ACORD® CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/26/2026

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.

PRODUCER	CONTACT NAME:
ABI Insurance an ISU Network Agency 4800 SW Griffith Dr. Suite 300 Beaverton, OR 97005	**PHONE (A/C, No, Ext):** (503)292-1580 **FAX (A/C, No):** (503)467-4600 **E-MAIL ADDRESS:** certificates@abipdx.com **PRODUCER CUSTOMER ID:** 00006228

	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED AUO of Glenwood Place, Inc. PO Box 20816 Portland, OR 97294	**INSURER A:** Accelerant National Insurance Company	
	INSURER B: Continental Casualty Company	
	INSURER C: Palomar Specialty Insurance Company	
	INSURER D: Federal Insurance Company	
	INSURER E:	
	INSURER F:	

COVERAGES   **CERTIFICATE NUMBER:**   **REVISION NUMBER:**

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

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	X PROPERTY		N030PK1183-03	01/29/2026	01/29/2027		BUILDING	$
	CAUSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	$
	BASIC	BUILDING 10,000					BUSINESS INCOME	$
	BROAD	CONTENTS					EXTRA EXPENSE	$
	X SPECIAL						RENTAL VALUE	$
	X EARTHQUAKE	10%				X	BLANKET BUILDING	$32,896,150
	X WIND	10,000					BLANKET PERS PROP	$
	FLOOD						BLANKET BLDG & PP	$
			See Page 2	01/29/2026	01/29/2027	X	Earthquake Limit	$33,637,900
D			G75276308	01/29/2026	01/29/2027	X	Umbrella Limit	$5,000,000
	INLAND MARINE		TYPE OF POLICY					$
	CAUSES OF LOSS							$
	NAMED PERILS		POLICY NUMBER					$
								$
	X CRIME		**See Page 2**	01/29/2026	01/29/2027	X	Employee Dishonesty	$450,000
	TYPE OF POLICY					X	Computer Fraud	$450,000
						X	Forgery/Alteration	$100,000
A	X BOILER & MACHINERY / EQUIPMENT BREAKDOWN		N030PK1183-03	01/29/2026	01/29/2027	X	Equipment Breakdown	$33,679,710
								$
A	Commercial General Liability		N030PK1183-03	01/29/2026	01/29/2027	X	Per Occurrence Limit	$1,000,000
A	Directors & Officers		618839814	01/29/2026	01/29/2027	X	Directors & Officers	$1,000,000

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

CERTIFICATE HOLDER	CANCELLATION
EVIDENCE OF INSURANCE Need a certificate for an owner or Lender Request Certificate from: www.abipdx.com	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** CMD

ACORD 24 (2009/09)   The ACORD name and logo are registered marks of ACORD

ACORD®

ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED
ABI Insurance an ISU Network Agency		AUO of Glenwood Place, Inc.

POLICY NUMBER

PO Box 20816
Portland, OR 97294

CARRIER	NAIC CODE	

EFFECTIVE DATE: 01/29/2026

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ **FORM TITLE:** _____

WALLS IN COVERAGE INCLUDED
BETTERMENTS AND IMPROVEMENTS INCLUDED
GUARANTEED REPLACEMENT COST
144 RESIDENTIAL UNITS
CANCELLATION NOTICES ARE SENT DIRECTLY TO THE NAMED INSURED WITH A 10 DAY NOTICE FOR NON-PAY
AND 30 DAY NOTICE FOR ALL OTHER REASONS

Building Ordinance:
Coverage A (Undamaged Portion of Building) - $32,896,150 Limit / $10,000 Ded.
Coverage B (Demolition) - $500,000 Limit / $10,000 Ded.
Coverage C (Increased Cost of Construction) - $500,000 Limit / $10,000 Ded.

Full Earthquake Limits are written through two carriers which are listed as follows:
*Accelerant National Insurance Company - Policy #: N030PK1183-03 - 01/29/2026-01/29/2027 - $10,000,000
*Palomar Specialty Insurance Company - Policy #: CPDCP-26-1025901-B-06 - 01/29/2026-01/29/2027 - $23,637,900

Full Employee Dishonesty Limits are written through two carriers which are listed as follows:
*Continental Casualty Company - Policy #: 618839814 - 01/29/2026-01/29/2027 - $400,000
*Accelerant National Insurance Company - Policy #: N030PK1183-03 - 01/29/2026-01/29/2027 - $50,000

The Directors & Officers Policy is written through Continental Casualty Company