

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/18/2018

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.

PRODUCES TOOS West Gulf Bank Houston TX 77040 REMINISTRANCE OF THE POLICY SERVINGS Bermulda Dunes Villa Townhome Associates From July Above Court Bank Bermulda Dunes Villa Townhome Association 1,0201 East Fwy, Ste 2005 REMINISTRANCE OF THE POLICY SERVINGS COVERAGES CERTIFICATE NUMBER: 100496534 REVISION NUMBER: REVIS		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).											
Brady, Chapman, Holland & Associates 1005 West Cutt Bank Houston TX 77440 Mail	_	<u> </u>		CONTACT									
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MEMBER A. Central Mutual Insurance Co. 20230 Bermuda Dunes Villas Townhome Association OutDH Association Management Co., Inc. 15201 East Fwy, 158 205 Channelwew TX 7530 ***Mounter P.** **COVERAGES** **CERTIFICATE NUMBER: 1094966344 **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **MOUNTER'S TANDING ANY REQUIREMENT. TENM OR COUNTING OF MY COUNTING OF OR PAID CLAIMS. **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD **REVISION NUMBER:** **THIS IST O CERTIFY THAT THE POLICY PERIOD **CERTIFICATE OF INSURANCE LISTED **THIS IST O CERTIFY THAT THE POLICY PERIOD **CERTIFICATE NUMBER:** **THIS IST O CERTIFY THAT THE POLICY PERIOD **THIS ISSUED TO THE INSURED TO THE INSURED TO THE POLICY PERIOD **THIS ISSUED TO THE POLICY PERIOD NAMED ABOVE AND THE TENMS. **THIS ISSUED TO THE POLICY PERIOD NAMED ABOVE AND THE TENMS. **THIS ISSUED TO THE POLICY PERIOD NAMED ABOVE AND THE TENMS. **THIS ISSUED TO THE POLICY PERIOD NAMED ABOVE AND THE TENMS. **THIS ISSUED TO THE POLICY PERIOD NAMED ABOVE AND THE POLICY PERIOD NAMED A	1000St011 1 X / / U4U												
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