



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/13/2019

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).

<b>PRODUCER</b> Logan Lavelle Hunt 11420 Bluegrass Pkwy Louisville, KY 40299	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(502) 499-6880</b> FAX (A/C, No): <b>(502) 499-6947</b> E-MAIL ADDRESS: <b>info@LLHins.com</b>
<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>NAIC #</b>	
<b>INSURER A : Country Mutual Insurance Company      20990</b>	
<b>INSURER B :</b>	
<b>INSURER C :</b>	
<b>INSURER D :</b>	
<b>INSURER E :</b>	
<b>INSURER F :</b>	

<b>INSURED</b> Pinnacle Gardens Condominium Council of Co-Owners, Inc. c/o Kentucky Realty Corp 3944 Bardstown Road Louisville, KY 40218	
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**COVERAGES      CERTIFICATE NUMBER:      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		
<b>A</b>	<input checked="" type="checkbox"/>	<b>COMMERCIAL GENERAL LIABILITY</b>			<b>WA0200168901</b>	<b>12/15/2018</b>	<b>12/15/2019</b>	EACH OCCURRENCE	<b>1,000,000</b>	
		<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	<b>300,000</b>	
		<input checked="" type="checkbox"/> <b>Hired Non-Owned \$1M</b>						MED EXP (Any one person)	<b>5,000</b>	
		GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							PERSONAL & ADV INJURY	<b>2,000,000</b>
		OTHER:							GENERAL AGGREGATE	
		<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)	\$	
		<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per person)	\$	
		<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						BODILY INJURY (Per accident)	\$	
		<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						PROPERTY DAMAGE (Per accident)	\$	
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>							\$	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N <input checked="" type="checkbox"/> N / A						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		
		If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT	\$	
<b>A</b>		<b>Commercial Property</b>			<b>WA0200168901</b>	<b>12/15/2018</b>	<b>12/15/2019</b>	<b>Buildings: GRC</b>		
<b>A</b>		<b>Crime (5/86)</b>			<b>WA0200168901</b>	<b>12/15/2018</b>	<b>12/15/2019</b>		<b>100,000</b>	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Total Number of Residential Buildings in Association: 8. Total Number of Units in Association: 104. BUILDING ORDINANCE OR LAW COVERAGE \$500,000  
BLANKET. EMPLOYEE DISHONESTY PROVIDES COVERAGE FOR PROPERTY MANAGER. EQUIPMENT BREAKDOWN INCLUDED.  
BUILDING VALUATION: GURANTEED REPLACEMENT COST; ORIGINAL SPECS AS OUTLINED IN THE MASTER DEED, NOT POLICY;

<b>CERTIFICATE HOLDER</b>  Pinnacle Gardens Condominium Council of Co-Owners, Inc. c/o Kentucky Realty Corp 3944 Bardstown Road Louisville, KY 40218	<b>CANCELLATION</b>  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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# STATEMENT OF VALUES

