



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
**03/10/2017**

**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> Brown & Brown of FL Inc -Condo Condominium Division P.O. Box 5727 Fort Lauderdale, FL 33310 Philip Joseph Knapp, AAI, AIAM	<b>CONTACT NAME:</b> Philip Joseph Knapp, AAI, AIAM <b>PHONE (A/C, No, Ext):</b> 954-776-2222 <b>FAX (A/C, No):</b> 954-776-4446 <b>E-MAIL ADDRESS:</b>
<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b>	<b>NAIC #</b>
<b>Watergarten Condominium Association, Inc.</b> <b>Attn: Alessandra Hale-Florez</b> <b>347 North New River Drive East</b> <b>Fort Lauderdale, FL 33301</b>	INSURER A : <b>Wilshire Insurance Company</b> <b>13234</b> INSURER B : <b>QBE Insurance Corporation</b> <b>39217</b> INSURER C : <b>Great Amer Alliance Ins. Co.</b> <b>26832</b> INSURER D : <b>Wright National Flood Ins Co+</b> <b>11523</b> INSURER E : <b>*Hanover Insurance Co.+</b> <b>22292</b> INSURER F : <b>Liberty Ins Underwriters Inc+</b> <b>19917</b>

**COVERAGES**

**CERTIFICATE NUMBER:**

**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
<b>A</b>	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			<b>LB00029189</b>	<b>03/01/2017</b>	<b>03/01/2018</b>	EACH OCCURRENCE \$ <b>1,000,000</b>
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>100,000</b>
							MED EXP (Any one person) \$ <b>5,000</b>
							PERSONAL & ADV INJURY \$ <b>1,000,000</b>
							GENERAL AGGREGATE \$ <b>2,000,000</b>
							PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>
							<b>BI/PD Ded</b> \$ <b>1,000</b>
<b>A</b>	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			<b>LB00029189</b>	<b>03/01/2017</b>	<b>03/01/2018</b>	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b>
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
<b>C</b>	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> <b>EXCESS LIAB</b> DED <input checked="" type="checkbox"/> RETENTION \$ <b>NIL</b>			<b>UM30067042</b>	<b>03/01/2017</b>	<b>03/01/2018</b>	EACH OCCURRENCE \$ <b>50,000,000</b>
							AGGREGATE \$ <b>50,000,000</b>
							\$
<b>F</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 Y / N <input type="checkbox"/> N / A			<b>Z127042803</b> <b>ZENITH INS. CO.</b>	<b>03/01/2017</b>	<b>03/01/2018</b>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
							E.L. EACH ACCIDENT \$ <b>500,000</b>
							E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b>
							E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b>
<b>E</b>	<b>D&amp;O/\$1k Ded</b>			<b>CA3P004323151</b>	<b>03/01/2016</b>	<b>05/31/2017</b>	<b>Liability</b> <b>1,000,000</b>
	<b>Crime/\$30k Ded</b>			<b>BDJD18521400</b>	<b>03/01/2017</b>	<b>03/01/2018</b>	<b>Fidelity</b> <b>3,500,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**315 Condominium Units + One Commercial Unit - 316 Total Units**

**CERTIFICATE HOLDER**

**CANCELLATION**

<p style="text-align: center;"><b>INFORMA</b></p> <p><b>Watergarten Condo Assn., Inc.</b>                  347 North New River Drive East                  Fort Lauderdale, FL 33301</p>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p style="text-align: center;"></p>
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**NOTEPAD**INSURED'S NAME **Watergarden Condominium****WATERGA**

OP ID: MP

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Date **03/10/2017**

B) WINDSTORM/PROPERTY: QBE Insurance Co. - Policy #: QFW6018  
Effective: 03/01/2017 to 03/01/2018  
TOTAL INSURED VALUE: \$79,801,600  
Building: 68,582,700  
Contents: \$1,000,000  
Sculpture: \$110,000  
Garage: \$10,108,900  
\$5,000 Per Occurrence All Other Perils Deductible  
2% Calendar Year Hurricane Deductible  
Ordinance or Law: Coverage A- Full, Coverage B & C- \$2,000,000 combined  
Building is Replacement Cost / Coinsurance: Waived, Agreed Value / Special  
Form Hazard

D) Flood - Carrier: Wright National Flood Insurance Co.  
Policy #: 091151215004 - Effective Date: 03/01/2017 to 03/01/2018  
Flood Zone: AHB, Grandfathered: No  
315 Residential Condo Units + One (1) Commercial Unit - 316 Total Units  
Building Limit: \$ 79,000,000 / \$5,000 Deductible  
Contents Limit: \$ 100,000 / \$5,000 Deductible

Equipment Breakdown - Carrier: Continental Casualty Co.  
Policy #: R2076017216  
Limit: \$79,801,600 / Deductible: \$2,500  
Effective: 03/01/2017 to 03/01/2018



A Stock Company  
P.O. Box 33003  
St. Petersburg, FL 33733-8003

FFL 99.001 1116  
0702834  
3/16/17

**FLOOD DECLARATIONS PAGE**  
**RENEWAL**

2000 11523 FLD RCBP

Policy Number	NFIP Policy Number	Product Type: Standard Policy
09 1151215004 02	1151215004	Residential Condominium Building Association Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 3/01/17 To: 3/01/18 12:01 am Standard Time	03/16/2017	0702834	09 1151215004 01

