



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
7/1/2019

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.

PRODUCER Kraus - Anderson Insurance 420 Gateway Blvd Burnsville MN 55337	CONTACT NAME: Certificates Department	
	PHONE (A/C. No. Ext): 952-707-8200 FAX (A/C. No): 952-890-0535	
	E-MAIL ADDRESS: certificates@kainsurance.com	
	PRODUCER CUSTOMER ID: PORTTOW-01	
	INSURER(S) AFFORDING COVERAGE	
INSURED Portland Tower Association, Inc. c/o First Service Residential 8100 Old Cedar Avenue South Suite 300 Bloomington MN 55425	INSURER A: Continental Casualty Company	NAIC # 20443
	INSURER B: National Fire Insurance Compan	20478
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 528325952 REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Location: 740 Portland Avenue South, Minneapolis, MN 55415.

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	
B	<input checked="" type="checkbox"/> PROPERTY	6042659128	7/1/2019	7/1/2020	<input checked="" type="checkbox"/> BUILDING	\$ 57,306,000	
	CAUSES OF LOSS				DEDUCTIBLES	<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 150,000
	<input type="checkbox"/> BASIC				BUILDING	<input type="checkbox"/> BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				\$5,000	<input type="checkbox"/> EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL				CONTENTS	<input type="checkbox"/> RENTAL VALUE	\$
	<input checked="" type="checkbox"/> EARTHQUAKE				\$5,000	<input type="checkbox"/> BLANKET BUILDING	\$
	<input type="checkbox"/> WIND				25,000	<input type="checkbox"/> BLANKET PERS PROP	\$
	<input checked="" type="checkbox"/> FLOOD				25,000	<input type="checkbox"/> BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> RC						\$
	<input checked="" type="checkbox"/> Agreed Amt						\$
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY			\$		
	CAUSES OF LOSS				\$		
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER			\$		
A	<input checked="" type="checkbox"/> CRIME	618683337	7/1/2019	7/1/2020	<input checked="" type="checkbox"/> Emplie Dishones	\$ 500,000	
	TYPE OF POLICY				<input checked="" type="checkbox"/> Forgery & Alter	\$ 500,000	
					<input checked="" type="checkbox"/> Deductible	\$ 2,500	
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN				\$		
					\$		
					\$		
					\$		

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Association Property coverage applies per the Associations Declarations and By-Laws
113 Units in Association

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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/1/2019

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Kraus - Anderson Insurance 420 Gateway Blvd Burnsville MN 55337	CONTACT NAME: Certificates Department PHONE (A/C. No. Ext): 952-707-8200 E-MAIL ADDRESS: certificates@kainsurance.com	FAX (A/C. No): 952-890-0535
	INSURER(S) AFFORDING COVERAGE	
INSURED PORTTOW-01 Portland Tower Association, Inc. c/o First Service Residential 8100 Old Cedar Avenue South Suite 300 Bloomington MN 55425	INSURER A: National Fire Insurance Compan NAIC # 20478	
	INSURER B: Greenwich Insurance Company 22322	
	INSURER C: Pennsylvania Manufacturers Ass 12262	
	INSURER D:	
	INSURER E:	
INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 1492095392 **REVISION NUMBER:**

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			6042659128	7/1/2019	7/1/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			C 6042659100	7/1/2019	7/1/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			PPP7460991	7/1/2019	7/1/2020	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	2019011017714Y	7/1/2019	7/1/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Location: 740 Portland Avenue, Minneapolis, MN

Sexton Parking Association Inc. is included as a named Insured.
 Association Property coverage applies per the Association's Declarations and By-Laws.

CERTIFICATE HOLDER For Informational Purposes Only	CANCELLATION 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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HO6 Homeowners Insurance Coverage

Kraus-Anderson Insurance can assist in your placement of a personal HO6 Homeowners policy that will include coverage for certain gaps between your insurance and the Portland Tower Association insurance program.

