



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
07/18/2018

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 Macchia General Agency 6410 Southwest Blvd Suite 222 Fort Worth TX 76109	CONTACT NAME: David Macchia	
	PHONE (A/C, No, Ext): (817) 246-4640 FAX (A/C, No): (817) 246-4696	
	E-MAIL ADDRESS: dmacchia@macchiaga.com	
	PRODUCER CUSTOMER ID: 42263	
INSURED Agua Special Utility District P.O. Box 4379 Mission TX 78573- () -	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Philadelphia Insurance Co	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

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 CAUSES OF LOSS: BASIC, BROAD, SPECIAL, EARTHQUAKE, WIND, FLOOD DEDUCTIBLES: BUILDING 1,000, CONTENTS Theft, 5,000,000, 1%, 5,000,000	1811546-626735	04/26/2018	04/26/2019	<input type="checkbox"/> BUILDING <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> BUSINESS INCOME <input checked="" type="checkbox"/> EXTRA EXPENSE <input checked="" type="checkbox"/> RENTAL VALUE <input type="checkbox"/> BLANKET BUILDING <input type="checkbox"/> BLANKET PERS PROP <input checked="" type="checkbox"/> BLANKET BLDG & PP	\$ \$ \$ \$ 500,000 \$ 100,000 \$ \$ \$ 54,503,112 \$ \$
A	<input checked="" type="checkbox"/> INLAND MARINE CAUSES OF LOSS: NAMED PERILS	TYPE OF POLICY POLICY NUMBER 1811546-626735	04/26/2018	04/26/2019	<input checked="" type="checkbox"/> Contractors Equip <input checked="" type="checkbox"/> Deductible	\$ 358,954 \$ 500 \$ \$
A	<input checked="" type="checkbox"/> CRIME TYPE OF POLICY	1811546-626735	04/26/2018	04/26/2019	<input checked="" type="checkbox"/> Employee Theft <input checked="" type="checkbox"/> Forgery & Alteration <input checked="" type="checkbox"/> Inside Prem-Theft/MS	\$ 300,000 \$ 100,000 \$ 50,000
	<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	No holders
	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	