



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
6/13/2022

**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> HUB International Northwest, LLC 12100 NE 195th Street, Suite 200 Bothell WA 98011	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>CONTACT NAME:</b></td> </tr> <tr> <td><b>PHONE (A/C, No. Ext):</b></td> <td><b>FAX (A/C, No):</b></td> </tr> <tr> <td colspan="2"><b>E-MAIL ADDRESS:</b></td> </tr> <tr> <td colspan="2"><b>PRODUCER CUSTOMER ID:</b></td> </tr> </table>	<b>CONTACT NAME:</b>		<b>PHONE (A/C, No. Ext):</b>	<b>FAX (A/C, No):</b>	<b>E-MAIL ADDRESS:</b>		<b>PRODUCER CUSTOMER ID:</b>							
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<b>INSURED</b> Bradford Court Condominium Owners Association 3022 SW Bradford St, Unit 401 Seattle WA 98126	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> Philadelphia Indemnity Insurance Company</td> <td>18058</td> </tr> <tr> <td><b>INSURER B:</b> American Empire Insurance Company</td> <td>37990</td> </tr> <tr> <td><b>INSURER C:</b> Evanston Insurance Company</td> <td>35378</td> </tr> <tr> <td><b>INSURER D:</b> Scottsdale Insurance Company</td> <td>41297</td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Philadelphia Indemnity Insurance Company	18058	<b>INSURER B:</b> American Empire Insurance Company	37990	<b>INSURER C:</b> Evanston Insurance Company	35378	<b>INSURER D:</b> Scottsdale Insurance Company	41297	<b>INSURER E:</b>		<b>INSURER F:</b>	
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**COVERAGES** **CERTIFICATE NUMBER: 480261728** **REVISION NUMBER:**

**LOCATION OF PREMISES / DESCRIPTION OF PROPERTY** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 3022 SW Bradford St Seattle, WA 98126. Units=38. Hold No Reserves. Prem paid by assn. At issue, prop policy covers perm betterments/improvements (WALLS-IN) in units. Sep of Insds incl in GL. Prop Mgmt covered by Fid. Waiver of Subrog against owner applies to Prop/GL. Prop Values reviewed annually.

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
B	<input checked="" type="checkbox"/>	<b>PROPERTY</b>	CPPE72880901	6/9/2022	6/9/2023	<input checked="" type="checkbox"/> BUILDING	\$ 8,442,088
		CAUSES OF LOSS				<input type="checkbox"/> PERSONAL PROPERTY	\$
						<input type="checkbox"/> BUSINESS INCOME	\$
		BASIC				<input type="checkbox"/> EXTRA EXPENSE	\$
		BROAD				<input type="checkbox"/> RENTAL VALUE	\$
	<input checked="" type="checkbox"/>	SPECIAL				<input type="checkbox"/> BLANKET BUILDING	\$
		EARTHQUAKE				<input type="checkbox"/> BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/>	WIND				<input type="checkbox"/> BLANKET BLDG & PP	\$
		FLOOD				<input checked="" type="checkbox"/> Bldg Ord A	\$ Up to Bldg Limit
	<input checked="" type="checkbox"/>	Repl. Cost				<input checked="" type="checkbox"/> Bldg Ord B & C	\$ 765,994
	<input checked="" type="checkbox"/>	No Co-Ins.					
	<input type="checkbox"/>	<b>INLAND MARINE</b>	TYPE OF POLICY				\$
		CAUSES OF LOSS					\$
		NAMED PERILS	POLICY NUMBER				\$
							\$
A	<input checked="" type="checkbox"/>	<b>CRIME</b>	PCAC0108600320	6/9/2022	6/9/2023	<input checked="" type="checkbox"/> Emp. Dishonesty	\$ 500,000
		TYPE OF POLICY					\$
		Fidelity					\$
B	<input checked="" type="checkbox"/>	<b>BOILER &amp; MACHINERY / EQUIPMENT BREAKDOWN</b>	CPPE72880901	6/9/2022	6/9/2023	<input checked="" type="checkbox"/> Mech. Breakdown	\$ Up to Bldg Limit
							\$
D C		General Liability	CPS7595723	6/9/2022	6/9/2023	<input checked="" type="checkbox"/> Occ./Aggregate	\$ 1M / \$2M
		Earthquake/Flood	MKL5BPR000656	6/9/2022	6/9/2023	<input checked="" type="checkbox"/> Ded: EQ 2%**	\$ 8,083,038

**SPECIAL CONDITIONS / OTHER COVERAGES** (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 \*Water Damage Deductible: \$50,000 per occurrence.  
 \*\*Flood Deductible: \$50,000 per occurrence.  
 At least 30 days notice of cancellation will be provided to the association, except in the case of non-payment of premium which is 10 days.

<b>CERTIFICATE HOLDER</b>  .Evidence of Insurance To add Unit Owner/Mortgagee Clause Send Req to HUB NW, LLC at now.info@hubinternational.com or Fax: 425-485-8489	<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.  <b>AUTHORIZED REPRESENTATIVE</b> 
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