



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 5/23/2024
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**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.**

<b>PRODUCER</b> Securis LLC 200 Southdale Ctr  Edina MN 55435	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>CONTACT NAME:</b> Shane Jensen</td> </tr> <tr> <td><b>PHONE (A/C, No, Ext):</b> (952) 693-0770</td> <td><b>FAX (A/C, No):</b></td> </tr> <tr> <td colspan="2"><b>E-MAIL ADDRESS:</b> shane@securisinsurance.com</td> </tr> <tr> <td colspan="2"><b>PRODUCER CUSTOMER ID:</b></td> </tr> </table>	<b>CONTACT NAME:</b> Shane Jensen		<b>PHONE (A/C, No, Ext):</b> (952) 693-0770	<b>FAX (A/C, No):</b>	<b>E-MAIL ADDRESS:</b> shane@securisinsurance.com		<b>PRODUCER CUSTOMER ID:</b>							
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<b>INSURED</b> Lemar Estates Townhome Po Box 82  Rogers MN 55374-0082	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><b>INSURER(S) AFFORDING COVERAGE</b></td> <td style="text-align: center;"><b>NAIC #</b></td> </tr> <tr> <td><b>INSURER A:</b> FIDELITY &amp; GUAR INS CO</td> <td style="text-align: center;">35386</td> </tr> <tr> <td><b>INSURER B:</b></td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>	<b>INSURER A:</b> FIDELITY & GUAR INS CO	35386	<b>INSURER B:</b>		<b>INSURER C:</b>		<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>	
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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"/> PROPERTY	BIP-5W829561	06/01/2024	06/01/2025	BUILDING	\$		
	CAUSES OF LOSS				DEDUCTIBLES		\$	
	<input type="checkbox"/> BASIC				BUILDING	25,000	BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				CONTENTS		EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL						RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE						<input checked="" type="checkbox"/> BLANKET BUILDING	\$ 20,748,915
	<input checked="" type="checkbox"/> WIND				5%		BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD						BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> HAIL				5%		<input checked="" type="checkbox"/> Replacement Cost	\$ Included
							<input checked="" type="checkbox"/> Agreed Value	\$ Included
	<b>INLAND MARINE</b>	TYPE OF POLICY			\$			
	CAUSES OF LOSS				\$			
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER			\$			
					\$			
	<b>CRIME</b>				\$			
	TYPE OF POLICY				\$			
					\$			
	<b>BOILER &amp; MACHINERY / EQUIPMENT BREAKDOWN</b>				\$			
					\$			
A	CGL	BIP-5W829561	06/01/2024	06/01/2025	<input checked="" type="checkbox"/> Per Occurrence	\$ 2,000,000		
					<input checked="" type="checkbox"/> General Aggregate	\$ 4,000,000		

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

All in including betterments and improvements. 36 Units. Ordinance or Law coverage A: Policy limit, Coverage B and C combined: \$250,000. 2% Inflation Guard. 10 Day notice of Cancellation. Equipment Breakdown Excluded - no central equipment. Severability of Interests.

<b>CERTIFICATE HOLDER</b>  <p style="text-align: center;">***Informational Only***</p>	<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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