

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/03/2017

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),

		7909		
		INSURER F:		
TRUCKEE	CA 96161	INSURER E:		
		INSURER D:	151	
15726 GLENSHIRE DR		INSURER C: Mid Century Insurance	Company	21687
GLENSHIRE DEVONSHIRE RESIDENT		INSURERB: Farmers Insurance Ex	change	21652
INSURED		INSURERA: Truck Insurance Excha	ange	21709
		INSURER(S) AFFORDI	NG COVERAGE	NAIC#
		PRODUCER CUSTOMER ID:		,
Tahoe City	CA 96145	E-MAIL ADDRESS: rvotaw@farmersagent.c	om	
475 N Lake Blvd #211		PHONE (A/C, NO, EXT): 530-583-0294	FAX (A/C, NO):	
Richard Votaw(9549322)		NAME:	To the second se	
PRODUCER		CONTACT		
AUTHORIZED REPRESENTATIVE OR PRODUCER, AND IT	HE CERTIFICATE HULDER.			

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES/DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) 15726 GLENSHIRE DR, TRUCKEE, CA, 96161

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 INS	SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY		LIMITS	
	PROPERTY CAUSES OF LOSS DEDUCTIBLES						X	BUILDING PERSONAL PROPERTY	\$1,800,000 \$105,000	
	0.10	BASIC	DEDUCTIBLES BUILDING				^	BUSINESS INCOME	\$	
		BROAD	1,000					EXTRA EXPENSE	\$	
Δ.	X	SPECIAL	1,000	606228265	04/14/2016	04/14/2017		RENTAL VALUE	\$	
٦.		EARTHQUAKE	1,000		04/14/2010			BLANKET BUILDING	\$	
		WIND						BLANKET PERS PROP	\$	
		FLOOD						BLANKET BLDG & PP	\$	
									\$	
									\$	
	CAUSES OF LOSS NAMED PERILS		TYPE OF POLICY					\$		
									\$	
			POLICYNUMBER					\$		
									\$	
		CRIME							\$	
ת		YPE OF POLICY							\$	
									\$	
		BOILER & MACH							\$	
									\$	
									\$	
									\$	

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

CERTIFICATE HOLDER	CANCELLATION
NMIS, INC A CALIFORNIA CORP ISAOA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION
3700 WILSHIRE BLVD STE 330	DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
LOS ANGELES CA 90010	Bestof Colum

ACORD 24 (2016/03)

31-1768 11-15

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/03/2017

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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

		SUPERIOR SERVICE PROPERTY OF THE SUPERIOR SERVICES.		Non-Control of Control (Control Control Contro			
TROOKEL	CA 30101		INSURER F:				
TRUCKEE	CA 96161		INSURER E:				
13720 GLENSHIKE DI			INSURER D:				
GLENSHIRE DEVONSHIRE RESIDENT 15726 GLENSHIRE DR			INSURER C: Mid Century Insurar	21687			
CLENCUIDE DEVONO	NUIDE DECIDENT		INSURERB: Farmers Insurance	21652			
INSURED			INSURERA: Truck Insurance Ex	21709			
			INSURER(S) AFFO	NAIC#			
Tahoe City	CA 96145		E-MAIL ADDRESS: rvotaw@farmersagent.com				
475 N Lake Blvd #211			(A/C, NO, EXT): 530-583-0294 (A/C, NO): 530-302-3				
Richard Votaw(954932	22)		PHONE	FAX			
PRODUCER			CONTACT NAME:				
conditions of the policy, cert	am policies may require an er	idorsement. A statement on this certific	ate does not comer rights to the certific	ate noice in nea of such endorsement	.(5).		

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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INSR LTR	TYPE OF INSTIDANCE			ADDTL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
	X	COMMERCIAL GEN	NERAL	LIABILITY						EACHOCC	URRENCE	\$	2,000,000
		CLAIMS-MADE X OCCUR					04/14/2016		DAMAGE TO RENTED PREMISES (Ea Occurrence)		\$	75,000	
						N		606228265	04/14/2017	MED EXP (ny one person)	\$	5,000
Α					N					PERSONAL	& ADV INJURY	\$	2,000,000
	GE	GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREGATE			4,000,000
	X	POLICY PRO	JECT	LOC						PRODUCTS	- COMP/OP AC	iG \$	2,000,000
		OTHER:										\$	
	AU	AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)		\$	2,000,000
		ANYAUTO								BODILYINJ	JRY (Per persor) \$	
Α		OWNED AUTOS ONLY		SCHEDULED AUTOS			606228265	04/14/2016	04/14/2017	BODILY INJURY (Per accident)		nt) \$	
	X	HIRED AUTOS ONLY	X NON-OWNED AUTOS ONLY				The state of the s			PROPERTY DAMAGE (Per accident)		\$	
												\$	
		UMBRELLA LIAB		OCCUR						EACHOCC	URRENCE	\$	
	EXCESS LIAB CLAIMS-MADE		5					AGGREGAT	E	\$			
	DED RETENTION\$									\$			
		DRKERS COMPENSA D EMPLOYERS ' LIAE						3		PER STATUT	e OTHE	₹ \$	
	ANY PROPRIETOR/PARTNER/ Y/N			N/A					E.L. EACH	CCIDENT	\$		
	EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		100000000000000000000000000000000000000					E.L. DISEAS	E - EA EMPLOY	E \$			
								E.L. DISEAS	E - POLICY LIM	Т \$			
DESCE 15726	GL	ON OF OPERATIONS ENSHIRE DR, T	LOC/ RUC	ATIONS/VEHICLE KEE, CA 9616	s (acord	101, Add	itional Remarks Schedule, may be a	ttached if more spa	ce is required)				

CERTIFICATE HOLDER CANCELLATION

CA 90010

NMIS, INC A CALIFORNIA CORP ISAOA 3700 WILSHIRE BLVD STE 330

LOS ANGELES

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