



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

01/08/2026

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

<b>PRODUCER</b> ABI Insurance an ISU Network Agency 4800 SW Griffith Dr. Suite 300 Beaverton, OR 97005	<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> (503)292-1580 <b>FAX (A/C, No):</b> (503)467-4600 <b>E-MAIL ADDRESS:</b> certificates@abipdx.com <b>PRODUCER CUSTOMER ID:</b> 00016721														
<b>INSURED</b> AUO of Sunshine Creek Condominiums  c/o FRESH START Real Estate, Inc. 6107 SW Murray Blvd. Suite 313 Beaverton, OR 97008	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : Accelerant National Insurance Company</td><td></td></tr><tr><td>INSURER B : Continental Casualty Company</td><td></td></tr><tr><td>INSURER C : Federal Insurance Company</td><td></td></tr><tr><td>INSURER D :</td><td></td></tr><tr><td>INSURER E :</td><td></td></tr><tr><td>INSURER F :</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Accelerant National Insurance Company		INSURER B : Continental Casualty Company		INSURER C : Federal Insurance Company		INSURER D :		INSURER E :		INSURER F :	
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**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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 DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> <b>PROPERTY</b>	N030PK0163-04	01/10/2026	01/10/2027	BUILDING	\$
	CAUSES OF LOSS	DEDUCTIBLES			PERSONAL PROPERTY	\$
		BASIC			BUSINESS INCOME	\$
		BUILDING			EXTRA EXPENSE	\$
		25,000			RENTAL VALUE	\$
		BROAD				\$
		CONTENTS				\$
	<input checked="" type="checkbox"/> SPECIAL					\$
	<input checked="" type="checkbox"/> EARTHQUAKE	10%			<input checked="" type="checkbox"/> BLANKET BUILDING	\$ 15,079,635
	<input checked="" type="checkbox"/> WIND	25,000			BLANKET PERS PROP	\$
					BLANKET BLDG & PP	\$
						\$
	<input checked="" type="checkbox"/> Water Damage	25,000/Unit				\$
A		N030PK0163-04	01/10/2026	01/10/2027	<input checked="" type="checkbox"/> Earthquake Limit	\$ 10,000,000
	<b>INLAND MARINE</b>	TYPE OF POLICY				\$
	CAUSES OF LOSS					\$
	NAMED PERILS	POLICY NUMBER				\$
						\$
	<input checked="" type="checkbox"/> <b>CRIME</b>				<input checked="" type="checkbox"/> Employee Dishonesty	\$ 350,000
	TYPE OF POLICY	**See Page 2**	01/10/2026	01/10/2027	<input checked="" type="checkbox"/> Computer Fraud	\$ 350,000
					<input checked="" type="checkbox"/> Forgery/Alteration	\$ 100,000
A	<input checked="" type="checkbox"/> <b>BOILER &amp; MACHINERY / EQUIPMENT BREAKDOWN</b>	N030PK0163-04	01/10/2026	01/10/2027	<input checked="" type="checkbox"/> Equipment Breakdown	\$ 15,354,448
						\$
A	Commercial General Liability	N030PK0163-04	01/10/2026	01/10/2027	<input checked="" type="checkbox"/> Per Occurrence Limit	\$ 1,000,000
	Directors & Officers	618767822	01/10/2026	01/10/2027	<input checked="" type="checkbox"/> Directors & Officers	\$ 1,000,000

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

EVIDENCE OF INSURANCE  
Need a certificate for an owner or Lender  
Request Certificate from:  
www.abipdx.com

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

CMD

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## ADDITIONAL REMARKS SCHEDULE

AGENCY ABI Insurance an ISU Network Agency		NAMED INSURED AUO of Sunshine Creek Condominiums c/o FRESH START Real Estate, Inc. 6107 SW Murray Blvd. Suite 313 Beaverton, OR 97008	
POLICY NUMBER		EFFECTIVE DATE: 01/10/2026	
CARRIER	NAIC CODE		

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: \_\_\_\_\_ FORM TITLE: \_\_\_\_\_

WALLS IN COVERAGE INCLUDED  
 BETTERMENTS AND IMPROVEMENTS INCLUDED  
 GUARANTEED REPLACEMENT COST  
 54 RESIDENTIAL UNITS  
 THE PROPERTY MANAGEMENT COMPANY IS LISTED AS AN ADDITIONAL INSURED  
 CANCELLATION NOTICES ARE SENT DIRECTLY TO THE NAMED INSURED WITH A 10 DAY NOTICE FOR NON-PAY  
 AND 30 DAY NOTICE FOR ALL OTHER REASONS

The policy includes a Special Causes of Loss Form with a \$25,000 per occurrence deductible for all covered perils except as respects water damage. A \$25,000 per unit deductible applies only to water damage. In any one occurrence of loss or damage, the aggregate Per Unit Deductible shall not exceed 5% of the total Limit of Insurance for Building coverage.

#### Building Ordinance:

Coverage A (Undamaged Portion of Building) - \$15,079,635 Limit / \$25,000 Ded.

Coverage B (Demolition) - \$500,000 Limit / \$25,000 Ded.

Coverage C (Increased Cost of Construction) - \$500,000 Limit / \$25,000 Ded.

Full Employee Dishonesty Limits are written through two separate carriers which are listed as follows:

\*Accelerant National Insurance Company - Policy # N030PK0163-04 - 01/10/2026-01/10/2027 - \$50,000

\*Continental Casualty Company - Policy # 618767822 - 01/10/2026-01/10/2027 - \$300,000

The Umbrella Policy is written through the following carrier:

\*Federal Insurance Company - Policy #: G75244721 - 01/10/2026-01/10/2027 - \$5,000,000

The Directors & Officers Policy is written through Continental Casualty Company