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AGENCY CUSTOMER ID: Agency Customer ID

LIABILITY COVERAGES -	POLICY LEVEL		AGENCY	CUSTOMER ID: Agency C	ustomer ID		
COVERAGE	TOTAL AMOUNT	DEDUCTIBLE	INCL	FORM NUMBER	FORM DATE	PREMIUM	
BODILY INJURY & OCCURRENCE & PROPERTY DAMAGE AGGREGATE	\$ 12,345.67 \$ 12,345.67	\$ 12,345.67	Х	Liability Coverage	09/08/2024	\$ 12,345.67	
MEDICAL EXPENSE (per person)	\$ 12,345.67	\$ 12,345.67	Х	Form Number Bodily Liability Coverage	09/08/2024	\$ 12,345.67	
PERSONAL & ADVERTISING INJURY	\$ 12,345.67	\$ 12,345.67	Х	5 A Line Coverage	09/08/2024	\$ 12,345.67	
PRODUCTS & COMPLETED OPERATIONS	\$ 12,345.67	\$ 12,345.67	Х	Liability Coverage Personal &	09/08/2024	\$ 12,345.67	
PROFESSIONAL LIABILITY EMPLOYMENT PRACTICES LIABILITY (EPLI)	\$ 12,345.67 RETROACTIVE 09/08/2-DATE:	\$ 12,345.67	Х	Friedlich Coverage	09/08/2024	\$ 12,345.67	
DIRECTORS & OFFICERS	\$ 12,345.6 1 24 RETROACTIVE 09/08/2-	\$ 12,345.67	Х	भिक्षितिका Liability Liability Coverage Employment	09/08/2024	\$ 12,345.67	
TENANTS LEGAL LIABILITY	\$ 12,345.6 0 24	\$ 12,345.67	Х	Pratritices bizarraige	09/08/2024	\$ 12,345.67	
AUTO - HIRED PHYSICAL DAMAGE	\$ 12,345.67	\$ 12,345.67	Х	Practices by thinge rate in the committee of the committe	09/08/2024	\$ 12,345.67	
AUTO - HIRED LIABILITY				Fenantsuneigar Auto -			
BODILY INJURY	\$ 12,345.67	\$ 12,345.67	X	LiarbiditPyhQoicca rlage	09/08/2024	\$ 12,345.67	
PROPERTY DAMAGE	\$ 12,345.67	\$ 12,345.67	Х	Bizarbritatyle@olaeraAgueto -	09/08/2024	\$ 12,345.67	
AUTO - NON-OWNED	\$ 12,345.67	\$ 12,345.67	Х	Etiarleridli tsylvatboʻldreyr alexpedid y	09/08/2024	\$ 12,345.67	
EMPLOYEE BENEFITS LIABILITY	\$ 12,345.67 RETROACTIVE 09/08/2- DATE:	\$ 12,345.67	Х	Fibiran/Niabiber Auto - Labitty Coverage Ricoperuneamage Form Number	09/08/2024	\$ 12,345.67	
EXTENDED EMPLOYEE DISHONESTY	\$ 12,345.6 ⁹²⁴	\$ 12,345.67	Х	EIABIIITVEEONEKESIES	09/08/2024	\$ 12,345.67	
FREIGHT OR PASSENGER ELEVATORS INSPECTION FEE	\$ 12,345.67	\$ 12,345.67	Х	Form: Number Ligibility Coverage Extended Employee.	09/08/2024	\$ 12,345.67	
LIQUOR LIABILITY GENERAL AGGREGATE PER PERSON OTHER: LOREM ipsum	\$ 12,345.67 \$ 12,345.67 \$ 12,345.67	\$ 12,345.67	Х	Form Number age Extended Employee Form Number Freight Dishonesty or Passenger Elevitors Number Liquor	09/08/2024	\$ 12,345.67	
MEDICAL PRIVINENTS IT	\$ 12,345.67	\$ 12,345.67	X	Liability Coverage	09/08/2024	\$ 12,345.67	
MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE LAWS	\$ 12,345.67	\$ 12,345.67	Х	Epimity coverage	09/08/2024	\$ 12,345.67	
GARAGE PHYSICAL DAMAGE adipiscing collision comprehensive/orc	\$ 12,345.67 \$ 12,345.67	\$ 12,345.67 \$ 12,345.67	X	Mordical Unaversidadie Europe Station	09/08/2024 09/08/2024	\$ 12,345.67 \$ 12,345.67	
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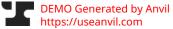
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| LIABILITY ADDITIONAL COVERIAGES - POLICY Lines: (ACORD 2010 / Schedule of Hazards with view be attached if applicable)

