

WestCallawayStotka, Inc.

Delivering More Than A Promise Since 1906.

INSURANCE DISCLOSURE FORM PURSUANT TO CIVIL CODE SECTION 1365.9 **MOTA RANCH OWNERS' ASSOCIATION**

- A. GENERAL LIABILITY POLICY – Effective 08/12/09 – 08/12/10
1. Name of Insurer: Travelers Property Casualty Company of America
 2. Limits of Liability: \$1,000,000 per occurrence / \$2,000,000 aggregate
- B. COMMERCIAL EXCESS / UMBRELLA LIABILITY POLICY –Effective 08/12/09 – 08/12/10
1. Name of Insurer: Zurich Insurance Company
 2. Limits of Liability: \$15,000,000 per occurrence / \$15,000,000 aggregate
 3. Insured Retained Limit: \$0
- C. EMPLOYEE DISHONESTY – Effective 08/12/08 – 09/01/09
1. Name of Insurer: The Hartford
 2. Employee Dishonesty Limit: \$150,000 / \$5,000 Deductible
- D. DID AN INSURANCE AGENT, as defined in Section 1621 of the Insurance Code, an insurance broker, as defined in Section 1623 of the Insurance Code or an agent or insurance broker assist the Association in the development of the General and/or Commercial Excess / Umbrella Liability policy limits?
- Yes No
- Were the recommendations of the insuring agent of insurance broker followed?
- Yes No
- E. PROPERTY INSURANCE POLICY – Effective 08/12/09 – 08/12/10
1. Name of Insurer: Travelers Property Casualty Company of America
 2. Property Insurance Limits:

Building Coverage:	\$25,754,400
Business Personal Property:	\$ 13,029
 3. Property Insurance Deductible: \$ 5,000
 4. Person or entity is responsible for paying the property insurance deductible in the event of a loss: The responsible party or unit owner.
- F. EARTHQUAKE AND FLOOD INSURANCE POLICY – None in force with WestCallawayStotka
1. Name of Earthquake Insurer: N/A
 2. Earthquake policy limit: N/A
 3. Earthquake Insurance Deductible: N/A
 4. Person or entity is responsible for paying the earthquake insurance deductible in the event of a loss: N/A
 5. Name of Flood Insurer: N/A
- G. DIRECTORS AND OFFICERS LIABILITY POLICY– Effective 08/12/09 – 08/12/10
1. Name of Insurer: CNA Insurance Company
 2. Limits of Liability: \$1,000,000 / \$1,000 Retention
 3. Person or entity that is responsible for paying the Directors and Officers Liability deductible and/or participation: The responsible party or unit owner.
- H. WORKERS' COMPENSATION POLICY – Effective 09/27/08 – 09/27/09
1. Name of Insurer: Republic Indemnity
 2. Employers Liability Limit: \$1,000,000

200 Gregory Lane, Bldg. A, Pleasant Hill, CA 94523
Phone: 925-686-2860 Fax: 925-686-6118
www.westcallaway.com
CA Insurance Lic. OB63315

This summary is designed to give you an overview of your current program. It is meant as a general understanding of your insurance needs and should not be construed as a legal interpretation of your current coverage. Your specific insurance contracts should be consulted for details on coverage, conditions and exclusion. N:\CLIENTS\Mota Ranch Owners' Association\Ins. Disclosures\Mota Ranch Ins. Disclosure 09-10.doc

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This summary of the association's policies of insurance provides only certain information, as required by subdivision (e) of Section 1365 of the Civil code, and should not be considered a substitute for the complete policy terms and conditions contained in the actual policies of insurance. Any association member may, upon request and provision of reasonable notice, review the association's insurance policies and, upon request and payment of reasonable duplication charges, obtain copies of those policies. Although the association maintains the policies of insurance specified in this summary, the association's policies of insurance may not cover your property, including personal property or, real property improvements to or around your dwelling, or personal injuries or other losses that occur within or around your dwelling. Even if a loss is covered, you may nevertheless be responsible for paying all or a portion of any deductible that applies. Association members should consult with their individual insurance broker or agent for appropriate additional coverage.

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