

MHOLLIDAY

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/12/2021

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.

		ROGATION IS WAIVED, subject trificate does not confer rights to							require an endorsem	ent. A s	tatement on
PRODUCER Hardenbergh Insurance Group PO Box 8000 Marlton, NJ 08053							CONTACT NAME: PHONE (A/C, No, Ext): (856) 489-9100 FAX (A/C, No):				
							E-MAIL ADDRESS: hig@hig.net				
							NAIC#				
						INSURER A : Country Mutual Insurance Company					20990
INSURED							INSURER B : Fireman's Fund				
The Villages at Cinnaminson Harbour Community Association						INSURER C: The PMA Group				12262	
c/o CAMCO Property Management 501 West Office Center Drive, Suite 220					INSURER D : Philadelphia Indemnity Ins Co.				18058		
= =							INSURER E :				
						INSURER F:					
COVERAGES CERTIFICATE NUMBER:							REVISION NUMBER:				
IN	DICAT	TO CERTIFY THAT THE POLICIEF. NOTWITHSTANDING ANY R	EQUI	REME	ENT, TERM OR CONDITION	N OF A	ANY CONTRA	CT OR OTHER	R DOCUMENT WITH RES	SPECT TO	WHICH THIS
		ICATE MAY BE ISSUED OR MAY SIONS AND CONDITIONS OF SUCH								T TO ALL	THE TERMS,
INSR LTR		TYPE OF INSURANCE ADDL SUBR POLICY NUMBER				POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)				
Α	X	COMMERCIAL GENERAL LIABILITY					,	,	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR			WA0200225951-01		5/7/2021	5/7/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
	Х	Directors & Officers							MED EXP (Any one person)	\$	5,000
	X	#9983-5026							PERSONAL & ADV INJURY	\$	
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	CLAIMS-MADE X OCCUR		WA0200225951-01	5/7/2021	5/7/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	χ Directors & Officers					MED EXP (Any one person)	\$ 5,000
	х #9983-5026					PERSONAL & ADV INJURY	\$
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$
	OTHER:					D&O	\$ 1,000,000
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
В	X UMBRELLA LIAB OCCUR			5/7/2021	5/7/2022	EACH OCCURRENCE	\$ 10,000,000
	EXCESS LIAB CLAIMS-MADE		53832-2			AGGREGATE	\$ 10,000,000
	DED X RETENTION \$ 0						\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		202101-07-66-81-6Y		5/7/2022	PER OTH- STATUTE ER	
	AND EMPEOTERS LIABILITY ANY PROPRIETOR/PARTIES Y/N	N/A		5/7/2021		E.L. EACH ACCIDENT	\$ 500,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500,000
D	Crime		PCAC010417-0220	5/7/2021	5/7/2022	Fidelity	500,000
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	CANCELLATION

The Villages at Cinnaminson Harbour Community Association c/o CAMCO Property Management 501 West Office Center Drive, Suite 220 Fort Washington, PA 19034

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