



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
01/15/2019

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.

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> <b>Travers Hartnett Insurance Agency</b> <b>1045 E. Atlantic Ave., Ste 203</b> <b>Delray Beach, FL 33483</b> <b>www.traversins.com</b>		<b>CONTACT NAME:</b> <b>Maggie Mascuñana</b> <b>PHONE (A/C, No, Ext):</b> <b>561-243-0166</b> <b>FAX (A/C, No):</b> <b>866-297-8549</b> <b>E-MAIL:</b> <b>mmascunana@traversins.com</b> <b>ADDRESS:</b> <b>PRODUCER CUSTOMER ID:</b> <b>LONGWPRO</b>	
<b>INSURED</b>  <b>The Longwood Condo. Assoc. Inc</b> <b>c/o Wantland Realty Corp</b> <b>11078 Monet Lane, Ste 100</b> <b>Palm Beach Gardens, FL 33410</b>		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A : American Coastal Ins Co</b> <b>INSURER B : Aspen Specialty Insurance</b> <b>INSURER C : DISTINGUISHED PROPERTIES</b> <b>INSURER D :</b> <b>INSURER E :</b> <b>INSURER F :</b>	<b>NAIC #</b>

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
11811 Ave of PGA Bldg 5-A3, Palm Beach Gardens, FL 33418

### MASTER CERTIFICATE

126 Residential Units - 7 Buildings - Flood Zone B

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"/> PROPERTY	AMC-31766-04 W/ WND	1/13/2019	1/13/2020	<input checked="" type="checkbox"/> BUILDING	\$ 15,261,184
	CAUSES OF LOSS DEDUCTIBLES				PERSONAL PROPERTY	\$
	BASIC BUILDING	100% Replacement Cost			BUSINESS INCOME	\$
	BROAD \$5,000				EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL CONTENTS	Includes Ordinance or Law			RENTAL VALUE	\$
	EARTHQUAKE				BLANKET BUILDING	\$
A	<input checked="" type="checkbox"/> WND 5%				BLANKET PERS PROP	\$
	FLOOD				BLANKET BLDG & PP	\$
		CIUHOA004014-00	1/13/2019	1/13/2020		\$
B	<input checked="" type="checkbox"/> D&O Liab. \$1,000					\$ 1,000,000
	INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS	POLICY NUMBER				\$
	NAMED PERILS					\$
						\$
B	<input checked="" type="checkbox"/> CRIME	CIUHOA004014-00	1/13/2019	1/13/2020		\$ 300,000
	TYPE OF POLICY					\$
	Emp Dishonesty					\$
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	AMC-31766-04	1/13/2019	1/13/2020		\$ 10,000,000
						\$
B	General Liab.	CIUHOA004014-00	1/13/2019	1/13/2020		\$ 1 MM per occ
						\$ 2MM agg.

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

C - UMB - UM30149565- 01-13-2019-20 - Limits \$25,000,000

## CERTIFICATE HOLDER

## CANCELLATION

\*\*\*\*\*MASTER CERTIFICATE\*\*\*\*\*  
 \*\*\*\*\*  
 \*\*\*\*\*  
 \*\*\*\*\*

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

Tim Renfro

© 1995-2009 ACORD CORPORATION. All rights reserved.

## FLOOD POLICY DECLARATIONS

General Property

Renewal

**Mail To:** Insured

---

LONGWOOD CONDO ASSN  
11811 AVENUE OF P G A  
PALM BEACH GARDENS, FL 33418-3892

---





Policy Number: 99059974552019

## FLOOD POLICY DECLARATIONS

Hartford Insurance Company of the Midwest

Type: Renewal

Preferred Risk

Policy Period: 02/16/2019 To 02/16/2020

Original New Business Effective Date: 02/16/2008

Reinstatement Date:

Form: General Property

For payment status, call: (888) 245-7274

These Declarations are effective

as of: 02/16/2019 at 12:01 AM

Address Info

## Producer Name and Mailing Address:

TRAVERS HARTNETT PA  
TRAVERS HARTNETT INSURANCE AGENCY  
1045 E ATLANTIC AVE STE 203  
DELRAY BEACH, FL 33483-6955

## Insured Name and Mailing Address:

LONGWOOD CONDO ASSN  
11811 AVENUE OF P G A  
PALM BEACH GARDENS, FL 33418-3892

NFIP Policy Number: 9905997455

Agent/Agency #: 04500-97473-345

Reference #:

Phone #: (561)243-0505

NAIC Number: 19682

## Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

Property Info

## Property Location:

11811 AVENUE OF P G A  
PALM BEACH GARDENS, FL 33418-3892

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone:

Community Number: 12 0221 0378 F

Community Name: PALM BEACH GARDENS, CITY OF

Grandfathered: No

Pre-Firm Construction

Program Type: Regular

## Building Description:

Non-Res. Business

One Floor

No Basement/Enclosure/Crawlspace

Main House

## Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost: \$400,000

Number of Units: 1

Coverage &amp; Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation						
Building:	450,000	/	1,250			Premium Subtotal:	1,754.00					
Contents:	100,000	/	1,250			Multiplier:						
Contents	Lowest Floor Only Above Ground Level					ICC Premium:	5.00					
Location:						CRS Discount:	.00					
Coverage Limitations May Apply. See Your Policy Form for Details.						Reserve Fund Assmt:	264.00					
						HFIAA Surcharge:	250.00					
						Federal Policy Fee:	25.00					
						Probation Surcharge:	.00					
						Endorsement Amount:	.00					
						Total Premium Paid:	2,298.00					

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Mortgage Info

*Douglas Elliott*  
Douglas Elliott, President

*Terence Shields*  
Terence Shields, Secretary