

ACORD EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
02/26/2010

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAS BEEN ISSUED, IS IN FORCE, AND CONVEYS ALL THE RIGHTS AND PRIVILEGES AFFORDED UNDER THE POLICY.

PRODUCER NAME, CONTACT PERSON AND ADDRESS CIBA Insurance Services 655 N Central Ave, Suite 2100 Glendale, CA 91203 License # 0D44433 p 818-638-8525 or 818-245-1010 f 818-245-1750		PHONE (A/C, No, Ext) FAX (A/C, No): E-MAIL ADDRESS:	COMPANY NAME AND ADDRESS REFER TO APPENDIX(ES) LISTED AND ATTACHED HERETO FOR SCHEDULE OF PARTICIPATING INSURANCE COMPANIES AND POLICY NUMBERS APPENDIX(ES) CAN ALSO BE FOUND AT WWW.CIBASERVICES.COM RI & L	NAIC NO.
CODE: 163 / CWIS	SUB CODE:	PROGRAM: Basic Residential Property & Liability - A		
AGENCY CUSTOMER ID #: Mammoth Fireside Condominium Association		LOAN NUMBER	POLICY NUMBER REFER TO APPENDIX	
NAMED INSURED AND ADDRESS Mammoth Fireside Condominium Association, as Trustees for the Mammoth Condominium Unit Owners c/o Tomasch & Butner P O Box 1999		EFFECTIVE DATE 03/31/2010	EXPIRATION DATE 03/31/2011	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (Use additional sheets if more space is required)

LOCATION/DESCRIPTION
 PID # P00006231
 40 Canyon Boulevard, Mammoth Lakes, CA 93546-0000
 PER SCHEDULE OF LOCATIONS ATTACHED LOCATIONS SUBJECT TO ENDORSEMENTS AS ATTACHED

COVERAGE INFORMATION	CAUSE OF LOSS FORM		BASIC	BROAD	X	SPECIAL	OTHER
	YES	NO					
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE	\$ 500,000 000					per occurrence	DED \$5,000
BUSINESS INCOME / RENTAL VALUE (incl Extra Expense)		X				LIMIT	X Actual Loss Sustained # of months 12
BLANKET COVERAGE	X						If YES indicate amount of insurance on properties identified above \$ \$500,000,000
TERRORISM COVERAGE		X					Attach signed Disclosure Notice / DEC
IS COVERAGE PROVIDED FOR CERTIFIED ACTS ONLY?						SUB LIMIT	DED
IS COVERAGE A STAND ALONE POLICY?						LIMIT	DED
DOES COVERAGE INCLUDE DOMESTIC TERRORISM?						SUB LIMIT	DED
COVERAGE FOR MOLD	X					LIMIT \$10,000	DED \$5,000
MOLD EXCLUSION (if YES specify organization's form used)		X					
REPLACEMENT COST	X						
AGREED AMOUNT		X					
COINSURANCE		X				%	
EQUIPMENT BREAKDOWN (if Applicable)	X					LIMIT \$50,000,000	DED \$5,000
LAW AND ORDINANCE - Coverage for loss to undamaged portion of building	X					LIMIT INCLUDED	DED \$5,000
Demolition Costs	X					LIMIT REFER TO ENDORSEMENT	DED \$5,000
- Incr Cost of Construction	X					LIMIT REFER TO ENDORSEMENT	DED \$5,000
EARTHQUAKE (if Applicable)		X				LIMIT	DED
FLOOD (if Applicable)		X				LIMIT	DED
WIND / HAIL (if Separate Policy)						LIMIT	DED REFER TO ENDORSEMENT
PERMISSION TO WAIVE SUBROGATION PRIOR TO LOSS		X					

REMARKS - Including Special Conditions (Use additional sheets if more space is required)

REFER TO ATTACHED REMARKS SECTION

CANCELLATION

THE POLICIES ARE SUBJECT TO THE PREMIUMS FORMS AND RULES IN EFFECT FOR EACH POLICY PERIOD SHOULD THE POLICY(IES) BE TERMINATED THE COMPANY(IES) WILL GIVE THE INSURED INTEREST IDENTIFIED 30 DAYS WRITTEN NOTICE 10 DAYS FOR NON-PAYMENT AND WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY THAT WOULD AFFECT THAT INTEREST IN ACCORDANCE WITH THE POLICY PROVISIONS OR AS REQUIRED BY LAW

ADDITIONAL INTEREST

NAME AND ADDRESS MORTGAGEE LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS AUTHORIZED REPRESENTATIVE <i>Wayne Swenson</i>
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REMARKS - Including Special Conditions

PRIMARY BROKER OF RECORD:

Central Western Insurance Services
919 E. Coventry Court
Fresno, CA 93720
License #
Dave Black
Phone (559) 434-3480 Fax (559) 434-7423

SCHEDULE OF LOCATIONS:

LOC/ BLDG	ADDRESS/DESCRIPTION	PROPERTY TYPE YEAR BUILT SPRINKLERS	CONSTRUCTION TYPE NUM OF BUILDINGS NUM OF STORIES	BUILDING VALUE	RENTAL VALUE	CONTENTS VALUE	PARKING VALUE	TIV
Primary	40 Canyon Boulevard Mammoth Lakes, CA 93546-0000	Condominiums 1975 None	frame/combustible 003 Bldgs + 000 Park 003 Flrs + 000 Bsmt + 000 Park	\$4 500 000				\$4 500 000

