



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

07/07/2025

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.

<b>PRODUCER</b>  Dreher Insurance 1805 Herrington Rd, Bdg 1 Ste C Lawrenceville, GA 30043	<b>CONTACT</b> NAME: PHONE (A/C, No, Ext): (678)205-0224 FAX (A/C, No): (678)497-0810 E-MAIL ADDRESS: coi@dreher.insure PRODUCER CUSTOMER ID: 00000490														
<b>INSURED</b>  Covered Bridge At Barnes Mill Condo Association c/o Michael Weinman 4480 South Cobb Drive, Suite H-114 Smyrna, GA 30080	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : American Alternative Association Corp.</td><td>19720</td></tr><tr><td>INSURER B :</td><td></td></tr><tr><td>INSURER C :</td><td></td></tr><tr><td>INSURER D :</td><td></td></tr><tr><td>INSURER E :</td><td></td></tr><tr><td>INSURER F :</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : American Alternative Association Corp.	19720	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Smyrna GA 30082

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	X	PROPERTY	CAU531115-2	06/30/2025	06/30/2026	X BUILDING	\$ GRC
		CAUSES OF LOSS DEDUCTIBLES					
		BASIC BUILDING					\$
		BROAD \$5,000					\$
	X	SPECIAL CONTENTS					\$
		EARTHQUAKE					\$
	X	WIND 2% per bldg					\$
		FLOOD					\$
	X	Water \$25,000/unit					\$
							\$
		INLAND MARINE	TYPE OF POLICY				\$
		CAUSES OF LOSS					\$
		NAMED PERILS	POLICY NUMBER				\$
							\$
A	X	CRIME	CAU531115-2	06/30/2025	06/30/2026		\$
		TYPE OF POLICY					\$
		Crime /Fidelity				X	\$ 150,000
A	X	BOILER & MACHINERY / EQUIPMENT BREAKDOWN	CAU531115-2	06/30/2025	06/30/2026		\$
							\$
A		Ordinance / Law	CAU531115-2	06/30/2025	06/30/2026	X Cov. A	\$ GRC
						X Cov. B&C	\$300,000 each

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

Residential Condominium Association - 70 Units

Property coverage is walls-in back to original built specifications. Unit owners' betterments and improvements are not covered

Guaranteed Replacement Cost. Ratable Limit \$23,300,000. The sum of all applicable deductibles is not more than 5% of the buildings' RCV.

The management company is an additional insured on the crime coverage.

30-day notice of cancellation, 10-day notice of cancellation for non-payment.

**CERTIFICATE HOLDER****CANCELLATION**

For Informational Purposes Only

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

PSL

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