LIABILII	T ADDITIONAL C	OVERAGES - POL		(ACURDONIV) SO	neaule of Ha		y be a	nac	ned if applicable)	
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AGENCY CUSTOMER ID: Agency Customer ID Agency LOC LOC #: BLDG #: Agency MARRICA Promises Blanket Rate Y/N **PREMISES BUILDING DESCRIPTION** DESCRIPTION OF ALL OCCUPANCIES AT THIS PREMISES CHECK IF PRIMARY Lorem ipsum dolor sit amet, consectetur adipiscing elit, Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor. sed do eiusmod tempor. SURROUNDING EXPOSURES & OTHER OCCUPANCIES LEFT EXPOSURE REAR EXPOSURE RIGHT EXPOSURE FRONT EXPOSURE **Premises Surrounding** Premises Surrounding Left **Premises Surrounding Premises Surrounding Rear** DISTIGNOE EXPLOSUSE DISTANOE EXPLOSUS DE DIETANOSUME2,345 DIETAROSUTE2,345 ANNUAL SALES / RECEIPTS TOTAL PAYROLL CLASS CODE RATE GROUP PROT CLASS RATE TERRITORY 12.345.67 Premises **Premises** Premise-**Premises Premises** 12.345.67 DISTANCE TO HYDRANT FIRE STAT FIRE DISTRICTICODE NUMBER UIT-FIRE DISTRICT Surround-Surroun-Pre- FT Pr- MI **Premises Surrounding Fire District** Piregnises Sudiognding Fise Distinct Cloude Numberding Class Protection Rate ding Rate PROPERTY ees BLKT LIMITI-BLDG # Sur-Co- \$ sels2,345.67 % COINS VALUATION Cocombercial Number 12,345t67 Cdons PREMIUMORY INFL % DED \$12, 50 50 **Economitey** cial CCondlen-12.345.67 12.34506170 PROPUBLIKT LIMITI-% COINS **RALTIATION** INFL % **Broidolamey**cial 12,345.67 ercoied PREMIUM DFD \$ **୮୮ନିଆ-ଜତ-**| \$ rr12,345.67 \$12. **Beiddintip**cial 50 50 12.345.67 Ecomper-12.345.67 BASEMED BASEMEN BASEMENT COSEMINATION O LCONSTRUCTION TYPE 345.6 stories sprnk YEAR BURGE เราอุทห**าวอุทธิเกิด** poperty Basen เราะหาย shed Color distriction Property **Bympin**er-nd-Commercial Property Co-50 BLDG CODE ASPECTED? (Y/N) IN COMPLICATION OF THE PLANSING GRADE DEVELOPED FOR VIDYO Class Other ROOF TYPE TAX CODE dial-Pr-2024 protoreirojat-ProtoeritivaleuBlding Improvernecossiunamentalessekinutianoperty IMPROVIDUSTRIS Fir- 2024 2024 2024 PROPERTY COVERAGES rcial ale merciercial TOTAL AMOUNTAL Property (including Base Limit) 12,345.67 | Strype | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 | 12,345.67 POL PREM Buriltyp-COVERAGE St-Covera-FORM DATE PREMIUM FORM NUMBER INCI 12,345,67 12,345,67 12,345,67 ACCOUNTS RECEIVABLE 09708/2-Χ Χ Χ Commercial ANIMAL COVERAGE

