



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

2/11/2019

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

<b>PRODUCER</b> Scarbrough Medlin & Associates 5700 Granite Pkwy, #500  Plano TX 75024	<b>CONTACT NAME:</b> Misti McInis <b>PHONE (A/C. No. Ext):</b> (214)423-3333 <b>E-MAIL ADDRESS:</b> Misti@scarbrough-medlin.com	<b>FAX (A/C. No.):</b> (214)423-3350	
	<b>PRODUCER CUSTOMER ID:</b> 00012078		
<b>INSURED</b> The Estates of Garden Valley c/o Legacy Southwest Property Mgmt. 8668 John Hickman Parkway #801 Frisco TX 75034	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> Security National Insurance Co		
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		

**COVERAGES**

CERTIFICATE NUMBER:19-20 Property

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Blanket Premise

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	SPP1775936 00	2/27/2019	2/27/2020	BUILDING	\$	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				BUILDING	BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				CONTENTS	EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL					RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE					BLANKET BUILDING	\$
	<input type="checkbox"/> WIND					BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Deductible				500	<input checked="" type="checkbox"/> COMMON AREAS	\$ 100,000
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/> REPLACEMENT COST	\$
<input type="checkbox"/>	<b>INLAND MARINE</b>	TYPE OF POLICY			\$		
<input type="checkbox"/>	CAUSES OF LOSS	POLICY NUMBER			\$		
<input type="checkbox"/>	NAMED PERILS				\$		
<input type="checkbox"/>	<b>CRIME</b>				\$		
<input type="checkbox"/>	TYPE OF POLICY				\$		
<input type="checkbox"/>	<b>BOILER &amp; MACHINERY / EQUIPMENT BREAKDOWN</b>				\$		
<input type="checkbox"/>					\$		
<input type="checkbox"/>					\$		

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

ASSOCIATION COMMON AREAS ONLY

**CERTIFICATE HOLDER**

For Information Only\*\*\*\*\*  
 For Information Only\*\*\*\*\*  
 For Information Only\*\*\*\*\*

**CANCELLATION**

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

ROD MEDLIN/MCINIS



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

2/11/2019

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<b>PRODUCER</b> Scarbrough Medlin & Associates 5700 Granite Pkwy, #500  Plano TX 75024	<b>CONTACT NAME:</b> Misti McInis <b>PHONE (A/C, No, Ext):</b> (214)423-3333 <b>E-MAIL ADDRESS:</b> Misti@scarbrough-medlin.com	<b>FAX (A/C, No):</b> (214)423-3350	
	<b>PRODUCER CUSTOMER ID:</b> 00012078		
<b>INSURED</b> The Estates of Garden Valley c/o Legacy Southwest Property Mgmt. 8668 John Hickman Parkway #801 Frisco TX 75034	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> Security National Insurance Co		
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		

**COVERAGES**

CERTIFICATE NUMBER: 19-20 Property

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Blanket Premise

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	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
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	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	<input type="checkbox"/> BASIC				BUILDING	BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				CONTENTS	EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL					RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE					BLANKET BUILDING	\$
	<input type="checkbox"/> WIND					BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Deductible				500	<input checked="" type="checkbox"/> COMMON AREAS	\$ 100,000
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/> REPLACEMENT COST	\$
<input type="checkbox"/>	<b>INLAND MARINE</b>	TYPE OF POLICY			\$		
<input type="checkbox"/>	CAUSES OF LOSS	POLICY NUMBER			\$		
<input type="checkbox"/>	NAMED PERILS				\$		
<input type="checkbox"/>	<b>CRIME</b>				\$		
<input type="checkbox"/>	TYPE OF POLICY				\$		
<input type="checkbox"/>	<b>BOILER &amp; MACHINERY / EQUIPMENT BREAKDOWN</b>				\$		
<input type="checkbox"/>					\$		

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

Legacy Southwest is additional insured as respects to the General Liability and Directors & Officers Liability  
 Total Units 20

**CERTIFICATE HOLDER**

Legacy Southwest Property Mgmt.  
 8668 John Hickman Parkway #801  
 Plano, TX 75034

**CANCELLATION**

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

ROD MEDLIN/MCINIS







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/11/2019

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).

<b>PRODUCER</b> Scarbrough Medlin & Associates 5700 Granite Pkwy, #500  Plano TX 75024		<b>CONTACT NAME:</b> Misti McInis <b>PHONE (A/C, No, Ext):</b> (214) 423-3333 <b>FAX (A/C, No):</b> (214) 423-3350 <b>E-MAIL ADDRESS:</b> Misti@scarbrough-medlin.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Security National Insurance Co	<b>NAIC #</b>
		<b>INSURER B:</b> Philadelphia Indemnity Insurance Co	18058
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	
<b>INSURED</b> The Estates of Garden Valley c/o Legacy Southwest Property Mgmt. 8668 John Hickman Parkway #801 Frisco TX 75034			

**COVERAGES**

CERTIFICATE NUMBER: 19-20 Liability

REVISION NUMBER:

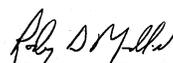
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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			SPP1775936 00	02/27/2019	02/27/2020	EACH OCCURRENCE	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE	\$
	<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				PER STATUTE	OTHER
B	<b>DIRECTORS &amp; OFFICERS LIABILITY</b>			PCAP001512-0218	02/27/2019	02/27/2020	LIMIT	\$1,000,000
							RETENTION	\$1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Waxahachie ISD is additional insured as respects to the General Liability as per written contract

**CERTIFICATE HOLDER****CANCELLATION**

Waxahachie ISD 411 N. Gibson St.  Waxahachie TX 75165	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 
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