## Client#: 1860403 HARBOTER

 $ACORD_{\scriptscriptstyle{\mathbb{M}}}$ 

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/09/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

and definidute does not define any rights to the definidute notice in field of such endorsement(s).								
PRODUCER	CONTACT Sam Gordon							
USI Insurance Services LLC	PHONE (A/C, No, Ext): 855 874-1270 FAX (A/C, No):							
2502 N Rocky Point Dr. Suite 400	E-MAIL ADDRESS: selectcommercial@usi.com							
Tampa, FL 33607	INSURER(S) AFFORDING COVERAGE	NAIC #						
	INSURER A: Westchester Surplus Lines Insurance Co.	10172						
INSURED	INSURER B : ACE Property & Casualty Insurance Co	20699						
Harborside Terrace Owners Assn Inc.	INSURER C : Zenith Insurance Company	13269						
FirstService Residential	INSURER D : Great American Insurance Company							
10600 Chevrolet Way, Suite 202	INSURER E :							
Estero, FL 33928	INSURER F:							

COVERAGES CERTIFICATE NUMBER: 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 INSUR	ANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Χ	COMMERCIAL GENERA	AL LIABILITY			GLWF15925474004	12/01/2023	12/01/2024	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR								DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
									MED EXP (Any one person)	\$5,000
									PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREGATE	\$2,000,000
	X POLICY PRO- JECT LOC								PRODUCTS - COMP/OP AGG	\$
	OTHER:									\$
Α	AUTOMOBILE LIABILITY					GLWF15925474004	12/01/2023	12/01/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ANY AUTO								BODILY INJURY (Per person)	\$
		OWNED AUTOS ONLY	SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	X	HIRED AUTOS ONLY X	NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
										\$
В	X	UMBRELLA LIAB	OCCUR			UMBFLF173370751	12/01/2023	12/01/2024	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE DED RETENTION \$		CLAIMS-MADE						AGGREGATE	\$5,000,000
									\$	
С					Z137346603	12/01/2023	12/01/2024	X PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE			N/A					E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)			N/A					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT	\$1,000,000
D	D&O Liability					EPPE29562605	12/01/2023	12/01/2024	\$1,000,000	
D	Cri	me				SSA39256740787506	12/01/2023	12/01/2024	\$500,000	

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

Harborside Terrace Owners Assn Inc. FirstService Residential 10600 Chevrolet Way, Suit 202 Estero, FL 33928

## 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.

AUTHORIZED REPRESENTATIVE

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