

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 7/7/2023

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY PHONE (A/C, No, Ext): (515) 224-4391 The Dana Company 12345 University, Ste 300 Des Moines, IA 50325					COMPANY Auto Owners Insurance PO Box 65440 West Des Moines, IA 50266-7060							
CODE: 0701	-		fo@thedanaco.com									
INSURED	Prairie Lakes (PO Box 57273	Condomin	ium Association		LOAN NUMBER		POLICY NUMBER 39599485					
	Des Moines, IA 50317		'		EFFECTIVE DATE 7/7/2023	EXPIRATION DATE 7/7/2024	CONTINUED UNTIL TERMINATED IF CHECKED					
					THIS REPLACES PRIOR EVIDENCE DATED:							
PROPERT	Y INFORMATIO	N										

LOCATION/DESCRIPTION
Loc # 0, Bldg # 0, Blanket
Loc # 1, Bldg # 1, 1640 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units
Loc # 2, Bldg # 1, 1606 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units
Loc # 2, Bldg # 2, 1606 Prairie Lakes Drive, Ankeny, IA 50021, Garage
Loc # 3, Bldg # 1, 1602 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units
SEE ATTACHED ACORD 101

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	X	SPECIAL				
	AN	MOUNT OF INSURANCE	DEDUCTIBLE						
Loc # 0, Bldg # 0 Building, Special (Including theft) Loc # 1, Bldg # 1								\$6,854,900	\$2,500
Building, Special (Including theft)								\$968,700	\$2,500
Loc # 2, Bldg # 1 Building, Special (Including theft) Loc # 2, Bldg # 2								\$968,700	\$2,500
Building, Special (Including theft) Loc # 3, Bldg # 1								\$32,200	\$2,500
Building, Special (Including theft)								\$968,700	\$2,500
Loc # 3, Bldg # 2 Building, Special (Including theft) SEE ATTACHED ACORD 101								\$17,200	\$2,500

REMARKS (Including Special Conditions)

Special Conditions: FOR INFORMATION ONLY

7 Buildings total with a total of 56 Units. Inflation guard applies.

Windstorm/Hail Deductible - \$10,000 per building SEE ATTACHED ACORD 101

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.

ADDITIONAL INTEREST									
NAME AND ADDRESS		ADDITIONAL INSURED		LENDER'S LOSS PAYABLE LOSS PAYEE					
		MORTGAGEE	X	FOR INFORMATION ONLY					
Gulling Property Management PO Box 57273	LOAN#								
Des Moines, IA 50317	AUTHORIZED REPRESENTATIVE								
		^							

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY					
The Dana Company					
POLICY NUMBER					
39599485					
CARRIER NAIC CODE					
Auto Owners Insurance 18988					
	NAIC CODE				

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PROPERTY INSURANCE

Locations:

Loc # 3, Bldg # 2, 1602 Prairie Lakes Drive, Ankeny, IA 50021, Garage

Loc # 4, Bldg # 1, 1636 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units

Loc # 4, Bldg # 2, 1636 Prairie Lakes Drive, Ankeny, IA 50021, Garage

Loc # 5, Bldg # 1, 1632 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units

Loc # 5, Bldg # 2, 1632 Prairie Lakes Drive, Ankeny, IA 50021, Garage

Loc # 6, Bldg # 1, 1624 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units Loc # 7, Bldg # 1, 1620 Prairie Lakes Drive, Ankeny, IA 50021, Condominium - 8 Units

Coverage Information:

Loc # 4, Bldg # 1

Building, Special (Including theft), Amount of Insurance: \$968,700, Deductible: \$2,500

Loc # 4, Bldg # 2

Building, Special (Including theft), Amount of Insurance: \$16,200, Deductible: \$2,500

Loc # 5, Bldg # 1

Building, Special (Including theft), Amount of Insurance: \$968,700, Deductible: \$2,500

Loc # 5, Bldg # 2

Building, Special (Including theft), Amount of Insurance: \$8,400, Deductible: \$2,500

Loc # 6, Bldg # 1

Building, Special (Including theft), Amount of Insurance: \$968,700, Deductible: \$2,500

Loc # 7, Bldg # 1

Building, Special (Including theft), Amount of Insurance: \$968,700, Deductible: \$2,500

Special Conditions:

Equipment Breakdown and Ordinance & Law Included

Cancellation per lowa state laws - 10 days notice of cancellation

This is an "All-In" policy covering the general/limited common elements belonging to the HOA, however individual unit interior improvements are not covered.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
7/7/2023

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).

LI	ils certificate does flot confer rights t	o ille	CCIL	incate noticel in neu of su			•						
PRO	DUCER License # 1001001193				CONTA NAME:	СТ							
The Dana Company						PHONE (A/C, No, Ext): (515) 224-4391 FAX (A/C, No): (515) 224-4955							
	45 University, Ste 300 Moines, IA 50325				E-MAIL	_{ss:} info@the	edanaco co		(0.0)				
Des	Wolfles, IA 30323				ADDRE								
								RDING COVERAGE		NAIC #			
					INSURE	18988							
INSU	JRED				INSURE								
	Prairie Lakes Condo Associ	atior	ı		INSURE	R C :							
	PO Box 57273				INSURE								
	Des Moines, IA 50317				INSURE								
					INSURE								
\sim	VERAGES CER	TIFI	CATI	E NUMBER:				REVISION NUMBER:					
	HIS IS TO CERTIFY THAT THE POLICIE				UAVE B	EEN ISSUED 1	THE INIGHT			JI ICV DEDIOD			
IN C	IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQU PER	IREM TAIN,	ENT, TERM OR CONDITION , THE INSURANCE AFFORM	N OF A	ANY CONTRAC	CT OR OTHER	R DOCUMENT WITH RESPI BED HEREIN IS SUBJECT	ECT TO	O WHICH THIS			
INSR			SUBR		DELIT	POLICY EFF	LIMIT	MITC					
LTR A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	FOLIGT NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)			2,000,000			
^				20522425		=/=/0000	========	DAMAGE TO RENTED	\$	300,000			
	CLAIMS-MADE X OCCUR			39599485		7/7/2023	7/7/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	10,000			
								MED EXP (Any one person)	\$				
								PERSONAL & ADV INJURY	\$	2,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	4,000,000			
	X POLICY PRO-							PRODUCTS - COMP/OP AGG	\$	4,000,000			
	OTHER:							COMBINED SINGLE LIMIT	\$				
	AUTOMOBILE LIABILITY							(Ea accident)	\$				
	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per person)	\$				
	AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$				
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$				
		ـــــــ							\$				
Α	X UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	1,000,000			
	EXCESS LIAB CLAIMS-MADE			5459948500		7/7/2023	7/7/2024	AGGREGATE	\$				
	DED X RETENTION \$ 10,000							Aggregate	s	1,000,000			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER					
								E.L. EACH ACCIDENT	\$				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A											
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE					
Δ	Directors & Officers			39599485		7/7/2023	7/7/2024	E.L. DISEASE - POLICY LIMIT	\$	1,000,000			
A	Crime			39599485		7/7/2023	7/7/2024	Employee Theft		50,000			
^	Offine			33333403		11112023	11112024	Employee men		30,000			
					_				Ь				
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	D 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requi	red)					
CE	RTIFICATE HOLDER				CANO	CELLATION							
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE								
Gulling Property Management LLC						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
PO Box 57273					ACCOMPANCE WITH THE FOLICT FROMOTORS.								
	Des Moines, IA 50317												
			AUTHORIZED REPRESENTATIVE										