BAILEES LIABILITY

BUILDERS RISK ONLY 02408/2-Χ Χ Χ **Ecorperey**cial \$ \$ Χ Χ Χ **Progresse** ial 09408/2-024 Rooperative Impr-12,345.67 unt en- ant THEFT OF BLDG MATERIALS 12,345.67 ori Χ Χ Χ **Recreitate**beteal 09/08/2-COLLAPSE DUE TO **345**.67 99408/2-12,345.67_{es} **Compressi**e 12,345,67 Χ Χ 12.345.67 Χ HYDR STATION RESSURE ACTUAL LOSS SUSTAINED NO. OF MONTHS 345.67 024 BUSINESSANCOMEO-Control of the control of the contro Tax BUSINESS INCOME CHANGES TIME PERIOD \$12. 09/08/2-12.3**4**5.**6**₹ BUSINESS INCOME WITHOUT \$ 12,345,67 Χ Χ Χ 345.67 024 12,345.67 5 EXTRAPENSE BUSINESS INCOME FROM \$12. 09/08/2-Χ Χ 12.345.67 12.345.67 12.345.67 Χ DEPENDENT PROPERTIES
BUSINESS INCOME WITH \$45.67 \$12. 09/08/2cial Χ Χ Χ 12,345,67 12,345,67 12.345.67 EXTRADEXIPENSE \$45.67 Cisting Scial COMBINED DEMOLITION COST 09/08/2-Χ Χ 12.345.67 12.345.67 Χ 12.345.67 AND INCREASED CONST COST **345.67** 99908/2-DEBRIS REMOVAL cial Χ Χ 12.345.67 12.345.67 Χ 12.345.67 CONDO UNIT 345.67 024 \$12, 09/08/2-OWNER'S LOSS ASSESSMENT Χ 12,345,67 12,345,67 Χ 12.345.67 Χ OWNER'S MISCELLANEOUS **345**.67 99A08/2-Χ Χ 12,345.67 12,345.67 Χ 12,345.67 REAL PROPERTY 024 345.67 09/08/2-**EMPLOYEE DISHONESTY** Χ Χ 12,345.67 \$12. 12.345.67 Χ 12.345.67 Χ **\$42.67** 09408/2-FORGERY OR ALTERATION Χ \$ 12.345.67 12,345,67 Χ Replaced Applications of the control 12.345.67 09408/2-MONEY & SECURITIES - INSIDE Χ Χ \$ 12,345.67 **\$42.67** 12,345.67 Χ 12,345.67 MONEY & SECURITIES -**345**.67 99A08/2-12.345.67 12.345.67 Χ 12.345.67 Χ Χ OUTSIDE 345.67 \$12. WELFARE & PENSION PLAN 09/08/2-Χ Χ \$ 12,345,67 N/A Χ 12.345.67 024 345.67 TERR: Commercial 12,345.67 EARTHQUAKE Χ Χ RETROFIPING Der Com-\$12. Χ 09/08/2-12,345.67 50 MASONRY (VENJEHRAIDE) 16 345.67 024 EDP / COMPUTER Earthq**iæ**lke **EQUIPMENT** Χ Χ 12,**34**5r@Prop-\$12, 12,345,67 Χ 09/08/2-12.345.67 Compression Clar **EXTRA EXPENSE** Χ Χ 12,345.67 erty **\$42.67** 12,345.67 Χ 09408/2-\$ 12.345.67 09408/ **\$42.67** DATA / MEDIA Χ X 12.345.67 Cove-12.345.67 Χ \$ 345.67 **EQUIPMENT BREAKDOWN Робрени**е 2024 rage 09/08/2-**ED Griphmatera** ital BASIC 12,345.67 Eart-\$12, 12,345.67 12,345.67 Χ Χ Χ Χ Χ \$42,67 Χ **Elophanenstey** cial 09408/2-BROAD \$ 12.345.67 hqua-12,345.67 12,345.67

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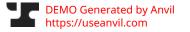
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AGENCY CUSTOMER ID: Agency Customer ID

