



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

4/24/2025

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.

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<br>Scarborough Medlin & Associates<br>5700 Granite Pkwy Ste 500<br><br>Plano TX 75024-6640   | CONTACT NAME: Kylie Proffitt<br>PHONE (A/C, No, Ext): (214)423-3333 FAX (A/C, No): (214)423-3350<br>E-MAIL ADDRESS: kylie@scarborough-medlin.com<br>PRODUCER CUSTOMER ID: 00011902              |
| INSURED<br>The Shops at Prestonwood HOA Inc., DBA: Villas of Preston<br>c/o Legacy Southwest Property Management<br>8668 John Hickman Parkway #801<br>Frisco TX 75034 | INSURER(S) AFFORDING COVERAGE<br>INSURER A: United States Liability Insurance Company 25895<br>INSURER B: Ascot Insurance Company 23752<br>INSURER C:<br>INSURER D:<br>INSURER E:<br>INSURER F: |

## COVERAGES

CERTIFICATE NUMBER: CP2542419081

REVISION NUMBER:

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

2725 Creekway Drive

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        | <input checked="" type="checkbox"/> PROPERTY                      | NPP0253842     | 4/23/2025                          | 4/23/2026                           | <input checked="" type="checkbox"/> BUILDING          | \$ 493,000 |
|          | CAUSES OF LOSS  |                |                                    |                                     | <input checked="" type="checkbox"/> PERSONAL PROPERTY | \$ 50,000  |
|          | BASIC   |                |                                    |                                     | BUSINESS INCOME                                       | \$         |
|          | BROAD   |                |                                    |                                     | EXTRA EXPENSE   | \$         |
|          | <input checked="" type="checkbox"/> SPECIAL                       |                |                                    |                                     | RENTAL VALUE  | \$         |
|          | EARTHQUAKE  |                |                                    |                                     | BLANKET BUILDING                                      | \$         |
|          | <input checked="" type="checkbox"/> WIND                          |                |                                    |                                     | BLANKET PERS PROP                                     | \$         |
|          | FLOOD   |                |                                    |                                     | BLANKET BLDG & PP                                     | \$         |
|          | <input checked="" type="checkbox"/> HAIL                          |                |                                    |                                     | <input checked="" type="checkbox"/> OUTDOOR PROPERTY  | \$ 700,000 |
|          |   |                |                                    |                                     |   | \$         |
|          | <input type="checkbox"/> INLAND MARINE                            | TYPE OF POLICY |                                    |                                     |   | \$         |
|          | CAUSES OF LOSS  | POLICY NUMBER  |                                    |                                     |   | \$         |
|          | <input type="checkbox"/> NAMED PERILS                             |                |                                    |                                     |   | \$         |
|          |   |                |                                    |                                     |   | \$         |
| B        | <input checked="" type="checkbox"/> CRIME                         | SFC00001754    | 4/23/2025                          | 4/23/2026                           | <input checked="" type="checkbox"/> LIMIT             | \$ 500,000 |
|          | TYPE OF POLICY  |                |                                    |                                     | <input checked="" type="checkbox"/> DEDUCTIBLE        | \$ 1,000   |
|          | <input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN |                |                                    |                                     |   | \$         |
|          |   |                |                                    |                                     |   | \$         |
|          |   |                |                                    |                                     |   | \$         |
|          |   |                |                                    |                                     |   | \$         |

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

## CERTIFICATE HOLDER

## CANCELLATION

For Information Only\*\*\*\*\*  
For Information Only\*\*\*\*\*  
For Information Only\*\*\*\*\*  
For Information Only\*\*\*\*\*

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

ROD MEDLIN/KYLIE



# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

4/24/2025

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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.

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|---|---|
| PRODUCER<br>Scarborough Medlin & Associates<br>5700 Granite Pkwy Ste 500<br><br>Plano TX 75024-6640   | CONTACT NAME: Kylie Proffitt<br>PHONE (A/C, No, Ext): (214) 423-3333 FAX (A/C, No): (214) 423-3350<br>E-MAIL ADDRESS: kylie@scarborough-medlin.com<br>PRODUCER CUSTOMER ID: 00011902            |
| INSURED<br>The Shops at Prestonwood HOA Inc., DBA: Villas of Preston<br>c/o Legacy Southwest Property Management<br>8668 John Hickman Parkway #801<br>Frisco TX 75034 | INSURER(S) AFFORDING COVERAGE<br>INSURER A: United States Liability Insurance Company 25895<br>INSURER B: Ascot Insurance Company 23752<br>INSURER C:<br>INSURER D:<br>INSURER E:<br>INSURER F: |

## COVERAGES

CERTIFICATE NUMBER: CP2542419081

REVISION NUMBER:

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

2725 Creekway Drive

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        | <input checked="" type="checkbox"/> PROPERTY |                |                                    |                                     | <input checked="" type="checkbox"/> BUILDING          | \$ 493,000   |    |
|          | CAUSES OF LOSS                               | DEDUCTIBLES    |                                    |                                     | <input checked="" type="checkbox"/> PERSONAL PROPERTY | \$ 50,000    |    |
|          |  | BUILDING       |                                    |                                     | BUSINESS INCOME                                       | \$           |    |
|          |  | \$5,000        |                                    |                                     | EXTRA EXPENSE   | \$           |    |
|          | <input checked="" type="checkbox"/> SPECIAL  | CONTENTS       | NPP0253842                         | 4/23/2025                           | 4/23/2026   | RENTAL VALUE | \$ |
|          |  | EARTHQUAKE     |                                    |                                     | BLANKET BUILDING                                      | \$           |    |
|          | <input checked="" type="checkbox"/> WIND     | 5%             | REPLACEMENT COST                   |                                     | BLANKET PERS PROP                                     | \$           |    |
|          |  | FLOOD          | 80% COINSURANCE                    |                                     | BLANKET BLDG & PP                                     | \$           |    |
|          | <input checked="" type="checkbox"/> HAIL     | 5%             |                                    |                                     | <input checked="" type="checkbox"/> OUTDOOR PROPERTY  | \$ 700,000   |    |
|          |  |                |                                    |                                     |   | \$           |    |
|          | INLAND MARINE                                | TYPE OF POLICY |                                    |                                     |   | \$           |    |
|          | CAUSES OF LOSS                               | POLICY NUMBER  |                                    |                                     |   | \$           |    |
|          | NAMED PERILS                                 |                |                                    |                                     |   | \$           |    |
|          |  |                |                                    |                                     |   | \$           |    |
| B        | <input checked="" type="checkbox"/> CRIME    | SFC00001754    | 4/23/2025                          | 4/23/2026                           | <input checked="" type="checkbox"/> LIMIT             | \$ 500,000   |    |
|          | TYPE OF POLICY                               |                |                                    |                                     | <input checked="" type="checkbox"/> DEDUCTIBLE        | \$ 1,000     |    |
|          |  |                |                                    |                                     |   | \$           |    |
|          | BOILER & MACHINERY / EQUIPMENT BREAKDOWN     |                |                                    |                                     |   | \$           |    |
|          |  |                |                                    |                                     |   | \$           |    |
|          |  |                |                                    |                                     |   | \$           |    |
|          |  |                |                                    |                                     |   | \$           |    |

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

Legacy Southwest Property Management LP is included as Additional Insured as respects the referenced Crime policy, per written contract.

## CERTIFICATE HOLDER

## CANCELLATION

Legacy Southwest Property Management LP  
8868 John Hickman Parkway #801  
Frisco, TX 75034

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

ROD MEDLIN/KYLIE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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**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).

|  |  |
|--|--|
| <b>PRODUCER</b><br>Scarbrough Medlin & Associates<br>5700 Granite Pkwy Ste 500<br><br>Plano TX 75024-6640  | <b>CONTACT NAME:</b> Kylie Proffitt<br><b>PHONE (A/C, No, Ext):</b> (214) 423-3333<br><b>FAX (A/C, No):</b> (214) 423-3350<br><b>E-MAIL ADDRESS:</b> kylie@scarbrough-medlin.com   |
| <b>INSURED</b><br>The Shops at Prestonwood HOA Inc., DBA: Villas of Prestonwood<br>c/o Legacy Southwest Property Management<br>8668 John Hickman Parkway #801<br>Frisco TX 75034 | <b>INSURER(S) AFFORDING COVERAGE</b><br><b>INSURER A:</b> United States Liability Insurance Company<br><b>INSURER B:</b> Ascot Insurance Company<br><b>INSURER C:</b> Pennsylvania Manufacturers' Association Insurance<br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |
|  | <b>NAIC #</b><br>25895<br>23752<br>12262   |

**COVERAGES****CERTIFICATE NUMBER:** CL2542430779**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  |
|----------|--|---------------------------------|----------|----------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |                                 |          | NPP0253842     | 04/23/2025              | 04/23/2026              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ Included |
| A        | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  |                                 |          | NPP0253842     | 04/23/2025              | 04/23/2026              | COMBINED SINGLE LIMIT (Ea accident) \$ Included<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
| B        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b><br><input checked="" type="checkbox"/> <b>EXCESS LIAB</b><br>DED <input checked="" type="checkbox"/> RETENTION \$ 0   |                                 |          | SFU00001462    | 04/23/2025              | 04/23/2026              | EACH OCCURRENCE \$ 5,000,000<br>AGGREGATE \$ 5,000,000  |
| C        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N<br><input type="checkbox"/> | N/A      | 2025010823179Y | 04/23/2025              | 04/23/2026              | <input checked="" type="checkbox"/> PER STATUTE<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000   |
| B        | Directors and Officers Liability   |                                 |          | SFD00002985    | 04/23/2025              | 04/23/2026              | Limit \$1,000,000<br>Retention - Each Claim \$1,000   |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**For Information Only\*\*\*\*\*  
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AUTHORIZED REPRESENTATIVE

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# CERTIFICATE OF LIABILITY INSURANCE

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|  | <b>NAIC #</b><br>25895<br>23752<br>12262   |

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|----------|--|---------------------------------|----------|----------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |                                 |          | NPP0253842     | 04/23/2025              | 04/23/2026              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ Included |
| A        | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  |                                 |          | NPP0253842     | 04/23/2025              | 04/23/2026              | COMBINED SINGLE LIMIT (Ea accident) \$ Included<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
| B        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b><br><input checked="" type="checkbox"/> <b>EXCESS LIAB</b><br>DED <input checked="" type="checkbox"/> RETENTION \$ 0   |                                 |          | SFU00001462    | 04/23/2025              | 04/23/2026              | EACH OCCURRENCE \$ 5,000,000<br>AGGREGATE \$ 5,000,000  |
| C        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N<br><input type="checkbox"/> | N/A      | 2025010823179Y | 04/23/2025              | 04/23/2026              | <input checked="" type="checkbox"/> PER STATUTE<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000   |
| B        | Directors and Officers Liability   |                                 |          | SFD00002985    | 04/23/2025              | 04/23/2026              | Limit \$1,000,000<br>Retention - Each Claim \$1,000   |

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

Legacy Southwest Property Management LP is included as Additional Insured as respects the referenced General Liability and Directors & Officers Liability policies, per written contract.

**CERTIFICATE HOLDER****CANCELLATION**

Legacy Southwest Property Management LP  
8868 John Hickman Parkway #801

Frisco

TX 75034

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