ENDORSEMENTS APPLICABLE (refer to full endorsement wording attached hereto):

IN ADDITION TO THE MASTER POLICY ENDORSEMENTS, THE FOLLOWING ADDITIONAL ENDORSEMENTS APPLY TO THIS LOCATION (IF APPLICABLE):

<u>Effective Date:</u>	<u>Removal Date:</u>	<u>Endorsement # :</u>	<u>Endorsement Name:</u>
03/31/2010		01 HOA-020 CO 0110	HOMEOWNERS AND CONDOMINIUM ASSOCIATION UNIT PROPERTY LIMITATION (\$20,000 Limit Per Unit)
03/31/2010		01 TE-001 EX 0309	Time Element Exclusion
03/31/2010		01 DCI-1 0M LI 0110	COVERAGE B - DEMOLITION AND COVERAGE C - INCREASED COST OF CONSTRUCTION COMBINED SINGLE SUB-LIMIT
03/31/2010		01 HOA-011 LI 0309	LOSS OF INCOME COVERAGE LIMITED TO CONDOMINIUM FEE INCOME ONLY

TO BE ATTACHED TO AND FORM PART OF THE EVIDENCE OR CERTIFICATE OF INSURANCE ISSUED TO

**Mammoth Fireside Condominium Association, as Trustees for the Mammoth
Condominium Unit Owners**

40 Canyon Boulevard
Mammoth Lakes, CA 93546-0000

Policy Number:

Property
01 HOA-020 CO 0110

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**HOMEOWNERS AND CONDOMINIUM ASSOCIATION UNIT PROPERTY
LIMITATION (\$20,000 Limit Per Unit)**

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at locations where the Evidence of Property Insurance or certificate of insurance issued to the Insured Associate states that this endorsement applies.

Coverage for condominium unit property is provided, if the insured condominium association's Conditions, Covenants and Restrictions require the condominium association to insure said property.

Condominium unit property is defined as:

Fixtures; major appliances that will be permanently installed and used for cooking, dishwashing, refrigerating, ventilating, laundry, security or housekeeping; cabinets; countertops; floor coverings; ceiling coverings; wall coverings; installations; alterations; or additions; that comprise part of the building when situated within a portion of the premises used exclusively by an individual condominium unit owner.

Condominium unit property does not include any other personal property owned by or in the care, custody of the condominium unit owner.

Loss, if any, shall be adjusted with and payable to the insured condominium association.

This property coverage is excess over any other insurance, whether primary, excess, contingent or on any other basis, regardless of source.

A sub-limit of \$20,000 per occurrence applies to each individual condominium association unit.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

TO BE ATTACHED TO AND FORM PART OF THE EVIDENCE OR CERTIFICATE OF INSURANCE ISSUED TO

**Mammoth Fireside Condominium Association, as Trustees for the Mammoth
Condominium Unit Owners**
40 Canyon Boulevard
Mammoth Lakes, CA 93546-0000

Policy Number:

Property
01 TE-001 EX 0309

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Time Element Exclusion

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at locations where the Evidence of Property Insurance or certificate of insurance issued to the Insured Associate states that this endorsement applies.

It is agreed that coverage for Loss of Income and Extra Expense, including coverage for Extended Period of Indemnity are excluded for the property insured.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

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**Mammoth Fireside Condominium Association, as Trustees for the Mammoth
Condominium Unit Owners**

40 Canyon Boulevard
Mammoth Lakes, CA 93546-0000

Policy Number:

Property
01 DCI-1.0M LI 0110

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**COVERAGE B - DEMOLITION AND COVERAGE C - INCREASED COST OF
CONSTRUCTION COMBINED SINGLE SUB-LIMIT**

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at locations where the Evidence of Property Insurance or certificate of insurance issued to the Insured Associate states that this endorsement applies.

It is hereby agreed that all coverage for building ordinance Coverage B - Demolition and/or Coverage C - Increased Cost of Construction is subject to a single, combined sub-limit of \$1,000,000 per occurrence per location for the property to which this endorsement applies.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

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**Mammoth Fireside Condominium Association, as Trustees for the Mammoth
Condominium Unit Owners**

40 Canyon Boulevard
Mammoth Lakes, CA 93546-0000

Policy Number:

Property
01 HOA-011 LI 0309

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**LOSS OF INCOME COVERAGE LIMITED TO CONDOMINIUM FEE INCOME
ONLY**

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at locations where the Evidence of Property Insurance or certificate of insurance issued to the Insured Associate states that this endorsement applies.

It is agreed that section 7. COVERAGE, item B. LOSS OF INCOME, paragraph (1) is deleted and replaced by

b. LOSS OF INCOME

(1) This policy is extended to cover loss the ACTUAL LOSS OF INCOME SUSTAINED by the Insured resulting directly from the necessary untenability caused by loss, damage, or destruction by any of the perils covered herein during the term of the policy to real or personal property as described in clause 7.a., but not exceeding the reduction in income less charges and expenses which do not necessarily continue during the period of untenability, not to be limited by the expiration date of this policy.

For the purpose of this insurance "income" is defined as income reasonably expected from loss of monthly condominium fees from individual unit owners;

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED