



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFFERS 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 Higginbotham Insurance Agency, Inc. 11700 Katy Freeway, Ste. 1100 Houston 77079		CONTACT NAME: Lorri J. Henderson PHONE (A/C, No, Ext): 713 952 9990 FAX (A/C, No): E-MAIL ADDRESS: LHenderson@higginbotham.net
		INSURER(S) AFFORDING COVERAGE
		INSURER A : The Hanover Insurance Company
		22292
INSURED Williamsburg Settlement Maint. Assoc. c/o Crest Management P. O. Box 219223 Houston TX 77218		WILLSET-01
		INSURER B : Hartford Insurance Company Of The Midwest
		37478
		INSURER C : Federal Insurance Company
		20281
		INSURER D : ACE American Insurance Company
		22667
		INSURER E : Greenwich Insurance Company
		22322
		INSURER F :

COVERAGES

CERTIFICATE NUMBER: 665366381

REVISION NUMBER:

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.

EXCLUSIONS AND CONDITIONS OF THIS POLICY. LIMITS OWNED MAY HAVE BEEN REDUCED BY THIS POLICY.				POLICY EFF (MM/DD/YYYY)		POLICY EXP (MM/DD/YYYY)		LIMITS					
INSR LTR	TYPE OF INSURANCE		ADDL SUBR INSD WVD	POLICY NUMBER									
D	X	COMMERCIAL GENERAL LIABILITY		SVRD35372490	6/1/2025	6/1/2026	EACH OCCURRENCE			\$1,000,000			
		CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)			\$100,000			
							MED EXP (Any one person)			\$0			
							PERSONAL & ADV INJURY			\$1,000,000			
		GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE			\$2,000,000			
		POLICY <input type="checkbox"/> PRO- JECT <input checked="" type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG			\$2,000,000			
		OTHER:								\$			
D	AUTOMOBILE LIABILITY			CALH08503941	6/1/2025	6/1/2026	COMBINED SINGLE LIMIT (Ea accident)			\$1,000,000			
	ANY AUTO						BODILY INJURY (Per person)			\$			
	OWNED AUTOS ONLY						BODILY INJURY (Per accident)			\$			
	Hired AUTOS ONLY						PROPERTY DAMAGE (Per accident)			\$			
										\$			
E	X	UMBRELLA LIAB		PPP7476092L25A05	6/1/2025	6/1/2026	EACH OCCURRENCE			\$10,000,000			
		EXCESS LIAB					AGGREGATE			\$			
		DED <input checked="" type="checkbox"/> RETENTION \$ 0								\$			
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			61WBCRU6776	7/10/2025	7/10/2026	PER STATUTE		OTHE- R				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT			\$1,000,000			
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE			\$1,000,000			
							E.L. DISEASE - POLICY LIMIT			\$1,000,000			
D A C	Property D&O Machinery Breakdown			SVRD35372490 LHDA028727 76437224	6/1/2025 6/1/2025 6/1/2025	6/1/2026 6/1/2026 6/1/2026	Blanket Amount \$1,000,000 \$1,000,000		\$1,547,793 \$5,000 \$10,000 \$1,000 Retention				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Replacement cost subject to exact policy terms and conditions
Deductibles: 2% Windstorm and Hail | \$2,500 All other named perils

Crime Coverage | Travelers | 105931411 | 06/01/25-26 | \$50,000 Limit | \$500 Deductible

****COMMON AREAS ONLY****

See Attached...

CERTIFICATE HOLDER

CANCELLATION

Sweetwater Pools, Inc.
10408 Rockley Road
Houston TX 77099

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



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ADDITIONAL REMARKS SCHEDULE

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AGENCY Higginbotham Insurance Agency, Inc.	NAMED INSURED Williamsburg Settlement Maint. Assoc. c/o Crest Management P. O. Box 219223 Houston TX 77218
POLICY NUMBER	
CARRIER	NAIC CODE
EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Additional Insured:
Sweetwater Pools, Inc.
10408 Rockley Road
Houston, TX 77099