

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 6/26/2024

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.

PRODUCER	CONTACT NAME:	W. Hurley Ryan, Jr.				
Chatham Insurance Partners PO Box 5370	PHONE (A/C, No, Ext): 912-232-2500 FAX (A/C, No): 912			2-2510		
Savannah GA 31414	E-MAIL ADDRESS: hurley@chathaminsurance.com					
	PRODUCER CUSTOMER ID:					
	INSURER(S) AFFORDING COVERAGE			NAIC#		
INSURED	INSURER A:	Philadelphia Indemnity Insurance Cor	urance Company			
Brockington Square Condominium Association Inc	INSURER B: Lloyd's of London			15792		
7160 Hodgson Memorial Dr Ste 101	INSURER C: Old Republic Union Insurance Company			31143		
Savannah GA 31406	INSURER D :					
	INSURER E:					
	INSURER F :					

COVERAGES CERTIFICATE NUMBER: 1205207051 REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) 310 Tibet Avenue, Savannah, GA 31406

Replacement Cost Basis See Attached...

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.

ISR TR			SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY	LIMITS
С	Χ	PROPERTY		AMR84220	5/26/2024	5/26/2025	Х	BUILDING	\$ 12,363,650
	CAL	JSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	\$
		BASIC	BUILDING					BUSINESS INCOME	\$
		BROAD	10000 CONTENTS	_				EXTRA EXPENSE	\$
	Χ	SPECIAL						RENTAL VALUE	\$
		EARTHQUAKE						BLANKET BUILDING	\$
	Χ	WIND	100,000					BLANKET PERS PROP	\$
		FLOOD						BLANKET BLDG & PP	\$
	Χ	NamedStorm	3%				Х	Ord or Law A	\$ 12,363,650
							Х	Ord or Law B/C	\$ 100,000
		INLAND MARINE		TYPE OF POLICY					\$
	CAL	JSES OF LOSS							\$
		NAMED PERILS		POLICY NUMBER					\$
									\$
4	Χ	CRIME		PCAC005708-0619	5/26/2024	5/26/2025	Х	Employee Theft	\$ 100,000
	TYP	PE OF POLICY							\$
	Crin	me							\$
5	Χ	BOILER & MACH		AMR84220	5/26/2024	5/26/2025	Х	Equipment	\$ 12,363,650
		EQUIPMENTER	EARDOWN					Breakdown	\$
3		ned Storm Ded Back Policy		B1393EBUS00011811	5/26/2024	5/26/2025	Х	Named Storm Ded	\$2%
	Day	Duoit 1 only							\$

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

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Brockington Square Condo	W. Hersley Ryan, Q.

AGENCY CUSTOMER ID:	
LOC #	

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ACORD °

ADDITIONAL REMARKS SCHEDULE

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ADDITI	OITAL ILLINA	INNO OCHEDOLL	. age		
AGENCY Chatham Insurance Partners		NAMED INSURED Brockington Square Condominium Association Inc			
POLICY NUMBER		7160 Hodgson Memorial Dr Ste 101 Savannah GA 31406			
CARRIER	NAIC CODE				
		EFFECTIVE DATE:			
ADDITIONAL REMARKS					
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,					

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: 24 FORM TITLE: CERTIFICATE OF PROPERTY INSURANCE			
FORM NUMBER: 24 FORM TITLE: CERTIFICATE OF PROPERTY INSURANCE DESCRIPTION OF PROPERTY:			
No Co-Insurance 80 Residential Units Wind Deductible Buy Back Policy buys Named Storm deductible from 3% to 2% per building, \$50,000 minimum			