



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
08/30/2021

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.

PRODUCER ABI Insurance an ISU Network Agency 4800 SW Griffith Dr. Suite 300 Beaverton, OR 97005	CONTACT NAME: PHONE (A/C, No, Ext): (503)292-1580 FAX (A/C, No): (503)467-4600 E-MAIL ADDRESS: certificates@abipdx.com PRODUCER CUSTOMER ID: 00016892	
	INSURER(S) AFFORDING COVERAGE	
INSURED Tanglewood Hills Condominium Owners' Association c/o The Management Trust - Northwest PO Box 23099 Tigard, OR 97228	INSURER A : Sutton National Insurance Company	
	INSURER B : QBE Specialty Insurance Company	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

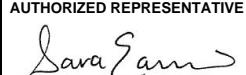
COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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	X	PROPERTY	SNI0005932-00	08/31/2021	08/31/2022	BUILDING	\$	
		CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
		BASIC				BUILDING	BUSINESS INCOME	\$
		BROAD				10,000	EXTRA EXPENSE	\$
	X	SPECIAL				CONTENTS	RENTAL VALUE	\$
	X	EARTHQUAKE				5%	X BLANKET BUILDING	\$36,354,947
	X	WIND				10,000	BLANKET PERS PROP	\$
	X	Water Damage				25,000	BLANKET BLDG & PP	\$
B			SSE88733-01	08/31/2021	08/31/2022	X Earthquake Limit	\$37,443,454	
	INLAND MARINE		TYPE OF POLICY				\$	
	CAUSES OF LOSS						\$	
	NAMED PERILS		POLICY NUMBER				\$	
	CRIME						\$	
	TYPE OF POLICY						\$	
A	X	BOILER & MACHINERY / EQUIPMENT BREAKDOWN	SNI0005932-00	08/31/2021	08/31/2022	X Equipment Breakdown	\$37,146,500	
A		Commercial General Liability	SNI0005932-00	08/31/2021	08/31/2022	X Per Occurrence Limit	\$1,000,000	

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

CERTIFICATE HOLDER EVIDENCE OF INSURANCE Need a certificate for an owner or Lender Request Certificate from: www.abipdx.com	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. AUTHORIZED REPRESENTATIVE  KNM
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ADDITIONAL REMARKS SCHEDULE

AGENCY ABI Insurance an ISU Network Agency		NAMED INSURED Tanglewood Hills Condominium Owners' Association c/o The Management Trust- Northwest PO Box 23099 Portland, OR 97228	
POLICY NUMBER		EFFECTIVE DATE: 08/31/2021	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ FORM TITLE: _____

WALLS IN COVERAGE INCLUDED
 BETTERMENTS AND IMPROVEMENTS INCLUDED
 GUARANTEED REPLACEMENT COST
 158 RESIDENTIAL UNITS

THE PROPERTY MANAGEMENT COMPANY IS LISTED AS AN ADDITIONAL INSURED
 CANCELLATION NOTICES ARE SENT DIRECTLY TO THE NAMED INSURED WITH A 10 DAY NOTICE FOR
 NON-PAY AND 30 DAY NOTICE FOR ALL OTHER REASONS

A \$25,000 WATER DAMAGE DEDUCTIBLE APPLIES

Building Ordinance:
 Coverage A (Undamaged Portion of Building) - \$36,354,947 Limit / \$10,000 Ded.
 Coverage B (Demolition) - \$1,000,000 Limit / \$10,000 Ded.
 Coverage C (Increased Cost of Construction) - \$1,000,000 Limit / \$10,000 Ded.