Agent (954)776-2222  
BROWN & BROWN OF FLORIDA INC  
PO BOX 5727  
FT LAUDERDALE FL 33310-5727

WATERGARDEN CONDO ASSN  
347 N NEW RIVER DR E  
FORT LAUDERDALE FL 33301-3131

Property Location (if other than above) Address may have been changed in accordance with USPS standards.  
347 N NEW RIVER DR E, FORT LAUDERDALE FL 33301

**Rating Information**

Original New Business Effective Date: 3/01/2014  
Building Occupancy: Other Residential Community Name: FORT LAUDERDALE, CITY OF  
Primary Residence: N Community #: 125105 Map Panel/Suffix: 0557 H  
Number of Floors: 3 or more Community Rating: 06 / 20%  
Building Indicator: Elevated Program Status: Regular Grandfathered: No  
Basement/Enclosure/CrawlSpace: Flood Risk/Rated Zone: AHB  
Enclosure without Proper Openings  
Condo Type: High Rise Number of Units: 316  
Replacement Cost Value: 100,627,221 Elevation Difference: 2

Coverage	Deductible	Premium
BUILDING \$79,000,000	\$5,000	\$43,529.00
CONTENTS \$100,000	\$5,000	\$203.00

**THIS IS NOT A BILL**

**DEAR MORTGAGEE**  
The Reform Act of 1994 requires you to notify the WYO company for this policy within 60 days of any changes in the servicer of this loan.

The above message applies only when there is a mortgage on the insured location.

Premium Paid by: Insured

ANNUAL SUBTOTAL: \$43,732.00  
DEDUCTIBLE DISCOUNT/SURCHARGE: \$221.00  
ICC PREMIUM: \$9.00  
COMMUNITY RATING DISCOUNT: \$8,704.00  
SUB-TOTAL: \$34,816.00  
RESERVE FUND ASSESSMENT: \$5,222.00  
PROBATION SURCHARGE: \$.00  
FEDERAL POLICY SERVICE FEE: \$2,000.00  
HFIAA SURCHARGE: \$250.00  
TOTAL OF PREMIUMS AND FEES: \$42,288.00

**Special Provisions:**

This policy covers only one building. If you have more than one building on your property, please make sure they are all covered. See III. Property Covered within your Flood policy for the NFIP definition of "building" or contact your agent, broker, or insurance company. Coverage Limitations may apply. Please refer to your Flood Insurance Policy Form for details.

**Forms and Endorsements:**

FFL 99.310 1012 1010 WFL 99.416 0414 0614 WFL 99.116 0614 0614

This policy is issued by NAIC company 11523  
Wright National Flood Insurance Company A stock company  
Copy Sent To: As indicated on back or additional pages, if any.

*Patricia Templeton-Jones*  
Patricia Templeton-Jones, President

070283409115121500417075

00009

Company



09 1151215004 02

Agent (954)776-2222

BROWN & BROWN OF FLORIDA INC

PO BOX 5727

FT LAUDERDALE FL 33310-5727

The Residential Condominium Building Association Policy will not list a mortgagee for any individual unit owner on the declaration page due to National Flood Insurance Program guidelines. The *Mandatory Purchase of Flood Insurance Guidelines*, pages 45-51 provides additional information on this subject.

A mortgagee may be listed on the declaration page if the condominium association is required to obtain flood insurance as part of the security for a loan under the name of the condominium association. Please contact the agent for additional information.

**Claims Information:**

Please contact your agent or go to [www.wrightflood.com](http://www.wrightflood.com) to enter your claim as well as receive important information to mitigate the damage to your property. If you need to reach the insurance company the number is 1-800-725-9472.



## Brown & Brown, Inc. - Fort Lauderdale

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**To:** Requestors of Condominium Certificates of Insurance

**From:** Brown & Brown, Inc. - Fort Lauderdale

**Re:** Retrieving Condominium Certificates of Insurance

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To better serve our clients, you can now obtain condominium certificates of insurance by using the online delivery service from [www.eoidirect.com](http://www.eoidirect.com).

EOI Direct provides round-the-clock, online access to insurance information for lenders, mortgage brokers, closing agents, realtors and homeowners in need of a certificate of insurance or summary of a master policy for community associations insured through our agency.

To obtain a certificate of insurance, please visit [www.eoidirect.com](http://www.eoidirect.com). If you are a first-time user, follow the links to register so you can log in to your account as an “Existing User”. Once you have logged into your account, click on “Evidence of Insurance” to search and access the association policy information you are seeking.

There is a delivery charge for Certificate Holder changes, but there is no cost to register for this service and summaries of master policy information is available free of charge online.

Customer service is available toll-free from 7:00 AM to 6:00 PM (Mountain Time), Monday through Friday to provide additional assistance. Those without internet access may also contact the help desk at 1(877) 456-3643 to order their certificate over the phone with a representative.

EOI Direct is an online internet utility developed to simplify and automate the process of delivering property insurance certificates within minutes – days, nights, weekends and holidays.

Please share this important notice with those parties that regularly request condominium certificates of insurance from our agency.