

Commercial Certificate of Insurance



FARMERS

Agency
 Name • Dan Watson
 & • 2222 WESTERN TRAILS BLVD STE 10
 Address • Austin, TX 78745
 • 512-447-7822

Issue Date (MM/DD/YY) 05/11/2011

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies shown below.

St. 35 Dist. 34 Agent 360

Companies Providing Coverage:

Insured
 Name • PARK AT QUAIL CREEK, THE
 & • SEE E0002
 Address • C/O ALLIANCE ASSN MGMT 115 WIL
 • AUSTIN, TX 78746

Company **A** Truck Insurance Exchange
 Letter
 Company **B** Farmers Insurance Exchange
 Letter
 Company **C** Mid-Century Insurance Company
 Letter
 Company **D** _____
 Letter

Coverages

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.

Co. Ltr.	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Policy Limits	
C	General Liability ✕ Commercial General Liability ✕ - Occurrence Version Contractual - Incidental Only Owners & Contractors Prot.	60500-85-10	05/01/2011	05/01/2012	General Aggregate Products-Comp/OPS Aggregate Personal & Advertising Injury Each Occurrence Fire Damage (Any one fire) Medical Expense (Any one person)	\$ 2,000,000 \$ 1,000,000 \$ 1,000,000 \$ 1,000,000 \$ 75,000 \$ 5,000
	Automobile Liability All Owned Commercial Autos Scheduled Autos ✕ Hired Autos ✕ Non-Owned Autos Garage Liability				Combined Single Limit Bodily Injury (Per person) Bodily Injury (Per accident) Property Damage Garage Aggregate	\$ 1,000,000 \$ \$ \$ \$
A	✕ Umbrella Liability	60500-85-16	05/01/2011	05/01/2012	Limit	\$ 5,000,000
	Workers' Compensation and Employers' Liability				Statutory Each Accident Disease - Each Employee Disease - Policy Limit	\$ \$ \$

Description of Operations/Vehicles/Restrictions/Special items:

9602 Park Village Dr
 Building Coverage - \$18,750,000
 Property Deductible - \$5,000 incl wind/hail

Certificate Holder

Name •
 & •
 Address •

Cancellation

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Dan Watson
 Authorized Representative