



Accredited Surety and Casualty Company, Inc.

A Randall & Quilter Group Company
P.O. Box 140854
Orlando, FL 32814-0854

COMMUNITY ASSOCIATION SELECT POLICY

DECLARATIONS - D&O

NOTICE: THIS IS A CLAIMS-MADE POLICY. THIS POLICY COVERS ONLY CLAIMS FIRST MADE AGAINST THEINSURED DURING THE POLICY PERIOD OR DISCOVERY PERIOD, IF APPLICABLE, AND REPORTED TO THE INSURER AS SOON AS PRACTICABLE BUT IN NO EVENT LATER THAN 90 DAYS AFTER THE END OF THE POLICY PERIOD. PLEASE READ THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENTOR BROKER.

UNLESS AMENDED BY ENDORSEMENT, AMOUNTS INCURRED AS DEFENSE COSTS SHALL BE IN ADDITION TO THE LIMIT OF LIABILITY AND SHALL NOT BE APPLIED AGAINST THE APPLICABLE RETENTION.

THE INSURER HAS THE DUTY TO DEFEND.

POLICY NUMBER: 1-SKN-CA-01524259-01

PRODUCER: LaBarre/Oksnee Insurance Agenc

RENEWAL OF:

ITEM I. NAME AND ADDRESS OF PARENT ORGANIZATION: Wildwood Homeowners Association
Physical 4088 Savannah Lane SACRAMENTO, CA 95823
Mailing 4540 Florin Road, 253 SACRAMENTO, CA 95823

ITEM II. POLICY PERIOD: Inception Date: 10/8/2025 Expiration Date: 10/8/2026
(12:01 A.M. at the address set forth in Item I)

ITEM III. LIMIT OF LIABILITY: \$1,000,000 in the aggregate for the **Policy Year**

ITEM IV. RETENTION: \$1,000 in the aggregate each **Claim**

ITEM V. PRIOR LITIGATION DATE: 10/8/2024

ITEM VI. PREMIUM: \$1,732.90 **TRIA Premium:** \$0.00

ITEM VII. ENDORSEMENTS FORMING PART OF THIS POLICY AT ISSUANCE:
Select Endorsement

This Declarations page, together with the **Application**, the attached Community Association Policy Form, and all endorsements thereto, shall constitute the contract between the Insurer and the **Insureds**. This Policy is valid only if signed below by a duly authorized representative of the Insurer.

Authorized Representative