



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/19/2023

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS IOA Insurance Services 3875 Hopyard Road Suite 200 Pleasanton, CA 94588 Contact name: Roshanah Thomas		PHONE (A/C, No, Ext): (925) 416-7862	COMPANY NAME AND ADDRESS AXIS Surplus Insurance Company 11680 Great Oaks Way Suite 500 Alpharetta, GA 30022	NAIC No: 26620
FAX (A/C, No): (925) 416-7869	E-MAIL ADDRESS:		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE:	SUB CODE:	POLICY TYPE Property		
AGENCY CUSTOMER ID #: DELMESA-01		License # 0E67768		
NAMED INSURED AND ADDRESS Del Mesa Carmel Community Association, Inc. 500 Del Mesa Carmel Carmel, CA 93923		LOAN NUMBER	POLICY NUMBER ELF671480-23	
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 12/15/2023	EXPIRATION DATE 12/15/2024	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

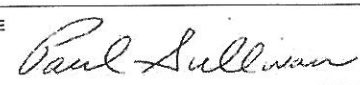
PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION
Loc # 1, Bldg # 1, 500 Del Mesa Carmel, Carmel, CA 93923

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION		PERILS INSURED	<input type="checkbox"/> BASIC	<input type="checkbox"/> BROAD	<input checked="" type="checkbox"/> SPECIAL	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 15,000,000		DED: 100,000				
<input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE		YES NO N/A	<input checked="" type="checkbox"/>	If YES, LIMIT:		Actual Loss Sustained; # of months:
BLANKET COVERAGE		<input checked="" type="checkbox"/>		If YES, indicate value(s) reported on property identified above: \$		
TERRORISM COVERAGE		<input checked="" type="checkbox"/>		Attach Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		<input checked="" type="checkbox"/>				
IS DOMESTIC TERRORISM EXCLUDED?		<input checked="" type="checkbox"/>				
LIMITED FUNGUS COVERAGE		<input checked="" type="checkbox"/>		If YES, LIMIT: 15,000	DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)		<input checked="" type="checkbox"/>				
REPLACEMENT COST		<input checked="" type="checkbox"/>				
AGREED VALUE		<input checked="" type="checkbox"/>				
COINSURANCE		<input checked="" type="checkbox"/>		If YES, %		
EQUIPMENT BREAKDOWN (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT:	DED:	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		<input checked="" type="checkbox"/>		If YES, LIMIT: 15,000,000	DED:	
- Demolition Costs		<input checked="" type="checkbox"/>		If YES, LIMIT: 500,000	DED:	
- Incr. Cost of Construction		<input checked="" type="checkbox"/>		If YES, LIMIT: 500,000	DED:	
EARTH MOVEMENT (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT:	DED:	
FLOOD (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT:	DED:	
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		<input checked="" type="checkbox"/>		If YES, LIMIT:	DED:	
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		<input checked="" type="checkbox"/>		If YES, LIMIT:	DED:	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		<input checked="" type="checkbox"/>				

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.

<input type="checkbox"/> CONTRACT OF SALE <input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS Evidence of Coverage		AUTHORIZED REPRESENTATIVE 



ADDITIONAL REMARKS SCHEDULE

AGENCY IOA Insurance Services		License # 0E67768	NAMED INSURED Del Mesa Carmel Community Association, Inc. 500 Del Mesa Carmel Carmel, CA 93923
POLICY NUMBER ELF671480-23			
CARRIER AXIS Surplus Insurance Company	NAIC CODE 26620	EFFECTIVE DATE: 12/15/2023	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

Remarks:

Policy Information

See below insurance companies participating on a quota share basis in one \$15,000,000 limit:

Axis Surplus Insurance Company - Policy # ELF671480-23 - Limit \$2,500,000

Westchester Fire Insurance Company - Policy# D39162933 002 - Limit \$2,500,000

RSUI Indemnity Company - Policy # LHD938754 - Limit \$2,500,000

General Star Indemnity Comany - Policy # IPG971534A - Limit \$2,500,000

Kinsale Insurance Company - Policy # 0100218622-1 - Limit \$5,000,000

Total Limit: \$15,000,000

Aggregate Limit: \$15,000,000

Policy Information

Replacement cost applies, ordinance or law included, equipment breakdown included.

Other Deductibles: Wildfire/Wildfire Smoke 2% per unit of insurance subject to \$150,000 minimum