

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/12/2023

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

	SUBROGATION IS WAIVED, Subject is certificate does not confer rights t							equire an endorsement	. A Sta	atement on
PRODUCER				CONTACT NAME: HOA Department						
The Buckner Company				PHONE (A/C, No, Ext): FAX (A/C, No): www.buckner.com					uckner com	
6550 S Millrock, Suite #300 Salt Lake City UT 84121				E-MAIL ADDRESS: HOA@buckner.com						
ou.	t Lanc Sky 3 : 3 : 12 :				ADDICE			DING COVERAGE		NAIC#
				INSURER A: American Alternative Insurance Corp					19720	
INSU				DONNPLA-01	INSURER B: Certain Underwriters at Lloyds					
	e Donner Place Owners Associatior Welch Randal Real Estate	1			INSURE	RC:		•		
	00 South Adams Avenue Parkway S	Suite	#8		INSURER D :					
	den UT 84405				INSURER E :					
					INSURE	RF:				
CO	/ERAGES CER	TIFIC	CATE	NUMBER: 701775280				REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIO 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.					WHICH THIS					
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD POLICY NUMBER		POLICY EFF POLICY EXP (MM/DD/YYYY)		(MM/DD/YYYY)	LIMITS			
Α	X COMMERCIAL GENERAL LIABILITY			CAU505229-5	12/8/2021		12/8/2023	EACH OCCURRENCE DAMAGE TO RENTED	0,000	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 1,000	,000
								MED EXP (Any one person)	\$ 5,000	J
								PERSONAL & ADV INJURY	\$ 2,000	,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000	
	OTHER:							Directors & Officers	\$ 2,000	,000
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY HIRED NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							(Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION\$							DED OTH	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	
	DÉSCRIPTION OF OPERATIONS below			0.411505000.5		10/0/0001	10/0/0000	E.L. DISEASE - POLICY LIMIT	\$	NE 075
A B	Blanket Bldg-Guar. Repl. Cost Employee Dishonesty Earthquake			CAU505229-5 437500147943S02		12/8/2021 12/8/2022	12/8/2023 12/8/2023	10,000 Deductible 10% Deductible	200,0	95,875 900 95,875
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 26 Units Walls In including completed additions and fixtures, improvements, and betterments Special Form / Separation of Insureds Included Equipment Breakdown - Included Wind/Hail Deductible \$10,000 Inflation Guard- Included or reviewed annually Property Manager and board included for Employee Dishonesty No Unaffiliated Projects See Attached										
CERTIFICATE HOLDER CANC				CANCELLATION						
Guild Mortgage Company And/or its successors and/or assigns				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
PO Box 85304 San Diego CA 92186				AUTHORIZED REPRESENTATIVE						
Sall Diego OA 32 100				Tury Abohu						

AGENCY	CUSTOMER ID:	DONNEI A-01
AGENCI	CUSTOMER ID:	DOMING LA-U

LOC #:

ACORD

ADDITION	IAL KEWA	KKS SCHEDULE	Page		OT		
AGENCY The Buckner Company POLICY NUMBER		NAMED INSURED The Donner Place Owners Association c/o Welch Randal Real Estate					
		5300 South Adams Avenue Parkway Suite #8 Ogden UT 84405					
CARRIER	NAIC CODE						
		EFFECTIVE DATE:					
ADDITIONAL REMARKS							
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,							
FORM NUMBER:25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE							
Separation of Insureds Included							

THIS ADDITIONAL		S FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER:	25	FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE
Separation of Insure Policy includes a Wa Standard Cancellati Coverage Noted is f	eds Included aiver of subr on Provisior or Units loca	l rogation ns to the insured apply (10/30) ated within the Association Only
		operty: 910 S Donner Way Unit #304, Salt Lake City, UT 84108 Loan#: 311-2007149

The Donner Place Owners Association

Key Insurance Information 12/08/2021

The information presented below is intended to provide a brief overview of the insurance provided by the HOA master policy. In addition, it serves as an official notice in accordance with Utah HOA law and provides a guideline for the unit owner's personal insurance needs. For complete details of Utah Law, please visit:

Condo Act - https://le.utah.gov/xcode/Title57/Chapter8/57-8.html?v=C57-8_1800010118000101

Community Association Act - https://le.utah.gov/xcode/Title57/Chapter8A/57-8a.html?v=C57-8a_1800010118000101

The HOA master insurance policy provides property insurance for: buildings, individual units and permanently attached equipment and fixtures including unit owner upgrades- the coverage provided is subject to policy provisions and exclusions. This does not include unit owner contents.

- 1. The master insurance policy deductible is **\$10,000** and applies per occurrence. In the event of a covered claim to a unit, the unit owner is responsible for this deductible which applies regardless of fault. If the HOA master policy deductible changes, the HOA must provide prior notice to the unit owners.
- 2. Earthquake and Flood insurance are not required per the governing documents and are not included under the master insurance policy.
- 3. The master insurance policy includes general liability insurance with at least a \$1,000,000 per occurrence limit.

Unit Owner Checklist

(Always consult with your personal insurance agent to determine what insurance coverage you will need)

Priority:

- ✓ Individual unit owner insurance also known as an HO6 insurance policy. This should include dwelling coverage commonly known as "Coverage A" of **no less than \$10,000**.
- ✓ Policy should be written on "special form"
- ✓ Loss Assessment Coverage
- ✓ Coverage for your personal contents
- ✓ Personal liability protection
- ✓ Additional Living Expenses

Optional Coverage's if Applicable:

- ✓ Coverage for your autos and recreational vehicles
- ✓ Loss of use and additional living expenses due to a claim
- ✓ Supplemental earthquake insurance
- ✓ Flood or surface water insurance for your unit and your contents
- ✓ Pollution Coverage which may include Mold, Lead, Asbestos and other common pollutants
- ✓ Other coverage: fine arts, jewelry, collectables, other valuable articles, money, sports equipment etc.
- ✓ Loss of rents if your unit is a rental

For individual homeowner's insurance quotes contact:

The Buckner Company Personal Lines Department #801-937-6701

For insurance certificate requests:

Visit our website at www.buckner.com

