

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

PENNP

KENTPAR-01

								-	7.	/22/2024
C B	HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMAT ELOW. THIS CERTIFICATE OF INS EPRESENTATIVE OR PRODUCER, AI	IVEL SUR/	Y OI ANCE	R NEGATIVELY AMEND	, EXTE	ND OR ALT	ER THE CO	OVERAGE AFFORDED	BY TH	IE POLICIES
lf	IPORTANT: If the certificate holde SUBROGATION IS WAIVED, subje- is certificate does not confer rights t	ct to	the	terms and conditions of	the po	licy, certain	policies may			
PRO	DUCER				CONTA NAME:	ст				
Insurance Office of America 4915 West Cypress Street Tampa, FL 33607										637-8484
						SS:		(A/C, NO).	(••••)	
						INSURER(S) AFFORDING COVERAGE				
						INSURER A : Southern-Owners Insurance Company				
INSURED										
Kentwood Park Condominium Association, Inc. c/o Ameri-Tech Community Management, Inc. 24701 US Hwy 19 N, Ste 102										
						INSURER C :				-
						INSURER D :				+
Clearwater, FL 33763						INSURER E :				+
						INSURER F :				
		E NUMBER:		REVISION NUMBER:						
IN C E	HIS IS TO CERTIFY THAT THE POLICII DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQU PER POLI	IREM TAIN, CIES.	ENT, TERM OR CONDITION , THE INSURANCE AFFORM . LIMITS SHOWN MAY HAVE	N OF A	NY CONTRA (THE POLIC REDUCED BY	CT OR OTHEF IES DESCRIE PAID CLAIMS	R DOCUMENT WITH RESPI	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs	
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	2,000,000
	CLAIMS-MADE X OCCUR			20665508		7/15/2024	7/15/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	4,000,000
								PRODUCTS - COMP/OP AGG	\$	4,000,000
								HIRED NONOWNED	\$	1,000,000
	OTHER:							COMBINED SINGLE LIMIT	Ť	
	ANY AUTO							(Ea accident)	\$	
								BODILY INJURY (Per person)	\$	
								BODILY INJURY (Per accident) PROPERTY DAMAGE	\$	
	HIRED AUTOS ONLY AUTOS ONLY							(Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE	-						AGGREGATE	\$	
	DED RETENTION \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC certificate regarding coverage for Ken	LES (ACORI	D 101, Additional Remarks Schedu	ıle, may b	e attached if mo	e space is requi	red)		
This	certificate regarding coverage for Ken	twoo	d Par	k Condominium Associatio	on, Inc.	is issued to	the certificate	e holder in regard to:		
Limi	t of insurance figure is total for all sche	dule	d iten	ns. Individual limits apply	per sch	edule on file.	Blanket limit	ts are not provided /see a	ttache	d Acord 101.
	-							-		
	Units 112 erty Manager is Additionally Insured.									
Property manager is Additionally insured. Policy includes Separation of Insureds Endorsement										
	-									
CE	RTIFICATE HOLDER				CANO	ELLATION				
								ESCRIBED POLICIES BE C		
					ACC	ORDANCE WI	TH THE POLIC	CY PROVISIONS.		

Kentwood Park Condominium Association, Inc *FOR INFORMATION PURPOSE ONLY* c/o Ameri-Tech Community Management, Inc. 24701 US Hwy 19 N, Ste 102 [Clearwater, FL 33763

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