To obtain a quotation, please fill out the information below and either fax, email or call directly.

- **Household Names & Birth dates:**
- **Address (including Unit #):**
- **Personal Property Coverage Amount:**
- **Your Name / Phone # / Email:**

Ask me about bundling your auto with an HO6 policy!

Sincerely,

Matt Akin | Insurance Advisor
makin@kainsurance.com | direct 952.707.8207

KRAUS-ANDERSON INSURANCE
420 Gateway Blvd. Burnsville, MN 55337
office 952.707.8200 | fax 952.890.0535 | kainsurance.com

Together, we make *the* difference



July 1, 2019

Dear Portland Tower Homeowner:

Your association has purchased a Master Insurance Policy on behalf of all owners at **Portland Tower Association**. A portion of the assessments you pay as a homeowner goes towards payment of this policy. It's important to understand the coverage provided through this master policy and what you, as a homeowner, should insure separately. The following is a summary of insurance provided.

Master Insurance Policy. Covers exposures that are common to association owners and must be insured per the association's governing documents. Contained within these governing documents is specific language addressing the "depth" of coverage. The association has determined that the master policy provide "**All In**" coverage also known as '**Walls In**' coverage. This means that the master policy covers the common elements and improvements and betterments made to individual units by the declarant and/or the individual unit owner. The unit owner would be required to insure any personal property, including decorating.

Property Deductible. The master policy has a **\$5,000 Property Deductible per Occurrence**. If more than one unit were damaged in any one occurrence, unit owners affected would share in the \$5,000 deductible.

General Liability. The master policy provides liability coverage for the association with limits of **\$1,000,000 per Occurrence** and **\$2,000,000 Aggregate** per policy year. This coverage is for third party claims of bodily injury or property damage resulting from normal operations of the association.

Umbrella or Excess liability. The association has purchased additional liability limits. Limit is **\$5,000,000 per Occurrence** per policy year.

Directors & Officers Liability and Employee Dishonesty. The association has purchased this coverage.

In addition, it is very **important** to have coverage under a **HO6 Homeowner's Policy** to close gaps and cover potential claims not covered under the associations master policy. The following page provides a list of specific items to review with your insurance agent prior to purchasing a HO6 policy.

Each Unit Owner is encouraged to purchase an **HO6 Homeowners Policy** for protection of the following:

1. **Movable contents (Personal Property)**. Here you would identify a dollar value for personal property items such as clothing and furniture.
2. **Loss Assessment Coverage**: This section of your policy should be at a minimum of \$5,000 to match the \$5,000 property damage deductible in the master property policy. In the event there is a need for the association to pay for repairs from disasters that would not be covered by the Association's Master Policy; the Association can assess the Homeowners/Unit Owner per the Uniform Condominium Agreement. This would cover such things as deductibles and uninsured or underinsurance situations. **Please verify with your Personal Lines agent that the insurance carrier you have selected will pick up at least \$5,000 should you be assigned this responsibility; higher limits are recommended. Some carriers have limitations on this coverage.**
3. **The HO6 Deductible**: This is the amount you are willing to self-insure. If there is a loss this is the amount you are willing to pay. Your insurance company will offer options.

It is important to give this letter to your personal lines agent to make sure you purchase the proper coverage.

Kraus-Anderson Insurance can assist with your purchase of a HO6 Homeowners Insurance Policy. Please complete the attached - one page form and forward to Matt Akin's attention (Contact information on form).

This is a short summary of the coverages under the Association's Master Policy as they relate to your HO6 policy and your Association's documents. If you have questions, please call or email me.

Sincerely,



Deborah L. Daniels, CISR, CIC | Account Executive
ddaniels@kainsurance.com | direct 952.707.8262

KRAUS-ANDERSON INSURANCE

420 Gateway Blvd. Burnsville, MN 55337

office 952.707.8200 | fax 952.890.0535 | kainsurance.com

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