

ACORD**CERTIFICATE OF PROPERTY INSURANCE**DATE (MM/DD/YY)
07/02/10

PRODUCER

Wateridge Insurance Services
10717 Sorrento Valley Rd.
San Diego CA 92121David Walker
Phone: 858-452-2200 Fax: 858-452-6004

INSURED

Bellefontaine Homeowners Assn
PO Box 34398
San Diego CA 92163

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A Granite State Insurance Co.

COMPANY B Great American Ins. Company

COMPANY C

COMPANY D

COVERAGE

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	025888500-02	07/06/10	07/06/11	<input checked="" type="checkbox"/> BUILDING	\$ 10,300,000	
	CAUSES OF LOSS				<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 30,000	
					<input type="checkbox"/> BASIC	BUSINESS INCOME	\$
					<input type="checkbox"/> BROAD	EXTRA EXPENSE	\$
					<input checked="" type="checkbox"/> SPECIAL	BLANKET BUILDING	\$
					<input type="checkbox"/> EARTHQUAKE	BLANKET PERS PROP	\$
					<input type="checkbox"/> FLOOD	BLANKET BLDG & PP	\$
					<input checked="" type="checkbox"/> R/C	<input checked="" type="checkbox"/> DEDUCT	\$ 5,000
					<input type="checkbox"/>		\$
					<input type="checkbox"/>		\$
<input type="checkbox"/>		\$					
	INLAND MARINE					\$	
	TYPE OF POLICY					\$	
	CAUSES OF LOSS					\$	
	<input type="checkbox"/> NAMED PERILS					\$	
<input type="checkbox"/> OTHER		\$					
B	<input checked="" type="checkbox"/> CRIME	38-21-1872	07/06/10	07/06/11	<input checked="" type="checkbox"/> Employee Dishonesty	\$ 50,000	
	TYPE OF POLICY					\$	
	BOILER & MACHINERY					\$	
	OTHER					\$	

LOCATION OF PREMISES/DESCRIPTION OF PROPERTY

RE: 2400 6TH AVE., SAN DIEGO, CA 92101

SPECIAL CONDITIONS/OTHER COVERAGES

*10 day notice of cancellation applies for nonpayment of premium

PROOF OF INSURANCE

10006MA

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

David L. Walker

ACORD 21 (7/05)

ACORD CORPORATION