



# CERTIFICATE OF LIABILITY INSURANCE

OP ID BT  
IRONW10

DATE (MM/DD/YYYY)

02/22/10

<b>PRODUCER</b> LaBarre/Oksnee Insurance PD 30 Enterprise #180 Aliso Viejo CA 92656 Phone: 760-346-7251 Fax: 760-346-4269	<b>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 BELOW.</b>	
	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b> Ironwood Owners Assoc II c/o Desert Resort Management P.O. Box 14387 Palm Desert CA 92255-4387	INSURER A: <b>XL Specialty Insurance Co.</b>	
	INSURER B: <b>Liberty Mutual Insurance</b>	
	INSURER C: <b>Zurich Companies</b>	
	INSURER D:	
	INSURER E:	

### COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	<b>GENERAL LIABILITY</b>	63A1004353-00	02/12/10	02/12/11	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR			MED EXP (Any one person)	\$ 5,000
	B	<input checked="" type="checkbox"/> D&O \$1,000,000	TBA	02/12/10	02/12/11	PERSONAL & ADV INJURY
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$ Included
A	<b>AUTOMOBILE LIABILITY</b>	63A1004353-00	02/12/10	02/12/11	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS	63A1004353-00	02/12/10	02/12/11	PROPERTY DAMAGE (Per accident)	\$
A	<input checked="" type="checkbox"/> NON-OWNED AUTOS	63A1004353-00	02/12/10	02/12/11		
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	EA ACC \$ AGG \$
C	<b>EXCESS / UMBRELLA LIABILITY</b>	TBA	02/12/10	02/12/11	EACH OCCURRENCE	\$ 15,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 15,000,000
		<input type="checkbox"/> DEDUCTIBLE				\$
		<input checked="" type="checkbox"/> RETENTION \$10,000				\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATU-TORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N				E.L. EACH ACCIDENT	\$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
A	<b>Property</b>	63A1004353-00	02/12/10	02/12/11	5,000 ded	\$15,500,000
A	<b>Fidelity Bond</b>	63A1004353-00	02/12/10	02/12/11	1,000 ded	\$250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
**\*\*Package has a Separate \$10,000 Water Deductible\*\*    \*\*Package has Guaranteed Replacement Cost and a Wall & Floor Covering Exclusion\*\*  
 \*\*Management Company as Additional Insured\*\***

### CERTIFICATE HOLDER

### CANCELLATION

<b>DESERTR</b> Desert Resort Management 42635 Melanie Pl. Ste 103 Palm Desert CA 92211	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE Palm Desert Office