

TLEAVENS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/3/2023

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).

	nis certificate does not confer rights to							require an endorsemen	t. A S	tatement on	
PRODUCER SF Insurance Group LLC 744 Ryan Dr Ste 101						CONTACT Jennifer Evans					
						PHONE (A/C, No, Ext): (715) 500-2663 FAX (A/C, No):					
	Ison, WI 54016				E-MAIL ADDRE	ss: jevans@	sfinsuranc	egroup.com			
					INSURER(S) AFFORDING COVERAGE					NAIC #	
					INSURE	R A : State A	uto Mutual			25127	
INSURED St Croix Hills Homeowners Asso c/o Bordertown Realty Inc 744 Ryan Drive Ste 103 Hudson, WI 54016						INSURER B:					
						INSURER C:					
						INSURER D:					
						INSURER E :					
						INSURER F:					
СО	VERAGES CERT	TIFIC	ATE	NUMBER:				REVISION NUMBER:			
IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH F	EQUII PERT	REME TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORI	N OF A	NY CONTRAC	CT OR OTHER IES DESCRIB	DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR	INSR TYPE OF INCUPANCE			ADDL SUBR INSD WVD POLICY NUMBER		POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS					
A A	X COMMERCIAL GENERAL LIABILITY	INSD WVE		1 OLIOT HOMBER	(MM/DD/YYYY)	(MM/DD/YYYY)			1,000,000		
	CLAIMS-MADE X OCCUR	X		BOP2905012		12/7/2022	12/7/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000	
	oz milo miloz X					12///2022	12,772020		\$	5,000	
								MED EXP (Any one person) PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:								\$	2,000,000	
	X POLICY PRO-							GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$	2,000,000	
								PRODUCTS - COMP/OP AGG	\$		
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$		
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Fer accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION\$							NOOKEONIE	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	Ť		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Α				BOP2905012		12/7/2022	12/7/2023	Buildings		1,906,637	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL ifficate Holder is hereby included as an a 1.906,637 with \$1000 deductible and Rep				le, may b e Gene	e attached if mor ral Liability as	e space is requir s Mangaers o	ed) r Lessors of Premises. B	lanket	Property Limit	
CE	RTIFICATE HOLDER				CANO	ELLATION					
Bordertown Realty, Inc. 744 Ryan Drive, Ste 103 Hudson, WI 54016						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					
					Alw Helmer						