

**INSURANCE DISCLOSURE FOR BALLENA BAY TOWNHOME ASSOCIATION**  
**POLICY PERIOD 03/31/2019 to 03/31/2020**

THIS SUMMARY OF THE ASSOCIATION'S POLICIES OF INSURANCE PROVIDES ONLY CERTAIN INFORMATION, AS REQUIRED BY SECTION 5300 OF THE CIVIL CODE, AND SHOULD NOT BE CONSIDERED A SUBSTITUTE FOR THE COMPLETE POLICY TERMS AND CONDITIONS CONTAINED IN THE ACTUAL POLICIES OF INSURANCE. ANY ASSOCIATION MEMBER MAY, UPON REQUEST AND PROVISION OF REASONABLE NOTICE, REVIEW THE ASSOCIATION'S INSURANCE POLICIES AND, UPON REQUEST AND PAYMENT OF REASONABLE DUPLICATION CHARGES, OBTAIN COPIES OF THOSE POLICIES. ALTHOUGH THE ASSOCIATION MAINTAINS THE POLICIES OF INSURANCE SPECIFIED IN THIS SUMMARY, THE ASSOCIATION'S POLICIES OF INSURANCE MAY NOT COVER YOUR PROPERTY, INCLUDING PERSONAL PROPERTY, OR REAL PROPERTY IMPROVEMENTS TO OR AROUND YOUR DWELLING, OR PERSONAL INJURIES OR OTHER LOSSES THAT OCCUR WITHIN OR AROUND YOUR DWELLING. EVEN IF A LOSS IS COVERED, YOU MAY NEVERTHELESS BE RESPONSIBLE FOR PAYING ALL OR A PORTION OF ANY DEDUCTIBLE THAT APPLIES. ASSOCIATION MEMBERS SHOULD CONSULT WITH THEIR INDIVIDUAL INSURANCE BROKER OR AGENT FOR APPROPRIATE ADDITIONAL COVERAGE.

**A. COMMERCIAL GENERAL LIABILITY INSURANCE**

1. Name of Insurer: **American Alternative Ins.**
2. Limits of Liability:
  - 2.1 per occurrence: **\$1,000,000**
  - 2.2 aggregate: **\$1,000,000**
3. Deductible:

**B. COMMERCIAL LIABILITY UMBRELLA OR EXCESS LIABILITY INSURANCE**

1. Name of Insurer: **Firemans Fund Insurance Co.**
2. Limits of Liability:
  - 2.1 per occurrence: **\$15,000,000**
  - 2.2 aggregate: **\$15,000,000**
3. Deductible:

**C. COMMERCIAL PROPERTY INSURANCE**

1. Name Insurer: **American Alternative Ins.**
2. Blanket Building Limit: **\$27,750,000**
3. Business Personal Property Limit:
4. Property Insurance Deductible: **\$10,000**
5. Person or entity that is responsible for paying the property insurance deductible in the event of a loss: **HOA**
6. Does the property insurance coverage extend to the real property improvements to the separate interests? **\*Contingent upon the association's CC&R's\***  
Yes  No

**D. FIDELITY INSURANCE**

1. Name of Insurer: **Liberty Mutual Insurance**
2. Limit: **\$500,000**
3. Deductible: **\$5,000**
4. Person or entity that is responsible for paying the deductible: **HOA**

**E. EARTHQUAKE &/OR FLOOD INSURANCE**

Earthquake: Yes  No   
Flood: Yes  No

1. Name of Earthquake or Flood Insurer: \_\_\_\_\_
2. Earthquake or Flood policy Limit: \$ \_\_\_\_\_
3. Deductible: \_\_\_\_\_
4. Person or entity that is responsible for paying the earthquake or flood insurance deductible in the event of a loss: \_\_\_\_\_

**F. DIRECTORS & OFFICERS LIABILITY INSURANCE**

1. Name of Insurer: **American Alternative Ins.**
2. Limit of Liability: **\$1,000,000**
3. Deductible: **\$5,000**
4. Person or entity that is responsible for paying the deductible:

**G. MECHANICAL BREAKDOWN INSURANCE**

1. Name of Insurer:
2. Limit:
3. Deductible:
4. Person or entity that is responsible for paying the deductible:

**H. WORKERS COMPENSATION & EMPLOYERS LIABILITY**

1. Name of Insurer: **PMA Insurance Group**
2. Limit: **\$1,000,000**
3. Deductible:
4. Person or entity that is responsible for paying the deductible: **HOA**

LaBARRE/OKSNEE INSURANCE

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