

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/13/2025

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).

certificate holder in lieu of such endorsement(s).									
PRODUCER	Service Insurance Group, Inc. PO Box 5753 3840 Corporate Center Dr	77. 1	77 005 5752	CONTACT NAME: Adriana Maldonado PHONE (A/C, No, Ext): ADDRESS: Adriana@serviceinsgroup.com CONTACT (A/C, No):(979)774 Adriana@serviceinsgroup.com	4-3955				
	Bryan	IX	77805-5753	INSURER(S) AFFORDING COVERAGE	NAIC #				
				INSURER A: RLI Surety					
INSURED				INSURER B: United States Liability Insurance					
	Oakwood Townhomes HOA			INSURER C:					
	c/o Beal Properties 3363 University Dr E Ste 215			INSURER D:					
	College Station	TX	77802-	INSURER E :					
				INSURER F :					

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	EXCLUSIONS AND CONDITIONS OF SUCH I		POLICY NUMBER		POLICY EXP (MM/DD/YYYY)	LIMITS					
B	GENERAL LIABILITY	INSR WVD					1,000,000				
D	X COMMERCIAL GENERAL LIABILITY		NPP1575543H	04/20/2025	04/20/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000			
	CLAIMS-MADE X OCCUR					MED EXP (Any one person)	\$	5,000			
						PERSONAL & ADV INJURY	\$	1,000,000			
						GENERAL AGGREGATE	\$.	2,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$	Included			
	X POLICY PRO- JECT LOC						\$				
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$				
	ANY AUTO					BODILY INJURY (Per person)	\$				
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$				
	HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$				
	7.5.55					(\$				
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$				
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$				
	DED RETENTION \$						\$				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATU- TORY LIMITS ER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$				
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$				
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$				
Α			LFM0014832	08/01/2025	08/01/2026			30,000			
В	Directors & Officers		NPP1575543H			Aggr / Each Claim		1,000,000			
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)										

CERTIFICATE HOLDER CANCELLATION AI 014702

For Informational Purposes Only For Details, Please Contact Our Agency Phone 979-774-3900 Fax 979-774-3955 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

Crosnay Hunt