q396-5		
CARRIER	NAIC CODE	
State Farm Fire and Casualty Company	25143	EFFECTIVE DATE: 06/15/2023

#### **ADDITIONAL REMARKS**

# THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM. FORM NUMBER: 24 FORM TITLE: Certificate of Property Insurance

#### **Unit Owner:**

VILLAS AT CATTAIL CREEK CONDOMINIUM INC - 15104 Players Way - Glenwood, - MD - 21738-9658 - Unit Loan Number:0 - Number Of Units: 0093

Association Type: Residential Community Association Policy

## Forms, Options and Endorsements: Forms, Options and Endorsements:

CMP-4100	Businessowners Coverage Form	CMP-4550	Residential Community Assoc
FE-6999.3	Terrorism Insurance Cov Notice	CMP-4220.2	Amendatory Endorsement
CMP-4705.2	Loss of Income & Extra Expense	CMP-4508	Money and Securities
CMP-4814	Dir & Officers \$2,000,000	CMP-4710	Emp Dishonesty \$25,000
CMP-4830	Interior Building Damage	CMP-4561.4	Policy Endorsement
FE-3650	Actual Cash Value Endorsement		·

#### Coverages:

Business Liability	\$2,000,000
Medical Payments	\$5,000
Products-Completed Operations	\$4,000,000
General Aggregate	\$4,000,000

#### Companion Policies:

90BUL8620 Commercial Liability Umbrella

#### Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association Covenants, Conditions, and Restrictions (CC&Rs) including the following types of property within a unit, regardless of ownership:

1. Fixtures, improvements and alterations that are a part of the building or structure; and

2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. *However, these endorsements do not change any replacement cost coverage provided by the policy.* 

This policy provides coverage on a standalone/individual condominium association.

#### **Commercial General Liability**

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

#### Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.