

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 4/4/2018

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.											
PROD			lolland 9 Acco	nietee	NAME:	CONTACT NAME:					
		Chapman, H West Gulf Ba	Iolland & Asso	clates	PHONE (A/C, No, Ext): 71	PHONE (A/C, No, Ext): 713-688-1500 FAX (A/C, No): 713-688-7967					
		n TX 77040			ADDRESS: eh	ADDRESS: ehoacerts@bch-insurance.com					
					PRODUCER CUSTOMER ID:	PRODUCER CUSTOMER ID: FLATSONJAC					
						INSURER(S) AFFORDING COVERAGE					
INSU					INSURER A : Tra	INSURER A: Travelers Casualty and Surety Company					
			ill II Condomini	um		estchester Surplus				14172	
		ation sociation M	anagement Co	Inc		INSURER C: TravelersPropertyCasualtyof America-TRV					
152	01	East Freewa	v. Suite 205	., me.		INSURER D :					
		elview TX 77				INSURER E :					
CO1	/FP	AGES		CERTIFICATE NUMBER: 11602896		INSURER F : REVISION NUMBER:					
				OPERTY (Attach ACORD 101, Additional Remark				VIOION NOMBEN.			
806 Jackson Hill, Houston, TX 77007. 9 Units, 1 Building. Deductibles per occurrence: \$10,000 All Other Perils; \$25,000 All Other Wind/Hail; 2% subject to \$25,000 minimum Named Windstorm per location of the sum of all values listed in the most recent schedule of values on file; \$25,000 Sewer/Drain Backup. 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	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY		LIMITS	
В	Х	PROPERTY		D38065981002	4/1/2018	4/1/2019	x	BUILDING	\$ 1,316,5	581	
		ISES OF LOSS	DEDUCTIBLES				x	PERSONAL PROPERTY	\$ 10,000		
		BASIC	BUILDING					BUSINESS INCOME	\$		
		BROAD						EXTRA EXPENSE			
	х	SPECIAL	CONTENTS				<u> </u>	RENTAL VALUE	\$		
	~	EARTHQUAKE						BLANKET BUILDING	\$		
	V							-	\$		
	Х	WIND						BLANKET PERS PROP	\$		
		FLOOD						BLANKET BLDG & PP	\$		
	Х		REPLACEMENT				X	Additional	\$ 19,000)	
			COST					Property	\$		
	INLAND MARINE			TYPE OF POLICY				_	\$		
	CAUSES OF LOSS								\$		
		NAMED PERILS		POLICY NUMBER					\$		
									\$		
Α		CRIME		106709387	4/1/2017	4/1/2020	X	Limit	\$ \$100,0	00	
	TYP	E OF POLICY					Х	Deductible	\$\$1,000		
		oloyee Dishonesty						1	\$		
С	Х	BOILER & MACH	IINERY /	BME16K244125TIL18	4/1/2018	4/1/2019	x	Limit	\$ 1,341,5	581	
		EQUIPMENT BRE	EAKDOWN				x	Deductible	\$ \$1,000		
									\$		
								1	э \$		
SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Image: Special Conditions / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) The property limit shown above is the limit of insurance per schedule on file with the carrier for the above named insured individual association location. Special Conditions: Property: Coverage Includes Windstorm, Hurricane, and Hail. Property: Co-insurance - none See Attached											
000					041051115						
CER		ICATE HOLI	JER		SHOULD ANY O EXPIRATION DA	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.					
		For Insur	rance Verificatior	1	Foff Bra	AUTHORIZED REPRESENTATIVE Toff Brady					
					/ 00 0	0 © 1995-2015 AC	OR	D CORPORATION.	All riał	nts re	

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AGENCY CUSTOMER ID: FLATSONJAC

LOC #:

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ADDITIONAL REMARKS SCHEDULE

NAMED INSURED AGENCY Brady, Chapman, Holland & Associates Flats on Jackson Hill II Condominium Association POLICY NUMBER JDH Association Management Co., Inc. 15201 East Freeway, Suite 205 Channelview TX 77530 CARRIER NAIC CODE EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM TITLE: CERTIFICATE OF PROPERTY INSURANCE 24 FORM NUMBER:

Special Conditions

Property: Building Ordinance or Law Coverage A is included in the Building Limit of Liability. Property: Building Ordinance or Law Coverage B&C-\$1,000,000 Per Location Per Occurrence for Locations Built After 1980. \$500,000 Per Location Per

Courrence for Locations Built During or Before 1980. Property: Coverage includes the following types of property contained within a unit, if the Condominium Association Agreement requires it: Fixtures, improvements and alterations that are a part of the interior building or structure. Employee Dishonesty: Includes Designated Property Manager as Employees.