BELSCOM-01

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/2/2024

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.

lf :	SUBROGATION I	S WAIVED, subje	ct to	the	terms and conditions of ificate holder in lieu of su	the po	licy, certain ¡	policies may	•					
PRODUCER Assured Partners of CA Insurance Services, LLC dba: Wateridge Insurance Services 3655 Granite Ridge Drive, Ste 450 San Diego, CA 92123							CONTACT Angelic Morrison							
							(A/C, No, Ext): (030) 201-0024 (A/C, No): (030) 2							
							E-MAIL ADDRESS: angelic.morrison@assuredpartners.com							
							INSURER(S) AFFORDING COVERAGE							
						INSURER A: The Ohio Casualty Ins. Co.					24074			
INSUR	RED					INSURER B: Ohio Security Insurance Co.					24082			
	Belsera C	ommunity Associ	ation			INSURE	20281							
9665 Chesapeake Dr Ste 300							INSURER D: Wesco Ins Company							
	San Dieg	o, CA 92123				INSURE								
						INSURE								
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.														
NSR LTR	NSR TYPE OF INSURANCE INSD			DL SUBR D WVD POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	DLICY EFF POLICY EXP I/DD/YYYY) (MM/DD/YYYY) LIMITS						
Α	X COMMERCIAL GE	NERAL LIABILITY					,	,	EACH OCCURRENCE	\$	1,000,000			
	CLAIMS-MAD	E X OCCUR			BKO59657533		6/30/2024	6/30/2025	DAMAGE TO RENTED PREMISES (Ea occurren	ce) \$	1,000,000			
									MED EXP (Any one person	on) \$	5,000			
			1								1 000 000			

LTR	TR TYPE OF INSURANCE			INSD	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS				
Α				IABILITY				,	,	EACH OCCURRENC		\$	1,000,000
	CLAIMS-MADE X OCCUR			OCCUR			BKO59657533	6/30/2024	6/30/2025	DAMAGE TO RENTE PREMISES (Ea occu	ED irrence)	\$	1,000,000
										MED EXP (Any one p	person)	\$	5,000
										PERSONAL & ADV I	NJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:									GENERAL AGGREG	ATE	\$	2,000,000
	X POLICY PRO- JECT LOC			LOC						PRODUCTS - COMP	P/OP AGG	\$	2,000,000
		OTHER:										\$	
В	AUTOMOBILE LIABILITY									COMBINED SINGLE (Ea accident)	LIMIT	\$	1,000,000
	ANY AUTO						BAS59657533	6/30/2024	6/30/2025	BODILY INJURY (Pe	r person)	\$	
	OWNED SCHEDULED AUTOS ONLY			HEDULED TOS						BODILY INJURY (Pe	r accident)	\$	
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			N-OWNED TOS ONLY						PROPERTY DAMAG (Per accident)	E	\$	
												\$	
С	X UMBRELLA LIAB X OCCUR							EACH OCCURRENC	E	\$	25,000,000		
	EXCESS LIAB CLAIMS-MADE		CLAIMS-MADE			G74751350	6/30/2024	6/30/2025	AGGREGATE		\$	25,000,000	
	DED X RETENTION\$									\$			
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY									X PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE			ECUTIVE // N	N/A		TWC4299189	9/12/2023	9/12/2024	E.L. EACH ACCIDEN	NT.	\$	1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				N/A					E.L. DISEASE - EA E	MPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - POL	ICY LIMIT	\$	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: PORTOBELLO DRIVE & CAMINO PLAYA CANCUN, SAN DIEGO, CA 92124, NUMBER OF UNITS COVERED: 364 AM BEST RATING A XV Excellent

CERTIFICATE HOLDER	CANCELLATION
Proof of Insurance	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 Tanin Colonia
A CORD 05 (0046/00)	© 4000 0045 ACODD CODDODATION. All sights recorded