

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/05/2024

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.								
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 cer	tificate holder in lieu of such			0105			
	NAME:							
Trustco Insurance Agency	(A/C, No, Ext): (001) 270 0041 (A/C, No): (001) 270 0001				278-9051			
2735 East Parleys Way	ADDRESS: betsyc@trustcoinc.com							
Suite 305	INSURER(S) AFFORDING COVERAGE				NAIC #			
Salt Lake City	INSURER A: Owners Ins Co				32700			
INSURED	INSURER B :							
Village Professional Building Co	INSURER C :							
c/o Welch Randall Property Ma	INSURER D :							
5300 South Adams Avenue Parkway, Suite 8 Oaden UT 84405			INSURER E :					
Ogden								
		E NUMBER: 2024 - GL, BU	- 3		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 SU	BR	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE		0,000	
					DAMAGE TO RENTED PREMISES (Ea occurrence)	_{\$} 300,	000	
Assoc. Directors & Officers Liabilty					MED EXP (Any one person)	_{\$} 10,0	00	
A		47-272910-01	06/15/2024	06/15/2025	PERSONAL & ADV INJURY	\$ 2,00	0,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	_{\$} 4,00	0,000	
					PRODUCTS - COMP/OP AGG	_{\$} 4,00	0,000	
OTHER:					Assoc. D&O Liability	\$ 2,00	0,000	
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$		
ANY AUTO					BODILY INJURY (Per person)	\$		
OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$		
HIRED NON-OWNED AUTOS ONLY AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$		
						\$		
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$		
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$		
DED RETENTION \$						\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER			
	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	\$		
Building - Special form					Limit	\$2,5	56,200	
A Replacement Cost		47-272910-01	06/15/2024	06/15/2025	Deductible	\$1,0	00	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Operations of the insured: Commercial Condominium Association								
CERTIFICATE HOLDER	CANCELLATION							
Welch Randall Property Manag 5300 S. Adams Avenue Parkwa	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
Suite 8	AUTHORIZED REPRESENTATIVE							
Ogden		UT 84405	2	lizalu	with & Clark			

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