



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

01/02/2026

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 ABI Insurance an ISU Network Agency 4800 SW Griffith Dr. Suite 300 Beaverton, OR 97005	CONTACT NAME: PHONE (A/C, No, Ext): (503)292-1580 FAX (A/C, No): (503)467-4600 E-MAIL ADDRESS: certificates@abipdx.com PRODUCER CUSTOMER ID: 00026408														
INSURED Murray Park Condominiums Association of Unit Owners c/o FRESH START Real Estate, Inc. 6107 SW Murray Blvd. #313 Beaverton, OR 97008	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : Accelerant National Insurance Company</td><td></td></tr><tr><td>INSURER B : Palomar Specialty Insurance Company</td><td></td></tr><tr><td>INSURER C : Federal Insurance Company</td><td></td></tr><tr><td>INSURER D : Continental Casualty Company</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 : Accelerant National Insurance Company		INSURER B : Palomar Specialty Insurance Company		INSURER C : Federal Insurance Company		INSURER D : Continental Casualty Company		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)

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	<input checked="" type="checkbox"/> PROPERTY	N030PK3247-01	01/01/2026	01/01/2027	BUILDING	\$
	CAUSES OF LOSS DEDUCTIBLES				PERSONAL PROPERTY	\$
	BASIC BUILDING				BUSINESS INCOME	\$
	BROAD 25,000				EXTRA EXPENSE	\$
	SPECIAL CONTENTS				RENTAL VALUE	\$
	<input checked="" type="checkbox"/> EARTHQUAKE 10%				<input checked="" type="checkbox"/> BLANKET BUILDING	\$ 17,613,066
	<input checked="" type="checkbox"/> WIND 25,000				BLANKET PERS PROP	\$
	FLOOD				BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Water Damage 25,000/Unit					\$
						\$
		See Page 2	01/01/2026	01/01/2027	<input checked="" type="checkbox"/> Earthquake Limit	\$ 18,155,171
	INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS					\$
	NAMED PERILS	POLICY NUMBER				\$
						\$
	<input checked="" type="checkbox"/> CRIME	**See Page 2**	01/01/2026	01/01/2027	<input checked="" type="checkbox"/> Employee Dishonesty	\$ 400,000
	TYPE OF POLICY				<input checked="" type="checkbox"/> Computer Fraud	\$ 400,000
					<input checked="" type="checkbox"/> Forgery/Alteration	\$ 75,000
					<input checked="" type="checkbox"/> Equipment Breakdown	\$ 18,006,778
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	N030PK3247-01	01/01/2026	01/01/2027		\$
A	Commercial General Liability	N030PK3247-01	01/01/2026	01/01/2027	<input checked="" type="checkbox"/> Per Occurrence Limit	\$ 1,000,000
D	Directors & Officers	768639519	01/01/2026	01/01/2027	<input checked="" type="checkbox"/> Directors & Officers	\$ 1,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

EVIDENCE OF INSURANCE
Need a certificate for an owner or Lender
Request Certificate from:
www.abipdx.com

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

CMD

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ADDITIONAL REMARKS SCHEDULE

AGENCY ABI Insurance an ISU Network Agency		NAMED INSURED Murray Park Condominiums Association of Unit Owners	
POLICY NUMBER		c/o FRESH START Real Estate, Inc.	
CARRIER	NAIC CODE	6107 SW Murray Blvd. #313 Beaverton, OR 97008	
		EFFECTIVE DATE: 01/01/2026	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ FORM TITLE: _____

WALLS IN COVERAGE INCLUDED

BETTERMENTS AND IMPROVEMENTS INCLUDED

GUARANTEED REPLACEMENT COST

80 RESIDENTIAL UNITS

THE PROPERTY MANAGEMENT COMPANY IS LISTED AS AN ADDITIONAL INSURED

CANCELLATION NOTICES ARE SENT DIRECTLY TO THE NAMED INSURED WITH A 10 DAY NOTICE FOR NON-PAY AND 30 DAY NOTICE FOR ALL OTHER REASONS

The policy includes a Special Causes of Loss Form with a \$25,000 per occurrence deductible for all covered perils except as respects water damage. A \$25,000 per unit deductible applies only to water damage. In any one occurrence of loss or damage, the aggregate Per Unit Deductible shall not exceed 5% of the total Limit of Insurance for Building coverage.

Building Ordinance:

Coverage A (Undamaged Portion of Building) - \$17,613,066 Limit / \$25,000 Ded.

Coverage B (Demolition) - \$300,000 Limit / \$25,000 Ded.

Coverage C (Increased Cost of Construction) - \$300,000 Limit / \$25,000 Ded.

Full Earthquake Limits are written through the following carriers:

*Palomar Specialty Insurance Company- Policy #: CPDCP-26-1227488-B-01 - 01/01/2026-01/01/2027 - \$8,155,171

*Accelerant National Insurance Company- Policy #: N030PK3247-01 - 01/01/2026-01/01/2027 - \$10,000,000

Full Employee Dishonesty Limits are written through two separate carriers which are listed as follows:

*Accelerant National Insurance Company - Policy # N030PK3247-01 - 01/01/2026-01/01/2027 - \$25,000

*Continental Casualty Company - Policy # 768639519 - 01/01/2026-01/01/2027 - \$375,000

The Umbrella Policy is written through the below carrier:

*Federal Insurance Company - Policy #: G75240995 - 01/01/2026-01/01/2027 - \$5,000,000