



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/8/2017

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), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).


<b>PRODUCER</b> Maris Brown Insurance Group 612 W University Dr Suite 300 Rochester MI 48307	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): (248) 257-5556 E-MAIL ADDRESS: certs@mbrinsurance.com	FAX (A/C, No): (586) 589-5957													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Farm Bureau Insurance</td> <td>21547</td> </tr> <tr> <td>INSURER B: Pennsylvania Manufacturers</td> <td>12262</td> </tr> <tr> <td>INSURER C: Travelers Insurance Company</td> <td>19038</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Farm Bureau Insurance	21547	INSURER B: Pennsylvania Manufacturers	12262	INSURER C: Travelers Insurance Company	19038	INSURER D:		INSURER E:		INSURER F:
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<b>INSURED</b> Oakland Hills Portage Condominium Association C/o Gardner Management 5770 Venture Park Kalamazoo MI 49009															

**COVERAGES** CERTIFICATE NUMBER: CL1722803817 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 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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EQUIPMENT BREAKDOWN <input checked="" type="checkbox"/> ORDINANCE OR LAW GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			S3084390	3/1/2017	3/1/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			S3084390	3/1/2017	3/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ HIRED AND NON OWNED \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			U3084389	3/1/2017	3/1/2018	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	2017010864306Y	3/1/2017	3/1/2018	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	<b>FIDELITY</b>			106696511	3/1/2017	3/1/2018	\$200,000 MGMT CO INCL
C	<b>DIRECTORS AND OFFICERS</b>			106696511	3/1/2017	3/1/2018	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
UNDER THE GENERAL LIABILITY POLICY, ALL BUILDINGS HAVE 100% REPLACEMENT COST BLANKET COVERAGE FOR A MAXIMUM OF \$28,000,000 SUBJECT TO A \$5,000 DEDUCTIBLE. COVERAGE IS EXTENDED AS OBLIGATED TO THE EXTENT OF THE BYLAWS ON FILE WITH THE ASSOCIATION. SEPARATION OF INSURED IS INCLUDED. 132 UNITS.

<b>CERTIFICATE HOLDER</b>  MASTER CERTIFICATE COVERING THE ASSOCIATION AND ALL CO-OWNERS INTERESTS AND THEIR RESPECTIVE MORTGAGE COMPANIES-ISAOA, PER THE BYLAW	<b>CANCELLATION</b>  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  Brandon Brown/JESS 
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## COMMENTS/REMARKS

The following addresses are all covered under the coverage listed on the Acord this is attached to for the purpose of General Liability, Auto Liability, Umbrella Liability and the Property coverage listed in the comments section. It is understood that the legal owner of the units to which these addresses listed below belong to are included as "additional insured's" with respect to the coverage referenced above. It is also understood that any and all mortgage companies, and their agents and/or assignees that hold an interest in any of the addresses list below are included as "additional insured's/loss payee's" with respect to the coverage referenced above, per the bylaws for the association listed as the insured above.

8683, 87, 91, 95 OAKLAND HILLS CIRCLE, 8675 & 8679 OAKLAND HILLS CIRCLE, 8667 & 8671 OAKLAND HILLS CIRCLE, 8650 & 8654 OAKLAND HILLS CIRCLE, 8660 & 8664 OAKLAND HILLS CIRCLE, 8670 & 8674 OAKLAND HILLS CIRCLE, 8690 & 8694 OAKLAND HILLS CIRCLE, 2200 & 2204 GRAY OAK COVE, 2133 & 2137 GRAY OAK COVE, 2141 & 2145 GRAY OAK COVE, 2161, 65, 71, 75 GRAY OAK COVE, 2211, 15, 19 GRAY OAK COVE, 8720 OAKLAND HILLS CIRCLE, 8821, 25, 29 SILVER OAK COVE, 8853, 57, 61 SILVER OAK COVE, 8880, 84, 88 SILVER OAK COVE, 8854, 58, 62, 66 SILVER OAK COVE, 8820, 24, 28, 32 SILVER OAK COVE, 2406 & 2410 TANGLEY OAK COURT, 2392 & 2396 TANGLEY OAK COURT, 2380 & 2384 TANGLEY OAK COURT, 2372 & 2376 TANGLEY OAK COURT, 2340 & 2344 SELLY OAK LANE, 2312 & 2316 SELLY OAK LANE, 2284 & 2288 SELLY OAK LANE, 2256 & 2260 SELLY OAK LANE, 8896 & 8900 OAK MEADOW COVE, 8870 & 8874 OAK MEADOW COVE, 8860 & 8864 OAK MEADOW COVE, 8852 & 8854 OAK MEADOW COVE, 8861 & 8865 OAK MEADOW COVE, 8871 & 8875 OAK MEADOW COVE, 8895 & 8899 OAK MEADOW COVE, 8730 & 8734 OAKLAND HILLS CIRCLE, 8740 & 8744 OAKLAND HILLS CIRCLE, 8760 & 8764 OAKLAND HILLS CIRCLE, 8790 & 8794 OAKLAND HILLS CIRCLE, 8800 & 8806 OAKLAND HILLS CIRCLE, 8818 & 8822 OAKLAND HILLS CIRCLE, 8838 & 8842 OAKLAND HILLS CIRCLE, 8854 & 8858 OAKLAND HILLS CIRCLE, 8870 & 8874 OAKLAND HILLS CIRCLE, 8888 & 8892 OAKLAND HILLS CIRCLE, 8904 & 8908 OAKLAND HILLS CIRCLE, 8916 & 8920 OAKLAND HILLS CIRCLE, 8924 & 8928 OAKLAND HILLS CIRCLE, 8932 & 8936 OAKLAND HILLS CIRCLE, 8940 & 8944 OAKLAND HILLS CIRCLE, 2367 & 2371 HOLLOW CREEK TRAIL, 2345 & 2351 HOLLOW CREEK TRAIL, 2301 & 2315 HOLLOW CREEK TRAIL, 2281 & 2285 HOLLOW CREEK TRAIL, 2251 & 2255 HOLLOW CREEK TRAIL, 2151 & 2155 HOLLOW CREEK TRAIL, 2396 & 2400 SHADY OAK COVE, 2380 & 2384 SHADY OAK COVE, 2354 & 2358 SHADY OAK COVE, 2361 & 2365 SHADY OAK COVE, 2379 & 2383 SHADY OAK COVE, 2395 & 2399 SHADY OAK COVE, 2409 & 2413 SHADY OAK COVE