

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/02/2020

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 be endorsed. If SUBROGATIONIS 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).

	ot confer rights to the certificate h	older	in lieu of	such endorsement	:(s).				
	DUCER	_		CONTACT NAME:					
AFFORDABLE AMERICAN INSURANCE 34345560				PHONE (970) 395-2425			FAX (970) 3	()	
4239 CENTERPLACE DR UNIT 2A				(A/C, No, Ext):	E-MAIL ADDRESS:				
GREELEY CO 80634									
				INSURER(S) AFFORDING COVERAGE				30104	
				INSURER A: Hartford Underwriters Insurance Company				30104	
INSURED				INSURER B:					
MIRAGE HEIGHTS CONDO ASSOC 450 N DOBSON RD STE 201				INSURER C:					
MESA AZ 85201-5287				INSURER D:					
				INSURER E :					
				INSURER F:					
COVERAGES CERTIFICATE NU				UMBER:	JMBER: REVISION NUMBER:				
IN C TI	HIS IS TO CERTIFY THAT THE POLICIE IDICATED.NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR M ERMS, EXCLUSIONS AND CONDITIONS	EQUIR AY PE S OF S	EMENT, T ERTAIN, TI UCH POLI	ERM OR CONDITION (HE INSURANCE AFFO	OF ANY CONTRAC ORDED BY THE MAY HAVE BEEN	CT OR OTHER I POLICIES DES REDUCED BY P	DOCUMENT WITH RESPEC CRIBED HEREIN IS SUB	CT TO WHICH THIS	
INSF	I TPE OF INSURANCE			POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/Y YYY)	LIMITS	•	
	COMMERCIAL GENERAL LIABILITY		WVD			(IIIII) SO, T T T T T	EACH OCCURRENCE	\$2,000,000	
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000	
	X General Liability						MED EXP (Any one person)	\$10,000	
Α		1		34 SBA AF7R43	06/23/2020	06/23/2021	PERSONAL & ADV INJURY	\$2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$4,000,000	
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$4,000,000	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000	
Α	ANY AUTO						BODILY INJURY (Per person)		
	ALL OWNED SCHEDULED AUTOS AUTOS			34 SBA AF7R43	06/23/2020	06/23/2021	BODILY INJURY (Per accident)		
	X HIRED X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)		
	AUTOS						(Fel accident)		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE		
	EXCESS LIAB CLAIMS-						AGGREGATE		
	DED RETENTION \$								
	WORKERS COMPENSATION						PER OTH-		
	AND EMPLOYERS' LIABILITY						STATUTE ER		
	ANY Y/N PROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT		
	OFFICER/MEMBER EXCLUDED?	N/A					E.L. DISEASE -EA EMPLOYEE		
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT		
Α	Data Breach - Defense & Liab Covg			34 SBA AF7R43	06/23/2020	06/23/2021	Limit	\$50,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / V	EHICLE	S (ACORD	I01, Additional Remarks S	chedule, may be atta	ched if more space	e is required)	1	
Tho	se usual to the Insured's Operations	-							
	RTIFICATE HOLDER	10115	OMANIES		CANCELLA		E DECODIDED DOUGES	DE CANCE: : ED	
MIRAGE HEIGHTS CONDOMINIUMS HOMEOWNERS ASSOCIATION, INC					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED				
450 N DOBSON RD STE 201					IN ACCORDANCE WITH THE POLICY PROVISIONS.				
MESA AZ 85201					AUTHORIZED REPRESENTATIVE				
					Cont & Cont				
					Sugan S. Castaneda				

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