



CERTIFICATE OF PROPERTY INSURANCE

NROBERTSON

DATE (MM/DD/YYYY)
02/19/2025

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.

PRODUCER	CONTACT NAME:	
Acrisure Southeast Partners Insurance Services, LLC 1317 Citizens Blvd Leesburg, FL 34748	PHONE (A/C, No, Ext):	(800) 845-8437
	FAX (A/C, No):	
	E-MAIL ADDRESS:	nrobertson@acrisure.com
	PRODUCER CUSTOMER ID:	WIGGBAY-02
INSURED	INSURER(S) AFFORDING COVERAGE	
	NAIC #	
	INSURER A :	Cincinnati Indemnity Company
	INSURER B :	Philadelphia Indemnity Insurance Company
	INSURER C :	
	INSURER D :	
	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)
1 1 Wiggins Pass Road, Naples, FL, 34108
SEE ATTACHED ACORD 101

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	ENP0505574	12/15/2024	12/15/2025	<input checked="" type="checkbox"/> BUILDING	\$ 113,508
		CAUSES OF LOSS				<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 2,333
		BASIC				BUSINESS INCOME	\$
		BROAD				EXTRA EXPENSE	\$
		SPECIAL				RENTAL VALUE	\$
		EARTHQUAKE				BLANKET BUILDING	\$
	<input checked="" type="checkbox"/>	WIND				BLANKET PERS PROP	\$
		FLOOD				BLANKET BLDG & PP	\$
						<input checked="" type="checkbox"/> Deductible:	\$ 1,000
							\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY				\$
		CAUSES OF LOSS					\$
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER				\$
							\$
B	<input checked="" type="checkbox"/>	CRIME	PCAC0001360718	09/26/2024	09/26/2025		\$ 1,000,000
		TYPE OF POLICY					\$
		Crime					\$
							\$
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
							\$
A		General Liability	ENP0505574	12/15/2024	12/15/2025	<input checked="" type="checkbox"/>	\$ 2,000,000
B		Directors & Officers	PCAP0194900619	01/17/2025	01/17/2026	<input checked="" type="checkbox"/>	\$ 1,000,000

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

CERTIFICATE HOLDER	CANCELLATION
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



ADDITIONAL REMARKS SCHEDULE

AGENCY Acrisure Southeast Partners Insurance Services, LLC		NAMED INSURED Wiggins Bay Foundation, Inc. C/O Paramount Property Management, Llc 5629 Strand Blvd Suite 412 Naples, FL 34110-6834	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 24 FORM TITLE: Certificate of Property Insurance

Description of Property:

Hazard/Property: **Wiggins Pass Rd, Naples, FL 34108 -Guard Building & Electric Gates**

Cause of Loss: **Special / Replacement Cost up to Insured Value / 80% Coinsurance**

Deductibles: **10% Wind/Hail / \$1,000 All Other Perils / Ordinance or Law included / Equipment Breakdown Included Limit: \$113,508**

Crime/Fidelity: **Includes Property Manager**