

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/06/2020

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 certificate holder in liqu of such endorsement(s).

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	DUCER	tile c	Citiii	cate floider in fled of 3dcff	CONTACT Michalo Doy						
1	rbrough Medlin & Associates				PHONE (214) 423-3333 (A/C, No, Ext): (214) 423-3350						
	O Granite Pkwy, #500				(A/C, No, Ext): (214) 423-3333 (A/C, No): (214) 423-333 (A/C, No): (214)						
0.0											
Plar	00			TX 75024	INSURER(S) AFFORDING COVERAGE INSURER A . Amtrust Group					NAIC #	
INSU				17. 70024	Dhiladalahia ladawaitu laaswaa						
INSU	HOA of Brentwood Place				INCOREIX D.						
	c/o LSWPM				INSURER C:						
	8668 John Hickman Pkwy #801				INSURER D:						
	Frisco			TX 75034	INSURER E :						
				NUMBER: 20-21 liability	NSURER F:						
		REVISION NUMBER:	IOD								
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,											
	(CLUSIONS AND CONDITIONS OF SUCH PO		REDUC								
INSR LTR	TYPE OF INSURANCE	INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT			
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	φ .	0,000	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	_{\$} 100,		
	≥ 60 UNITS							MED EXP (Any one person)	\$ 5,00		
Α				WPP1814196-01		04/03/2020	04/03/2021	PERSONAL & ADV INJURY	Φ ′	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	Ψ	0,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,00	0,000	
	OTHER:							HIRED/NON-OWNED	\$ 1,00	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							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			
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	11/ A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
	DIRECTORS' & OPERATIONS'							LIMIT	\$1,0	00,000	
В	BINESTONG & OF ENVIRONG			PCAP020954-0219		04/03/2020	04/03/2021	DEDUCTIBLE	\$1,0	00	
DESC	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 1	01, Additional Remarks Schedule.	may be a	ttached if more sr	ace is required)				
		- (,	.,	•	,				
	TIFICATE LIOL DED				CANCELLATION						
CER	RTIFICATE HOLDER			CANC	ELLATION						
For Information Only****************************, For For Information						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						
					fl DMll						
					KIL, D19-UN						



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PRO	DUCER				CONTACT Michele Day						
Sca	rbrough Medlin & Associates				PHONE (A/C, No, Ext): (214) 423-3333 FAX (A/C, No): (214) 423-3350						
570	0 Granite Pkwy, #500				E-MAIL MicheleD@scarbrough-medlin.com						
					INSURER(S) AFFORDING COVERAGE					NAIC#	
Pla	no			TX 75024	INSURER A: Amtrust Group						
INSL	IRED				INSURER B: Philadelphia Indemnity Insurance						
	HOA of Brentwood Place				INSURER C :						
c/o LSWPM						INSURER D :					
	8668 John Hickman Pkwy #801				INSURE	RE:					
Frisco TX 75034					INSURER F:						
co	VERAGES CER	TIFIC	ATE	NUMBER: 20-21 liability	'			REVISION NUMBER:			
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INSR LTR		ADDL	SUBR		POLICY EFF POLICY EXP						
LIK	COMMERCIAL GENERAL LIABILITY	INSD	WVD	WVD POLICY NUMBER		(MM/DD/YYYY)	(MIM/DD/YYYY)	EACH OCCURRENCE	\$ 1,000,000		
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED	\$ 100,		
	★ 60 UNITS							PREMISES (Ea occurrence)	\$ 5,00		
Α				WPP1814196-01		04/03/2020	04/03/2021	MED EXP (Any one person) PERSONAL & ADV INJURY	φ	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	7	0,000	
	PRO-							PRODUCTS - COMP/OP AGG	7	0,000	
	OTHER:							HIRED/NON-OWNED	\$ 1,00		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY							(i ci accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$]							\$		
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	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
	DIRECTORS' & OPERATIONS'							LIMIT	\$1,0	00,000	
В	BINLEGICING & OF EIGHTOING			PCAP020954-0219		04/03/2020	04/03/2021	DEDUCTIBLE	\$1,0	00	
DES	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI	ES (AC	ORD 1	 01, Additional Remarks Schedule,	may be a	ttached if more sp	pace is required)				
Leg	acy Southwest is additional insured as response	ects to	the C	General Liability and Directors	Liability	1					
CERTIFICATE HOLDER CANCELLATION											
Legacy Southwest Property Management 8868 John Hickman Parkway #801						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						
Frisco TX 75034						for mel					