

EVIDENCE OF PROPERTY INSURANCE

DATE (MWDD/YYYY) 10/01/2019

THIS EVIDENCE OF 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.

\ <i>\'</i>				<u> </u>				
AGENCY		Phone (A/C, No. Ext):	415-276-2811	COMPANY				
HUB International Insurance Services Inc			(A) Affiliated FM Insurance Company (FM Global Group)					
580 California Street, Ste	1300			(B) Chubb Custom Insurance Company				
San Francisco, CA 94104								
CA DOI License# 075777	6							
FAX (A/C, No):	EMAIL Addre		hubinternational.com					
CODE:		SUB CODE:						
AGENCY CUSTOMER ID#:								
INSURED				LOAN NUMBER		POLICY NUMB	ER	
Luma Homeowners Assoc	ciation	1				A) SH430	45	
c/o Action Property Manag	geme	nt				B) 8255-244	45	
2603 Main Street, Suite 50	•			EFFECTIVE DATE	EXPIRATION DATE	- □	CONTINUED UNTIL	
,	50			10/1/2019	10/1/2020		TERMINATED IF CHECKED	
Irvine, CA 92614-4261				THIS REPLACES PRIO	R EVIDENCE DATED:	•		

PROPERTY INFORMATION

LOCA	TION/	ロモるした	IPTION

1100 South Hope Street, Los Angeles, CA 90015

Unit:

Borrower: ANY UNIT-OWNER OF RECORD AT TIME OF LOSS

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 DESCRIED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
A) BUILDINGS, ASSOCIATION PERSONAL PROPERTY & BUSINESS INCOME	\$ 174,858,625	\$ 10,000
Affiliated FM ProVision Form (excluding Earthquake); Special Form; Replacement Cost;		Except
Agreed Amount. Including Boiler & Machinery; Sublimits: \$25,000,000 Flood (Flood		\$25,000 for
Deductible: \$50,000); Building Ordinance at Full policy limit; Terrorism Risk Insurance Act		water
Included.		damage
Including Earthquake Sprinkler Leakage		claims \$25,000
This association policy extends coverage to only those owners' fixtures/building improvements that the CC&Rs or governing documents state the association must insure. See attached for HO6 policies.		
B) FIDELITY BOND (Property Management Company included)	\$ 4,500,000	\$ 10,000

REMARKS (Including Special Conditions)

438BFUNS attached to policy. 236 Residential units and 4 commercial units

CANCELLATION

SHOULD ANY OF THE ABOVE POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS	
ANY LENDER OF RECORD AT TIME OF LOSS	LOAN#
	AUTHORIZED REPRESENTATIVE
	Diren Ocalan

ACORD 27 (2009/12)

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Re: HO-6 (Condominium Homeowners Policy form name)

This policy does NOT include HO-6 coverage. However, if the CC&Rs require the association, not the owners, to insure unit owners' fixtures/interior building improvements inside their apartments, the association policy will cover them but only to the extent required in the CC&Rs.

Each owner should purchase an HO6 Condominium Homeowners Policy to insure their fixtures, personal property, loss of use/additional living expense/rent loss, loss assessment and most importantly personal liability.

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYY)

10/01/2019

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 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).

PRODUCER	CONTACT NAME:			
HUB International Insurance Services Inc	PHONE (A/C, No. Ext.)	415-276-2811	FAX (a/C, No.):	
580 California Street, Ste 1300	E-MAIL ADDRESS:	sfcerts@hubinternational.	com	
San Francisco, CA 94104	PRODUCER CUSTOMER ID#:			
CA DOI License# 0757776	II	NSURER(S) AFFORDING CO	VERAGE	NAIC #
INSURED	INSURER A:	Travelers Indemnity Com	pany of	
Luma Homeowners Association		Connecticut		
c/o Action Property Management	INSURER B:	Federal Insurance Compa	ny	20281
2603 Main Street, Suite 500	INSURER C:	Philadelphia Indemnity In		
•	INSURER D:			
Irvine, CA 92614-4261	INSURER E:			

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 SLICH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUICED BY PAID CLAIMS

	USIONS AND CONDITIONS OF SUCH POLIC			SHOWN MAY HAVE BEEN REDUCE				
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYY)	POLICY EXP (MM/DD/YYYY	LIMITS	
	GENERAL LIABILITY						EACH OCCURRENCE	\$ 1,000,000
Α	X COMMERCIAL GENERAL LIABILITY			660-8471L313	10/1/2019	10/1/2020	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS-COMP OP AGG	\$ 2,000,000
	POLICY PRO- JECT X LOC							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea Accident)	\$ 1,000,000
Α	ANY AUTO			BA-6N810163	10/1/2019	10/1/2020	BODILY INJURY (Per Person)	\$
	ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per Accident)	\$
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per Accident)	\$
	X GARAGEKEEPERS LEGAL LIABILITY						Limit of Liability	\$ 500,000
	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$ 50,000,000
В	EXCESS LIAB CLAIMS-MADE			79879742	10/1/2019	10/1/2020	AGGREGATE	\$ 50,000,000
	DED RETENTION\$					9		\$
	WORKERS' COMPENS ATON AND EMPLOYERS' LIABITY Y/N						WC STATU- ORY LIMITS OTH- ER	\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT	\$
	(Mandatory in NH) If, yes, describe under						E.L. DISEASE – EA EMPLOYEE	\$
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
С	Directors and Officers Liability			PCAP006898-0218	6/04/2019	6/04/2020	Ea.Occ/Ann Aggregate Deductible	\$ 1,000,000 \$ 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required.

Homeowners Association located at 1100 South Hope Street, Los Angeles, CA 90015

Severability of interest / Separation of Insureds is included on the General Liability policy

CERTIFICATE HOLDER CAN

ANY LENDER OF RECORD AT TIME OF LOSS

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 REPRSENTATIVE

Darren Ocalase