



CERTIFICATE OF INSURANCE

DATE: 2/23/2024 9:49:11 AM

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. 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 be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such an endorsement(s).

PRODUCER

Community Association Underwriters Of America
40 Lake Bellevue, Suite 100
Bellevue, WA 98005

If you have any corrections or changes please Fax to (267)757-7410, email to certs@cauinsure.com or visit our website at www.cauinsure.com.

COMPANY

A American Alternative Insurance Corporation

POLICY NUMBER
CAU507768

ANNIVERSARY DATE
2/27/2024

EXPIRATION DATE
2/27/2025

INSURED

Hidden Wood West Association
C/O Diamond Community Management
7512 Stanich Lane, Suite 6
Gig Harbor, WA 98335

COVERAGES AS OF 3/9/2024

THIS IS TO CERTIFY THAT 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.

A PROPERTY

RESIDENTIAL BUILDINGS
OTHER BUILDINGS
STRUCTURES
COMMUNITY PERSONAL PROPERTY

AMOUNT OF INSURANCE	DEDUCTIBLE
Guaranteed Replacement Cost	\$2,500
Guaranteed Replacement Cost	\$2,500
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Guaranteed Replacement Cost	\$2,500

A EARTHQUAKE

None

A FLOOD

None

A LIABILITY

BODILY INJURY AND PROPERTY DAMAGE
PERSONAL INJURY AND ADVERTISING INJURY
PROPERTY DAMAGE LEGAL LIABILITY - REAL PROPERTY
MEDICAL PAYMENTS

LIMIT OF INSURANCE	TYPE OF LIMIT
\$1,000,000	OCCURRENCE
\$1,000,000	OFFENSE
\$1,000,000	OCCURRENCE
\$5,000	EACH PERSON

A DIRECTORS & OFFICERS LIABILITY

ERRORS & OMISSIONS INSURANCE

EACH LOSS	EACH POLICY YEAR
\$1,000,000	\$1,000,000

A FIDELITY

EMPLOYEE DISHONESTY

AMOUNT OF INSURANCE
FULL-ALS

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE: