



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/11/2022

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.

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.

Table with 2 main columns: PRODUCER (Preferred Insurance Services, Inc) and CONTACT NAME (Certificate Department). Includes phone, fax, email, and insurer details (Greater New York Insurance Companies, Erie Insurance Exchange, etc.).

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.

Main table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation, and Directors & Officers/ Crime.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) This certificate shows coverages currently in force for the above named insured, and is for internal use only.

Table with 2 columns: CERTIFICATE HOLDER (Proof of Insurance) and 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. Includes signature of authorized representative).



ADDITIONAL REMARKS SCHEDULE

AGENCY Preferred Insurance Services, Inc		NAMED INSURED Parkfairfax Unit Owners Association 3360 Gunston Rd Alexandria, VA 22302	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Coverages:

Property:

Greater New York Insurance Company

Effective: 4/1/22-4/1/23

Policy #: 1119M25022

Building Coverage: \$276,775,000 Replacement Cost with Agreed Value no Co-Insurance Penalty.

Extended Replacement allows for Additional 25% in Building Coverage = \$345,968,750.

100% Replacement Cost with Agreed Value = No Coinsurance

No inflation guard.

Property Deductible: \$10,000.

The policy is special form.

Wind/hail is not excluded.

15 Days notice provided by carrier for non-payment of premium, all other 45 days notice provided.

Business Income: \$5,000,000

Single entity - Coverage for unit interior to original plans and specs. EXCLUDES Improvements & Betterments; EXCLUDES Personal Belongings. Master policy property deductible is \$10,000. Unit owner should purchase an HO-6 policy for improvements and personal belongings/liability, etc.

Ordinance/Law:

Coverage A - Loss to undamaged portion of the building = Building Limit

Coverage B - Demolition Cost = \$3,000,000

Coverage C - Increased Cost of Construction = \$3,000,000

Separation of Insureds clause included on package policy #1119M25022 per form CG 00 01 12 07. Waiver of Subrogation/Waiver of Rights of Recovery included on package policy #1119M25022 per form CP 00 17 04 02.

Equipment Breakdown and Terrorism included.

Water and Sewer Backup: \$500,000 Blanket Limit

Flood Coverage: \$5,000,000 per occurrence / Deductible: \$25,000

Earthquake Coverage: \$5,000,000 blanket / Deductible: \$25,000

Location:

3360 Gunston Rd

Alexandria VA 22302

Total Buildings: 285

Total Units: 1,684

Crime Policy: 618898670, Effective 4/1/22-4/1/23 includes Property Manager as additional insured.

Crime EXCESS policy: 106475989, Effective 4/1/22-4/1/23 provides \$2,000,000 Employee Theft Limit