



ADDITIONAL REMARKS SCHEDULE

AGENCY Acentria Insurance		NAMED INSURED Seagrove Highlands Condo Assn 2153 Riverchase Office Road Birmingham AL 35244-1836	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

SPECIAL CONDITIONS:

FL Statue 718 - Walls Out (up to dry wall)
 Total Units: 82

Crime:
 Include Designated Agents as Employees - Property Manager

General Liability:
 Form CG0001 12/07
 Separation Of Insureds

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this Coverage Part to the first Named Insured, this insurance applies:

- a. As if each Named Insured were the only Named Insured; and
- b. Separately to each insured against whom claim is made or "suit" is brought.