CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY): 10/14/2025

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
StateFarm
Jane Yoho
111 N Milwaukee St
Prt Washingtn, WI 53074-1863

CONTACT NAME: Jane Yoho
PHONE (A/C, No, Ext): (262) 284-7094 FAX (A/C, No): (262) 268-8835
E-MAIL ADDRESS: jane.yoho.b1gl@statefarm.com
PRODUCER CUSTOMER ID

INSURED
ROLLING HILLS ESTATES CONDOMINIUM
3000 UPPER RIDGE RD
PRT WASHINGTN, WI 53074-1859

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : State Farm Fire and Casualty Company	25143
INSURER B :	
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)
REFER TO 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
	[X] PROPERTY CAUSES OF LOSS / DEDUCTIBLES [ ] BASIC — BUILDING $10,000.00 [ ] BROAD — CONTENTS [X] SPECIAL [ ] EARTHQUAKE [ ] WIND [ ] FLOOD	99-CZ-E939-8	09/15/2025	09/15/2026	[ ] BUILDING [ ] PERSONAL PROPERTY [ ] BUSINESS INCOME [ ] EXTRA EXPENSE [ ] RENTAL VALUE [X] BLANKET BUILDING [ ] BLANKET PERS PROP [ ] BLANKET BLDG & PP	$ $ $ SEE ACORD 101 $ SEE ACORD 101 $ SEE ACORD 101 $ $12,998,700 $ $
	[ ] INLAND MARINE CAUSES OF LOSS [ ] NAMED PERILS	TYPE OF POLICY POLICY NUMBER				$
	[ ] CRIME TYPE OF POLICY					$
	[X] BOILER & MACHINERY / EQUIPMENT BREAKDOWN					$
						$

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

CERTIFICATE HOLDER
PORT WASHINGTON STATE BANK
ISAOA
206 N Franklin St
Prt Washingtn, WI 53074-1903

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.

AUTHORIZED REPRESENTATIVE
IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.

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AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED
Jane Yoho		ROLLING HILLS ESTATES CONDOMINIUM
POLICY NUMBER		
99-CZ-E939-8		
CARRIER	NAIC CODE	
State Farm Fire and Casualty Company	25143	EFFECTIVE DATE: 09/15/2025

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: 24 **FORM TITLE:** Certificate of Property Insurance

Unit Owner:

ROLLING HILLS CONDOMINIUMS - 3000 Upper Ridge Rd - Prt Washingtn, - WI - 53074-1859 - Unit Loan Number:N/A - Number Of Units: 0028

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

CMP-4100	Businessowners Coverage Form	
FE-6999.3	Terrorism Insurance Cov Notice	
FE-3650	Actual Cash Value Endorsement	
CMP-4532	Exclusion Cyber Incident	
CMP-4508	Money and Securities	
CMP-4710	Emp Dishonesty	$25,000

Forms, Options and Endorsements:

CMP-4550	Residential Community Assoc	
CMP-4249.2	Amendatory Endorsement	
CMP-4561.5	Policy Endorsement	
CMP-4705.2	Loss of Income & Extra Expense	
CMP-4814	Dir & Officers	$1,000,000
CMP-4784	Per Dwelling Building Deduct	

Coverages:

Business Liability	$1,000,000
Medical Payments	$5,000
Products-Completed Operations	$2,000,000
General Aggregate	$2,000,000

Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association Covenants, Conditions, and Restrictions (CC&Rs) including the following types of property within a unit, regardless of ownership:

1. Fixtures, improvements and alterations that are a part of the building or structure; and
2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. ***However, these endorsements do not change any replacement cost coverage provided by the policy.***

This policy provides coverage on a standalone/individual condominium association.

Commercial General Liability

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.

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