



CERTIFICATE OF PROPERTY INSURANCE

3011172

DATE (MM/DD/YYYY)
04/15/2024

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER Early Insurance Agency 7220 Rosemead Blvd Ste 202-6 San Gabriel, CA 91775 (818) 697-1400	CONTACT NAME: EOI Direct PHONE (A/C, No. Ext): 877-456-3643 E-MAIL ADDRESS: help@eoidirect.com PRODUCER CUSTOMER ID:	FAX (A/C, No):													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Farmers Insurance Exchange</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Farmers Insurance Exchange		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Farmers Insurance Exchange															
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															
INSURED The Lindbrook Association c/o Ross Morgan & Company, Inc 15315 Magnolia Blvd, Suite 212 Sherman Oaks, CA 91403															

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**


LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 CA 00000
 The Lindbrook Association; 5420-5440 Lindley Ave, Encino, CA 91316

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 INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS		
A	<input checked="" type="checkbox"/>	PROPERTY	606773205	12/12/2023	12/12/2024	<input checked="" type="checkbox"/> BUILDING	\$ 49,196,814		
		CAUSES OF LOSS				DEDUCTIBLES		<input type="checkbox"/> PERSONAL PROPERTY	\$
						BUILDING		<input type="checkbox"/> BUSINESS INCOME	\$
								<input type="checkbox"/> EXTRA EXPENSE	\$
						CONTENTS		<input type="checkbox"/> RENTAL VALUE	\$
								<input type="checkbox"/> BLANKET BUILDING	\$
								<input type="checkbox"/> BLANKET PERS PROP	\$
								<input type="checkbox"/> BLANKET BLDG & PP	\$
								<input checked="" type="checkbox"/> Deductible	\$ 50,000
									\$
		INLAND MARINE	TYPE OF POLICY				\$		
		CAUSES OF LOSS					\$		
			NAMED PERILS				\$		
			POLICY NUMBER				\$		
A	<input checked="" type="checkbox"/>	CRIME	606773205	12/12/2023	12/12/2024	<input checked="" type="checkbox"/> Limit	\$ 500,000		
		TYPE OF POLICY						<input checked="" type="checkbox"/> Deductible	\$ 10,000
							\$		
		BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$		
A		General Liability	606773205	12/12/2023	12/12/2024	<input checked="" type="checkbox"/> 3,000,000 Occ	\$ 6,000,000 Agg		
							\$		

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 # of Units: 81. **Unit coverage per CC&Rs**
 NOTICE TO UNIT OWNER: This policy does not include coverage for household contents, personal property of individual unit owner, individual unit owner's personal liability and Loss of Use. There is a 10 days' notice of cancellation for non-payment and a 30 days' notice of cancellation for any other reason.

CERTIFICATE HOLDER**CANCELLATION**

. 1st Mortgagee CA 00000 Loan Number: .	<p>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> <p>AUTHORIZED REPRESENTATIVE</p> 
--	--

© 1995-2009 ACORD CORPORATION. All rights reserved.



ADDITIONAL REMARKS SCHEDULE

AGENCY Early Insurance Agency		The Lindbrook Association c/o Ross Morgan & Company, Inc 15315 Magnolia Blvd, Suite 212 Sherman Oaks, CA 91403	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

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

EQ CARRIER: Everest Indemnity Insurance Company/ Palomar Excess and Surplus Insurance Company

POLICY #: 8400011313231 / PE704447

EQ POLICY PERIOD: 12/12/2023 - 12/12/2024

Units included up to original construction

Primary Limit: \$5,000,000

Deductible: 20%

Excess Limit \$15,000,000

Deductible: 20%

D&O CARRIER: Farmers Insurance Exchange

D&O POLICY #: 606773205

D&O POLICY PERIOD: 12/12/2023 - 12/12/2024

Limit: \$2,000,000

Deductible: \$1,000

This policy does not include co-insurance

Building ordinance coverage (all 3 parts): INCLUDED

Severability clause / separation of insureds: INCLUDED

Mechanical breakdown coverage: INCLUDED

Fidelity bond / crime / employee dishonesty policy includes coverage for property management / managers