

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 07/09/2020

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).

	is certificate does not confer rights to				endor	sement(s).	may require	an endorsement. A state	emem (	<i>)</i>
PRO	DUCER				CONTACT Misti McInis NAME:					
Sca	rbrough Medlin & Associates				PHONE (A/C, No, Ext): (214) 423-3333 FAX (A/C, No): (214) 423-3350					
570	0 Granite Pkwy, #500				E-MAIL ADDRESS: Misti@scarbrough-medlin.com					
					INSURER(S) AFFORDING COVERAGE					NAIC #
Plar				TX 75024	INSURER A: Wesco Ins Co					
INSU					INSURE					
	Liberty Townhomes				INSURE	18058				
	Legacy Southwest Property Mar	•	nent		INSURE					
	8668 John Hickman Parkway #8	01			INSURE					
Frisco TX 75034						INSURER F:				
				NUMBER: 20-21 Liability	IOOLIED	TO THE INOLI		REVISION NUMBER:	100	
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	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	φ	00,000
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 100,	
				WDD4000040.04		07/04/0000		MED EXP (Any one person) \$ 5,00		
Α				WPP1820348 01		07/01/2020	07/01/2021	PERSONAL & ADV INJURY \$		0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	2.00	00,000
	POLICY JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,00	0,000
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$ Inclu	ıdod
	ANY AUTO							(Ea accident)  BODILY INJURY (Per person)	\$ Included	
Α	OWNED SCHEDULED			WPP1820348 01		07/01/2020	07/01/2021	BODILY INJURY (Per accident)		
^	AUTOS ONLY AUTOS			WPP 1020340 01		07/01/2020	07/01/2021	PROPERTY DAMAGE	\$	
	AUTOS ONLY  AUTOS ONLY  AUTOS ONLY							(Per accident)	\$	
	➤ UMBRELLA LIAB ➤ OCCUR					05/01/2021	5.00.000.000.005		0,000	
В	EXCESSIVAD			UM30191496			07/01/2020	EACH OCCURRENCE	φ	0,000
	DED RETENTION \$							AGGREGATE	\$	
	WORKERS COMPENSATION							PER OTH- STATUTE ER	ð.	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A						E.L. EACH ACCIDENT \$		
								E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
								Limit	7	000,000
С	Directors & Officers			PCAP008068-0318		07/01/2020	07/01/2021	Retention	\$1,0	00
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 1	01, Additional Remarks Schedule,	may be at	tached if more sp	pace is required)			
CEI	RTIFICATE HOLDER				CANCELLATION					
	For Information Only For Informa	ation (	Only		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	For Information Only				AUTHORIZED REPRESENTATIVE					

For Information Only



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REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.												
		RTANT: If the certificate holder is										
		BROGATION IS WAIVED, subject to ertificate does not confer rights to						may require	an endorsement. A	statement o	on	
PRO		<u>-</u>				CONTAC NAME:		nis				
Scarbrough Medlin & Associates									No): (214) 4	123-3350		
5700 Granite Pkwy, #500						E-MAIL ADDRESS: Misti@scarbrough-medlin.com						
								SURER(S) AFFOR	RDING COVERAGE		NAIC #	
Plano TX 75024						INSURER A: Wesco Ins Co						
INSU	RED					INSURER B: Great American Insurance Co						
		Liberty Townhomes				INSURE	RC: Philadelp	ohia Indemnity	Insurance Co		18058	
		Legacy Southwest Property Ma	nagen	nent		INSURER D:						
		8668 John Hickman Parkway #8	301			INSURER E :						
		Frisco			TX 75034	INSURER F:						
COVERAGES CERTIFICATE NUMBER: 20-21 Liability					REVISION NUMBER:							
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD												
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	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
insr Ltr		TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	×	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	Ψ .	0,000	
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence	<del></del>		
						07/01/2020			MED EXP (Any one person			
Α			Y	WPP1820348 01			07/01/2021	PERSONAL & ADV INJURY	1 9 ·	0,000		
	GEN	L'LAGGREGATE LIMIT APPLIES PER:	ER:					GENERAL AGGREGATE	- J	+ 7		
		POLICY PRO- LOC							PRODUCTS - COMP/OP A	AGG \$ 2,00	\$ 2,000,000	
		OTHER:								\$		
	AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	Ψοιο	ıded	
Α		ANY AUTO							BODILY INJURY (Per person	on) \$		
		OWNED SCHEDULED AUTOS ONLY		WPP1820348 01		07/01/2020	07/01/2021	BODILY INJURY (Per accid				
	$\times$	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
										\$		
	$ \times$	UMBRELLA LIAB COCCUR							EACH OCCURRENCE	\$ 1,00	0,000	

07/01/2020

07/01/2020

05/01/2021

07/01/2021

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) LSWPM is an additional Insured on the General Liability

UM30191496

PCAP008068-0318

CERTIFICATE HOLDER		CANCELLATION				
Legacy Southwest Property Management 8668 John Hickman Pkwy #101		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
0000 John Friedrick Rwy #101		AUTHORIZED REPRESENTATIVE				
Frisco	TX 75034	fly DM-lls				

STATUTE

E.L. EACH ACCIDENT

E.L. DISEASE - EA EMPLOYEE

E.L. DISEASE - POLICY LIMIT

AGGREGATE

Limit

Retention

1,000,000

\$1,000,000

\$1,000

**EXCESS LIAB** 

AND EMPLOYERS' LIABILITY

DED WORKERS COMPENSATION

(Mandatory in NH)

**Directors & Officers** 

RETENTION \$

ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

If yes, describe under DESCRIPTION OF OPERATIONS below

CLAIMS-MADE

N/A

В

С