

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/24/2022

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).												
PRODUCER						CONTACT NAME:						
MARSH USA, INC.							PHONE FAX					
TWO ALLIANCE CENTER 3560 LENOX ROAD, SUITE 2400							(Á/C, No, Ext): (A/C, No): E-MAIL ADDRESS:					
ATLANTA, GA 30326												
CN101921684GU-20-22							INSURER(S) AFFORDING COVERAGE INSURER A: Lloyds Syndicates and HDI Global					
INSURED												
Starlight Homes North Carolina L.L.C.							INSURER B:					
5711 Six Forks Road, Suite 200 Raleigh, NC 27609							INSURER C:					
Naiogii, NO 27007							INSURER D:					
						INSURER E :						
<u> </u>						INSURER F:						
_					E NUMBER:		-005396922-10		REVISION NUMBER: 4		IOV DEDICE	
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	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
Α	Χ	COMMERCIAL GENERAL LIABILITY					10/16/2020	10/16/2022	EACH OCCURRENCE	\$	2,000,000	
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
					SIR per occurrence (\$250,000)				MED EXP (Any one person)	\$	N/A	
									PERSONAL & ADV INJURY	\$	2,000,000	
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
	X	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
		OTHER:							Fire Damage (Any One	\$	100,000	
	AUT	TOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO							BODILY INJURY (Per person)	\$		
		OWNED SCHEDULED							BODILY INJURY (Per accident)	\$		
		AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	\$		
		AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
		UMBRELLA LIAB OCCUB										
		- OCCUR							EACH OCCURRENCE	\$		
		CLAIWS-WADE	-						AGGREGATE	\$		
	WOF	DED RETENTION \$ RKERS COMPENSATION							PER OTH-	\$		
	AND	EMPLOYERS' LIABILITY Y/N							<u> </u>			
ANYPROPRIETOR/PARTNER/EXECUTIVE N		N/A						E.L. EACH ACCIDENT	\$			
	If ves	ndatory in NH) s, describe under							E.L. DISEASE - EA EMPLOYEE			
	DÉS	CRIPTION OF OPERATIONS below		-					E.L. DISEASE - POLICY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
CE	RTIF	FICATE HOLDER				CANCELLATION						
Harnett County PO Box 65 Lillington, NC 27546							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						
							Marsh USA Inc.					

AGENCY CUSTOMER ID: CN101921684

LOC #: Atlanta



ADDITIONAL REMARKS SCHEDULE

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AGENCY MARSH USA, INC.		NAMED INSURED Starlight Homes North Carolina L.L.C. 5711 Six Forks Road, Suite 200								
POLICY NUMBER		Raleigh, NC 27609								
CARRIER	NAIC CODE	EFFECTIVE DATE.								
		EFFECTIVE DATE:								
ADDITIONAL REMARKS										
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,										
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance										
The General Liability policy evidenced above is subject to a self-insured retention of \$250,000 per occurrence except for property damage to or arising out of homes that close during the policy period which are subject to self-insured retentions that vary by community.										