

**BUSINESSOWNERS POLICY  
CONDOMINIUM CERTIFICATE OF INSURANCE**

American Family Mutual Insurance Company, S.I.  
American Family Insurance Company  
6000 American Pkwy Madison, WI 53783-0001

Agent's Name, Address

**Kristl Oliver Agency**  
**American Family Insurance**  
**8110 SW Beaverton Hillsdale Hwy**  
**Portland, OR 97225**  
**Phone (503) 292-1505 Fax (855) 492-0035**

This Certificate of Insurance is issued as a matter of information only and confers no rights upon the Certificate Holder.

This Certificate of Insurance does not amend, extend or alter the coverage afforded by the policy listed below.

This Certificate does not constitute a contract between the issuing insurer, authorized representative and the certificate holder.

**INSURED**

CONDOMINIUM ASSOCIATION'S NAME AND ADDRESS

**Association of Unit Owners of Sylvan Heights Condominium,**  
**7600 SW Barnes Rd, Portland, OR 97225-6206 (272 units)**

| POLICY NUMBER | POLICY EFFECTIVE DATE<br>(Mo., Day, Yr.) | POLICY EXPIRATION DATE<br>(Mo., Day, Yr.) |
|---------------|--|---|
| 36X2947701    | 12/01/21                                 | 12/01/22                                  |

**★ PROPERTY**

Risks of Direct Physical Loss       Named Perils      \$ 20,000 Property Deductible

| PROPERTY COVERED                 | VALUATION OF COVERED PROPERTY   | LIMIT OF INSURANCE      |
|----------------------------------|---|-------------------------|
| Building(s) _____                | <input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value | \$ <u>39,897,714.00</u> |
| Business Personal Property _____ | <input type="checkbox"/> Replacement Cost   | \$ _____                |

**★ BUSINESSOWNERS LIABILITY AND MEDICAL EXPENSES**

| COVERAGE   | LIMIT OF INSURANCE |
|--|--------------------|
| Liability - Each Occurrence Limit                          | <b>\$2,000,000</b> |
| Damage To Premises Rented To You - Any One Premises        | \$50,000           |
| Medical Expenses - Any One Person                          | <b>\$5,000</b>     |
| Aggregate Limit (Other Than Products Completed Operations) | <b>\$4,000,000</b> |
| Products - Completed Operations Aggregate Limit            | <b>\$4,000,000</b> |

Consult the Condominium Association's policy for insurance afforded Unit Owners.

**CERTIFICATE HOLDER(S)**      Effective Date 01/01/21       New Ownership/Occupancy       Change Ownership/Occupancy

UNIT OWNER'S NAME AND ADDRESS OR UNIT DESIGNATION NO.

**7600 SW Barnes Rd Unit #H PORTLAND OR 97225**  
**272 Units**

UNIT OWNER'S MORTGAGEE NAME AND ADDRESS

LOAN NO.

UNIT OWNER'S CONTRACT OF SALES NAME AND ADDRESS

LOAN NO.

MISCELLANEOUS

**Walls in coverage provided; Unit owner responsible for damage under \$20k deductible and betterments; Auxiliary Buildings \$78,067, Auxiliary Guaranteed Replacement included; EQ included with a 15% ded; Wind/Hail Coverage included; General Liability occurrence limit is \$2,000,000; Separation of Insureds Included; Building Ordinance & Law Coverage at \$300,000 Combined Limit Per Building; Crime & Fidelity Limit of Insurance \$1,110,000; Directors and Officers through Great American Insurance 12/01/21 to 12/01/22 EPPE29279601 \$2,000,000 Limit; Umbrella Liability \$1,000,000**

DATE ISSUED

**12/01/21**

AUTHORIZED REPRESENTATIVE

**Kristl Oliver**