

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/Y/YYY) 09/02/2021

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.

	this cortificate is being proposed for										
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.											
Associations Insurance Agency, Inc.			CONTACT NAME: Associations Insurance Agency, Inc.								
5401 North Central Expressway, Suite 315			PHONE: (866) 384-8579 FAX: (214) 751-2390					390			
Dallas, TX 75205				E-MAIL ADDRESS: CertificateRequest@AssociationsInsuranceAgency.com							
					PRODUCER CUSTOMER ID: 00003921						
			INSURER(S) AFFORDING COVERAGE NAIC #								
NSURED Zuehl Airport Flying Community Owners Association,			INSURER A:								
Inc.			INSURER B:								
c/o Associa Hill Country - San Antonio			INSURER C: Philadelphia Indemnity Insurance								
300 E Sonterra Blvd #250			INSURER D:								
San Antonio TX 78130				INSURER E:							
					INSURER F:						
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:						
CE EX	DICATED, NOTWITHSTANDING ANY REG	T, TERM OR CONDITION OF THE INSURANCE AFFORDED LIMITS SHOWN MAY HAVE	F ANY CONTRACT D BY THE POLICIE BEEN REDUCED E	EN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD Y CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, I REDUCED BY PAID CLAIMS.							
INSR LTR	TYPEOFINSURANCE ADDL SUBR INSD WVD POLICY NUMBER				POLICY EFF DATE (MM/DD/YYY)	POLICY EXP DATE (MM/DD/YYY)	E LIMITS				
	COMMERCIAL GENERAL LIABILITY					(**************************************	EACH OCCL		\$	0	
	CLAIMS-MADE OCCUR	1					DAMAGE TO	D RENTED	5		
	SEVERABILITY OF INTEREST		l					(Fa occurrence)	\$		
A			1			l	<u> </u>		9		
_	GEN'L AGGREGATE LIMIT APPLIES PER:						 	& ADV INJURY	φ •		
	POLICY PROJECT LOC					l		GGREGATE	\$		
						•	PRODUCTS	- COMP/OP AGG	\$		
_	OTHER:						COMPINED ONLY		\$		
	AUTOMOBILE LIABILITY				COMBINED SIN		SINGLE LIMIT (Ea	\$			
	ANY AUTO						BODILY INJU	JRY (Per person)	\$		
A	ALL OWNED SCHEDULED AUTOS						BODILY INJU	JRY (Per accident)	\$		
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY accident)	DAMAGE (Per	\$		
							an mem		\$		
	UMBRELLA LIAB CCCUR						EACH OCCU	IRRENCE	\$		
В	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$		\$ \$		
	DED RETENTION \$								*		
	WORKERS COMPENSATION				 		X PER	ОТН-	•		
	AND EMPLOYERS LIABILITY ANY PROPPREITOR/PARTNER/EXECUTIVE						ISTATUI		9		
D	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. EACH A		Þ		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E - EA EMPLOYEE	\$		
								E - POLICY LIMIT	\$		
С	Directors & Officers			PCAP022214-0319	08/23/2021	08/23/2022	LIMIT		\$	1,000,000	
enra	IAL CONDITIONS (OTHER CONTRACTOR				1		DEDUCTIBLE	Ξ	\$	1,000	
Ιf	NAL CONDITIONS / OTHER COVERAGES (Attact General Liability coverage ured with respects to the	e is	pu:	rchased by the Insi	ured, the ma	ed) unagement co	mpany i	s an Additi	ona	ı l	
CE	RTIFICATE HOLDER				CANCELLATIO	N					
** Insurance Verification **					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						
		Dana Rungo Hockyon									
		Dana Hodge									

COMMENTS / REMARKS

Zuehl Airport Flying Community Owners Association, Inc CERTIFICATE OF LIABILITY INSURANCE CONT.										
D&O coverage is purchased by the Insured, the management company is an Additional Insured th respects to the D&O policy.										
If Umbrella Liability coverage is purchased by the Insured, the Umbrella Liability policy is following form as per the General Liability policy.										

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