

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/7/2024

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.

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).

this certificate does not confer rights to	the ce	rtificate holder in lieu of su	uch endorsement(s).				
PRODUCER	CONTACT HOA Department							
The Buckner Company 6550 S Millrock, Suite #300	PHONE (A/C, No, Ext): 801-937-6700 FAX (A/C, No): 801-937-6710							
Salt Lake City UT 84121	ADDRESS: hoa@buckner.com							
•			INSURER(S) AFFORDING COVERAGE				NAIC#	
		License#: 92480	INSURER A : Owners	Insurance Co	mpany		32700	
INSURED	INSURER B: Great American Insurance Company 1669				16691			
Centennial Plaza Condominiums 2888 N 870 W	INSURER C:							
Lehi UT 84043	INSURER D:							
			INSURER E:					
			INSURER F:					
		E NUMBER: 1622549981			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.								
LTR TYPE OF INSURANCE	NSD WV	D POLICY NUMBER	POLICY EFF (MM/DD/YYYY	POLICY EXP (MM/DD/YYYY)	I	LIMITS		
A X COMMERCIAL GENERAL LIABILITY		57867834	11/15/2024	11/15/2025	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000	0,000	
CLAIMS-MADE X OCCUR					PREMISES (Ea occurrence	\$ 300,0	000	
					MED EXP (Any one person) \$10,00	00	
					PERSONAL & ADV INJUR	ý \$1,000	0,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000	0,000	
X POLICY PRO- JECT LOC					PRODUCTS - COMP/OP A	. , ,		
OTHER:					Hired/Non-Owned Auto	\$ 1,000	J,000	
AUTOMOBILE LIABILITY					(Ea accident)	•	\$	
ANY AUTO OWNED SCHEDULED					BODILY INJURY (Per pers	<u> </u>	\$	
AUTOS ONLY AUTOS NON-OWNED					BODILY INJURY (Per accid			
AUTOS ONLY AUTOS ONLY					(Per accident)	\$		
						\$		
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$		
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	\$	
DED RETENTION \$ WORKERS COMPENSATION					PER OT	\$ H-		
AND EMPLOYERS' LIABILITY					PER OT STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A				E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLO			
DESCRIPTION OF OPERATIONS below		57007004	44/45/0004	44/45/0005	E.L. DISEASE - POLICY LI		87,542	
A Blnkt Bldg Repl Cost B Employee Dishonesty		57867834 EPPE456800-05	11/15/2024 11/15/2024	11/15/2025 11/15/2025	10,000 Deductible	50,00	00	
Directors & Officers					2,500 Deductible	1,000	0,000	
DESCRIPTION OF OREDATIONS // OCATIONS //FUICE		DD 404 Additional Damanta Cabadu			-41)			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLE 48 Units - Walls In including completed additions and fix Special Form / Separation of Insureds Include Equipment Breakdown - Included Wind/Hail Deductible 5% Inflation Guard- Included or reviewed annuall No Unaffiliated Projects Separation of Insureds Included See Attached	xtures, led			re space is requir	ea)			
CERTIFICATE HOLDER CANCELLATION								
Zions Bancorporation, N.A., c/o Central Loan Administration	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							

P.O. Box 202028

Florence SC 29502-2028

AUTHORIZED REPRESENTATIVE

AGENCY CUSTOMER ID:	CENTPLA-02
---------------------	------------

LOC #:

R	
ACORD	

ADDITIONAL REMARKS SCHEDULE

Page _ 1_ of _ 1_

AGENCY The Buckner Company	NAMED INSURED Centennial Plaza Condominiums 2888 N 870 W Lehi UT 84043					
POLICY NUMBER						
CARRIER NAIC CODE						
	EFFECTIVE DATE:					
ADDITIONAL REMARKS						
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,						
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY						
Standard Cancellation Provisions to the insured apply (10/30) Coverage Noted is for Units located with in the Centennial Plaza Condominiums Only Mark Robert Greenwood & Elizabeth Greenwood 1065 N Plaza Dr; Richfield, Ut 84701						

Centennial Plaza Condominiums

Key Insurance Information 11/15/2024

The information presented below is intended to provide a brief overview of the insurance provided by the HOA master policy. In addition, it serves as an official notice in accordance with Utah HOA law and provides a guideline for the unit owner's personal insurance needs. For complete details of Utah Law, please visit:

Condo Act - https://le.utah.gov/xcode/Title57/Chapter8/57-8.html?v=C57-8_1800010118000101

Community Association Act - https://le.utah.gov/xcode/Title57/Chapter8A/57-8a.html?v=C57-8a_1800010118000101

The HOA master insurance policy provides property insurance for: buildings, individual units and permanently attached equipment and fixtures including unit owner upgrades- the coverage provided is subject to policy provisions and exclusions. This does not include unit owner contents.

- 1. The master insurance policy deductible is **\$10,000** and applies per building. In the event of a covered claim to a unit, the unit owner is responsible for this deductible which applies regardless of fault. If the HOA master policy deductible changes, the HOA must provide prior notice to the unit owners.
- 2. The associations master policy has a separate Windstorm or Hail deductible is 5% and applies per building.
- 3. Earthquake and Flood insurance are not required per the governing documents and are not included under the master insurance policy.
- 4. The master insurance policy includes general liability insurance with at least a \$1,000,000 per occurrence limit.

Unit Owner Checklist

(Always consult with your personal insurance agent to determine what insurance coverage you will need)

Priority:

- ✓ Individual unit owner insurance also known as an HO6 insurance policy. This should include dwelling coverage commonly known as "Coverage A" of **no less than \$10,000**.
- ✓ Policy should be written on "special form"
- √ Loss Assessment Coverage
- ✓ Coverage for your personal contents
- ✓ Personal liability protection
- ✓ Additional Living Expenses

Optional Coverage's if Applicable:

- ✓ Coverage for your autos and recreational vehicles
- ✓ Loss of use and additional living expenses due to a claim
- ✓ Supplemental earthquake insurance
- ✓ Flood or surface water insurance for your unit and your contents
- ✓ Pollution Coverage which may include Mold, Lead, Asbestos and other common pollutants
- ✓ Other coverage: fine arts, jewelry, collectables, other valuable articles, money, sports equipment etc.
- ✓ Loss of rents if your unit is a rental

For individual homeowner's insurance quotes contact:

The Buckner Company Personal Lines Department #801-937-6701

For insurance certificate requests:

Visit our website at www.buckner.com

