



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

01/01/2019

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.

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.

PRODUCER Jakab Insurance PO Box 111 Jensen Beach, FL 34958	CONTACT NAME: Customer Service	
	PHONE (A/C, No, Ext): 772-341-6606	
	FAX (A/C, No):	
	E-MAIL ADDRESS:	
PRODUCER CUSTOMER ID:		
INSURED River Vista Condo Asso. 1950 NE Indian River Drive Jensen Beach, FL 34957 16 UNITS	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Citizens	
	INSURER B: Centrix Insurance	
	INSURER C: Centrix Insurance	
	INSURER D: Centrix Insurance	
	INSURER E:	
	INSURER F:	

COVERAGES	CERTIFICATE NUMBER: 2014	REVISION NUMBER:
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LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)


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	
A	<input checked="" type="checkbox"/> PROPERTY	CFP1051399	11/01/2018	11/01/2019	<input checked="" type="checkbox"/> BUILDING	\$ 493,500	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
					BUILDING	BUSINESS INCOME	\$
	<input type="checkbox"/> BASIC				1000/5%	EXTRA EXPENSE	\$
	<input type="checkbox"/> BROAD				CONTENTS	RENTAL VALUE	\$
	<input type="checkbox"/> SPECIAL					BLANKET BUILDING	\$
	<input type="checkbox"/> EARTHQUAKE					BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/> WIND					BLANKET BLDG & PP	\$
	<input type="checkbox"/> FLOOD						\$
	replacement cost				\$		
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$	
	CAUSES OF LOSS					\$	
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$	
						\$	
B	<input checked="" type="checkbox"/> CRIME	B7890909	11/01/2018	11/01/2019		\$ 100,000	
	TYPE OF POLICY					\$	
						\$	
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$	
						\$	
C/D	GENERAL LIABILITY DO PACKAGE	B45078907	11/01/2018	11/01/2019		\$ 2,000,000	
						\$	

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CONDO MASTER POLICY DOES NOT AFFORD COVERAGE FOR INTERIOR UNIT. CLIENT SHOULD PURCHASE UNIT OWNERS POLICY

CERTIFICATE HOLDER	CANCELLATION
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	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 

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