DATE (MM/DD/YYYY)  
11/28/2018

AGENCY Logan Lavelle Hunt 11420 Bluegrass Pkwy Louisville, KY 40299  CODE: AGENCY CUSTOMER ID <b>PINNGAR-01</b>	PHONE (A/C, No, Ext): <b>(502) 499-6880</b> FAX (A/C, No): <b>(502) 499-6947</b>  COMPANY <b>Country Mutual Insurance Company</b> INSURED / APPLICANT Pinnacle Gardens Condominium Council of Co-  HEADQUARTERS ADDRESS 3944 Bardstown Rd, C/O Kentucky Realty Louisville, KY 40218  COINS %      APPLICABLE CAUSES OF LOSS <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;"><input type="checkbox"/></td> <td style="width:15%;">80%</td> <td style="width:15%;"><input type="checkbox"/></td> <td style="width:15%;">BASIC</td> <td style="width:15%;"><input checked="" type="checkbox"/></td> <td style="width:15%;">EARTHQUAKE COV</td> <td style="width:15%;"><input type="checkbox"/></td> <td style="width:15%;">SPECIFIC AVERAGE RATE REQUESTED</td> </tr> <tr> <td><input type="checkbox"/></td> <td>90%</td> <td><input type="checkbox"/></td> <td>BROAD</td> <td><input type="checkbox"/></td> <td>FLOOD</td> <td><input type="checkbox"/></td> <td>BLANKET RATE REQUESTED</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>100%</td> <td><input checked="" type="checkbox"/></td> <td>SPECIAL</td> <td><input type="checkbox"/></td> <td>SPRINKLER LEAKAGE EXCL</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td></td> <td><input type="checkbox"/></td> <td>VANDALISM EXCL</td> <td><input type="checkbox"/></td> <td></td> </tr> </table>	<input type="checkbox"/>	80%	<input type="checkbox"/>	BASIC	<input checked="" type="checkbox"/>	EARTHQUAKE COV	<input type="checkbox"/>	SPECIFIC AVERAGE RATE REQUESTED	<input type="checkbox"/>	90%	<input type="checkbox"/>	BROAD	<input type="checkbox"/>	FLOOD	<input type="checkbox"/>	BLANKET RATE REQUESTED	<input checked="" type="checkbox"/>	100%	<input checked="" type="checkbox"/>	SPECIAL	<input type="checkbox"/>	SPRINKLER LEAKAGE EXCL	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	VANDALISM EXCL	<input type="checkbox"/>		NAIC CODE: <b>20990</b>  POLICY NUMBER <b>WA0200168901</b>	PAGE <b>1</b> OF <b>1</b>  EFFECTIVE DATE <b>12/15/2018</b>
<input type="checkbox"/>	80%	<input type="checkbox"/>	BASIC	<input checked="" type="checkbox"/>	EARTHQUAKE COV	<input type="checkbox"/>	SPECIFIC AVERAGE RATE REQUESTED																												
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<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	VANDALISM EXCL	<input type="checkbox"/>																													

APPLICABLE FORM NUMBERS (Attach completed forms and endorsements that require completion to provide necessary information affecting rates or loss costs)

CLASS CODE	LOC #	BLDG #	DESCRIPTION AND ADDRESS OF PROPERTY	ACV/RC <sub>1</sub>	SUBJECT <sub>2</sub>	100% VALUES	RATE OR LOSS COST <sub>3</sub>	PREMIUM
	1	1	DESC: <b>12 Units</b> ADDRESS: <b>13500-13522 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,309,700.00</b>		
	2	1	DESC: <b>14 Units</b> ADDRESS: <b>13630-13658 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,694,650.00</b>		
	3	1	DESC: <b>14 Units</b> ADDRESS: <b>13600-13626 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,694,650.00</b>		
	4	1	DESC: <b>13 Units</b> ADDRESS: <b>13601-13625 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,502,175.00</b>		
	5	1	DESC: <b>12 Units</b> ADDRESS: <b>3400-3422 Pinnacle Gardens Drive, Louisville, KY 40245</b>	G	B	<b>\$2,309,700.00</b>		
	6	1	DESC: <b>12 Units</b> ADDRESS: <b>3401-3423 Pinnacle Gardens Drive, Louisville, KY 40245</b>	G	B	<b>\$2,309,700.00</b>		
	7	1	DESC: <b>13 Units</b> ADDRESS: <b>13527-13551 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,502,175.00</b>		
	8	1	DESC: <b>14 Units</b> ADDRESS: <b>13528-13554 Pinnacle Gardens Circle, Louisville, KY 40245</b>	G	B	<b>\$2,694,650.00</b>		
			DESC: ADDRESS:					
			DESC: ADDRESS:					
			DESC: ADDRESS:					
<b>TOTAL</b>						<b>\$</b>	<b>N/A</b>	<b>\$</b>

**INSTRUCTIONS**

1. ACV (Actual Cash Value) or RC (Replacement Cost): If other valuation basis applies, provide necessary information.
2. SUBJECT:  
 B = Building    S = Stock    F = Furniture & Fixtures    M = Machinery  
 BPP = Your Business Personal Property    PPO = Personal Property of Others  
 BI = Business Income    R = Rental Income    Other - specify
3. RATE OR LOSS COST: For class rated property, attach class rate information form or equivalent information for each location. For specifically rated property, attach specific rate or loss cost information if known.

**SIGNATURE**

ALL VALUES AND LOCATION INFORMATION ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

INSURED'S SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_