



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/12/2022

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. 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).

PRODUCER Brown & Brown of Lehigh Valley, LP 3001 Emrick Blvd Bethlehem PA 18020		CONTACT NAME: CONDO FAX: 610-317-1439 PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: condo.insurance@bbrown.com	
		INSURER(S) AFFORDING COVERAGE	
		INSURER A: American Alternative Insurance Corporation	NAIC # 19720
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	
INSURED Cinnaminson Harbour Townhomes Condominium c/o CAMCO Management 501 Office Center Dr, Ste 220 Fort Washington PA 19034			

COVERAGES

CERTIFICATE NUMBER: 22-23 MASTER

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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CAU5007895	08/10/2022	08/10/2023	EACH OCCURRENCE	\$ 1,000,000
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						MED EXP (Any one person)	\$ 5,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PERSONAL & ADV INJURY	\$ 1,000,000
A	Building Limit			CAU5007895	08/10/2022	08/10/2023	GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OP AGG	\$ 1,000,000
							OTH	\$
							COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
							EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
							PER STATUTE	
							OTH-ER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A	Building Limit			CAU5007895	08/10/2022	08/10/2023	Ded. \$2,500	GUARANTEED

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

FOR INFORMATION ONLY

100% GRC; Single Entity/Builders Standard Grade (SEE NOTEPAD for description and EXCESS CRIME)Water Damage Ded. \$2,500 per unit (149 units)

CERTIFICATE HOLDER**CANCELLATION**

Cinnaminson Harbour Townhomes c/o CAMCO Management 501 Office Center Dr, Ste 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 
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ADDITIONAL REMARKS SCHEDULE

AGENCY Brown & Brown of Lehigh Valley, LP		NAMED INSURED Cinnaminson Harbour Townhomes Condominium	
POLICY NUMBER _____		EFFECTIVE DATE: _____	
CARRIER _____	NAIC CODE _____		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

Fidelity Bond: American Alternative Ins Co - Policy #CAU5007895 - eff. 08/10/2022 - 08/10/2023 - \$150,000 /Ded.\$0.

The Property Management Company is included as an insured as respects to Fidelity/Crime Coverage.

Excess Crime/Fidelity Bond: Travelers Casualty & Surety Company: Policy #106353779 - 8/10/22-8/10/23 - \$700,000 / Excess of \$150,000

BUILDING/DWELLING COVERAGE: Ratable Limit: \$43,315,125

(SPECIAL FORM) Wind & Hail and Boiler & Machinery Equipment included.

Ordinance or Law coverage:

Coverage for loss to the undamaged portion of the building - Guaranteed Replacement Cost

Demolition Cost Coverage \$500,000

Increased Cost of Construction \$500,000

Policy includes waiver of subrogation on behalf of the unit owners.

Separation of Insureds - Cross Liability:

Except with respect to the limit of insurance, and any rights or duties specifically assigned in GENERAL LIABILITY to the first Named Insured, this insurance applies:

1. As if each Named Insured were the only Named Insured; and
2. Separately to each insured against whom claim is made or "suit" is brought.

Cancellation Notice to Named Insured Only.

Cancellation Clause Policy states:

- a. Minimum 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
- b. Minimum 30 days before the effective date of cancellation if we cancel for any other reason.

There is no inflation guard endorsement, however, the insurance carrier and the association review the values annually at renewal and increases accordingly.

"Please be advised that CAU's definition of Guaranteed Replacement Cost, as stated on our certificate of insurance, means that there is no replacement cost limit at policy issuance on buildings, structures and community personal property. The limit of insurance is Guaranteed Replacement Cost.

In the event of a covered cause of loss, we will pay the cost to repair or replace covered damaged property, less the application of a deductible."

The Association's insurance policy covers the homes with the builder's standard grade basic features. This includes such items as bathroom fixtures, kitchen cabinets, built-in appliances, basic carpeting, partitioned walls, repairing sheetrock and a sealant coat of paint. Unit owners are responsible to insure any decorations, additions, alterations, upgrades or options (such as wallpaper, lighting, painting and finished basements) that are made by the current owner, or a prior owner.

Also includes: 100% Guaranteed Replacement Cost for non-habitational amenities such as pools, clubhouses, fences, signs, light posts, tennis courts, playgrounds, etc.