LOC #: Agency LOC BLDG #: Agency

PROPE	RTY COVERAGES	_		T *						Number			Building
COVERAG	Ε		PREM LEVEL	(includi	AL AMOUNT ng Base Limit)	VALUATION		DEDUCTIBLE	INCL	FORM NUMBER	FORM DATE	1	Jurenoven
	PENOE			X ACTUAL NO. OF	LOSS SUSTAINED MONTHS 12.								
EXTRA EX	PENSE	Χ	Х		45.67 ₃₄ -	\$12,	\$	12,345.67	Χ	Commercial	09/08/2-	\$ 1	2,345.67
FINE ARTS	3	Χ	Х		45.67 5	\$42 ,67	\$	12,345.67	Χ	Ecorperey cial	09408/2-		2,345.67
FLOATER				,	<u> </u>	345.67		,		Provee a tye	024		,
CONTR	ACTOR'S EQUIPMENT	Х	X	\$ 12,3	45.67	\$12,	\$	12,345.67	X	Exoturerraerecial	09/08/2-	\$ 1	2,345.67
INSTAL	LATION	Х	Х		45.67	\$42 ,67	\$	12,345.67	Х	Eioppenânstes cial	094 08/2-		2,345.67
LEASED	/ RENTED EQUIPMENT	X	X		45.67	\$42 ,67	\$	12,345.67	Х	Commenty eial	094 08/2-		2,345.67
FLOOD				/ 5		345.67		,0 .0,0		Blowniento ge	024		
BUILDIN	NG	X	Х	\$ 12.3	45.67	\$12,	\$	12,345.67	X	Elozaterrane tro iral	09/08/2-	\$ 1	2,345.67
CONTE		X	X		45.67	\$42 ,67	\$	12,345.67	X	Elepajahlatty oita l	02408/2-		2,345.67
FUNGI / B	ACTERIA / MOLD	X	X		45.67	\$42 ,67	\$	12,345.67	X	Commedeye ial	02/08/2-		2,345.67
HAIL EXCL		N/A	X	12,5	N/A	345/67	Ė	N/A	X	Elementarity eial	02/08/2-		2,345.67
				\$ 123	45.67 LIMIT	3 19.07				Bloidale	024	,	2,545.07
MINE SUB	SIDENCE	X	X	CONST MA		\$12,	\$	12,345.67	X	Eomeiral	09/08/2-	\$ 1	2,345.67
WIII 4E 00B	OIDENOE	_ ^	_ ^	PROP DESC	_	345.67	"	12,343.07	^	Rizini bety	024		2,343.07
NEW V	CQUIRED PROPERTY			T KOI BEO	erciærici-	343.07				Showhellstage	024		
BUILDIN				¢ 122		\$12,	•	12 245 67	_	Etime mercial	09/08/2-	. 1	2 245 67
		X	X		45. 67 Proplert-	\$42,67	\$	12,345.67	X		09/08/2-		2,345.67
PERSO		X	Х	\$ 12,3	45.6/7 Pro-		\$	12,345.67	Х	Slodge ikokey cci e l		\$ 1	2,345.67
ORDINAN	JE				Covperet-	345.67				Compretty e	024		
BUILDIN	ıG	Х	X		45.607e y AGG	\$12,	\$	12,345.67	Х	Commercial	09/08/2-	\$ 1	2,345.67
	NCE OR LAW			\$ 12,	Mireased	345.67		,-		groperty,	024		,-
					67 Surteeniale					New Alzerre Commercial Alegylyred Proplemen Acopemen Coverage			
	NG ORDINANCE LITION COST	Χ	X	\$ 12,3	45.69nage	\$12,	\$	12,345.67	Χ	cial	09/08/2-	\$ 1	2,345.67
	NG ORDINANCE			. 122	Prolodeinte	345.67 \$12,	\$	12 245 67	V	POFOMOSI	89/08/2-	\$ 1	2 245 67
INCREA	SED CONST COST	X	Х		45.67 Sub-		ā	12,345.67	Х	Commission Chal			2,345.67
OUTDOOF	RPROPERTY	Х	X	\$ 12,3	45.6D7essidip-	\$4 5;67	\$	12,345.67	Χ	cial	99/ 08/2-	\$ 1	2,345.67
PEAK SEA	SON				tiomce	345.67				Brongalice	024		
REGUL	AR	X	X		45.67 Con-	\$12,	\$	12,345.67	Χ	Belyennessial	09/08/2-		2,345.67
ADDITIO	DNAL	Χ	X	\$ 12,3	45.67 stru-	\$42 ,67	\$	12,345.67	Χ	Philipping	024 08/2-	\$ 1	2,345.67
	Y BPP-IMPROVEMENTS MENTS / RC / ACV	X	Х	\$ 12,3	45.67 ction	34 5,67	\$	12,345.67	Х	Pingale Bullingsial Pingale Bullingsial Bullingsial Bullingsial	99 / 08/2-	\$ 1	2,345.67
SIGN	WEITTO/NO/AOV	X	Х		45.67 Mat-	\$4 5;67	\$	12,345.67	Х	organe Gial	99/ 08/2-		2,345.67
TERRORIS				+ 12,3	erial	345.67	Ť	12,343.07		BEWS BUSINE	024	,	2,343.07
DOMES		_			N/A Cod-	N/A		N/A	X	Profese e la	09/08/2-	\$ 1	2 245 67
FOREIG		X	X	X ACCE		N/A		N/A	X		09/08/2-	_	2,345.67
TRANSIT	JIN .					\$12,	•		X	Refined Cial	02408/2-		2,345.67
	- DADEDO			\$ 12,3			\$	12,345.67		in Section in the interest of			
	PAPERS	X	X	\$ 12,3	45.67	\$42, 67	\$	12,345.67	X		09408/2-	_	2,345.67
WIND EXC		X	X		N/A	345.67		N/A	Χ	Pemperaty eial	02408/2-	\$ 1	2,345.67
PROPE	RTY COVERAGES		EMIS			T			<u> </u>	Posteritye	024		1
	LOCATION IN BUILDING			# PLATES	AREA SQ FT	LENGTH LIN	IEAR		IN	TERMANTS EXT	VALUE		DED
GLASS	GROUND FLOOR GLASS			12,345	Property	12,345		Prop-		XPAtiumelbeer X	\$ 12,345		\$ 12,
	ABOVE GROUND FLOO	R GLAS	S	12,345	Econge eating	Proper	ľV	erbyp-		XEøch asionX	\$ 12,345	.67	\$ 32 5.67

TIVOLE	INTI OCYLINACEO - I INLINI	OLO LLVL	-			200	02 1	
	LOCATION IN BUILDING	# PLATES	AREA SQ FT	LENGTH LINEAR FT	GLASS TYPE	INTERNANTS EXT	VALUE	DED
GLASS	GROUND FLOOR GLASS	12,345	Property	12,345	Prop-	X Maiqmellos er X	\$ 12,345.67	\$ 12,
	ABOVE GROUND FLOOR GLASS	12 3/15	Proveestre	Property	Prhn-	XF ∞rh nsionX	\$ 123/1567	s 325 67

PROPER	TY ADDITIONAL	COV	ERAG	ES	Scalenia &	Coverage	Extyer-	Nourm ber		345.67
	COVERAGE	POL	BLKT	PREM	TO PARAMPIANTS	Premises	ao ver-	Number FORM NUMBER		
CODE	DESCRIPTION	LEVEL	#	LEVEL	(including Base Limit)	VALUATION	DEDUCTIBLE	INC FORM NUMBER	FORM DATE	PREMIUM
Prop-	Property	Χ	Pr-	Χ	\$ 12,345.67	\$12 Glas.	\$ 12,345,67	X Property	09/08/2-	\$ 12,345.67
erty p-	Actobité otry al	Χ	₿р-	Χ	\$ 12,345,67	\$42 ,67	\$ 12,345.67	X Accopite otry al	024 08/2-	\$ 12,345.67
Actopi ti-	Edwinier	Χ	8pt-	Χ	\$ 12,345,67	342,67	\$ 12,345.67	X Roby interiorgal	094 08/2-	\$ 12,345.67
Actapli ti-	Adhierio gal	Χ	p pt-	Χ	\$ 12,345.67	\$42,67	\$ 12,345.67	X Robbitio tgal	094 08/2-	\$ 12,345.67
Exclaplish i-	Adhiera	Χ	p pt	Χ	\$ 12,345,67	\$42.67	\$ 12,345,67	X Rominition Al	094 08/2-	\$ 12,345.67
Aglejist i-	Bidbajetriptyja dn	Χ	Bit-	Χ	s Property	\$42,67	\$ 12,345.67	X Rominition 2	094 08/2-	\$ 12,345.67
Adlelit i-	Bella étérptyé d n	Χ	Bit-	Χ	s Addatogal	\$42, 67	\$ 12,345.67	X Robbitory &	094 08/2-	\$ 12,345.67
Adlaliti i-	Bella étérptyie d n	Χ	Bittle	Χ	\$ Cayanage	\$42, 67	\$ 12,345.67	X Rominitions 1	094 08/2-	\$ 12,345.67
Agligit iri-	Bella étérptyé d n	Χ	脚	Χ	\$ 12 ; 3 45.67	\$42, 67	\$ 12,345.67	X Bolyatian X	094 08/2-	\$ 12,345.67
Adlalis i-	Delse etripty a d n	Χ	脚曲	Χ	\$ A2 7345168	\$42, 67	\$ 12,345.67	X Bolyatianya	094 08/2-	\$ 12,345.67
Adlalis i-	Della etripty adn	Χ	脚	Χ	\$ 12,345.67	\$42, 67	\$ 12,345.67	X Boly in the style of the styl	094 08/2-	\$ 12,345.67
Bolloplist i-	Delo etripty adn	Χ	鰰	Χ	\$ 12,345.67	\$42 ,67	\$ 12,345.67	X Romitions	024 08/2-	\$ 12,345.67
Byllylitt i-	Bidisletriptyis dn	Χ	對	Χ	\$ 12,345.67	\$42, 67	\$ 12,345.67	X Romitians	024 08/2-	\$ 12,345.67

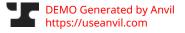
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34 **P**aige 4 of 6

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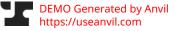
Ellownenbægre **Roumm**ber



AGENCY CUSTOMER ID: Agency Customer ID

LOC #: Agency LOC BLDG #: Agency

REMISES GENERAL INFO	RMATION		LOC #		Buile	lina
XPLAIN ALL "YES" RESPONSES UNI				Number	Bunc	HIIG Y/N
DOES APPLICANT HAVE A F	HEATING OR PROCESSING BOI	LER?		Premises Ge	neral Info A	i ber pplicant
	CURRENT CARRIER FOR BOILER & N			T Termises de	riciai imo 7	
			overage.			
09/08/2024	Current Carrier For Bo			DECORIDE Durantin	- C I T	C :
ANY SPECIALIZED EQUIPMI	ENT, SUCH AS MEDICAL EQUIP	MENT OR OTHER, VALUED OV	'ER \$100,000? IF "YES"	, DESCRIBE. Premise	s General Ir	ito Equi
Premises General I	info Equipment Over \$	5100000				
IS ALL EQUIPMENT INSPEC	TED ANNUALLY AND WELL MAI	NTAINED? (No explanation nee	ded)	Premises	General Inf	o Equip
IS THERE A SWIMMING POO	DL ON PREMISES? (Check all th	at apply)		Pre	emises Gene	ral Info
X APPROVED FENCE X	LIMITED ACCESS X DIVING	BOARD X SLIDE X ABC	VE GROUND X IN GR	OUND X LIFE GUARD		
IS THE BUILDING UNDER CO		, A	7.	7.7	General Info	n Buildir
IS THE BUILDING UNDER CO				110111000	Cerrer ar Irin	o Ballan
Premises General I	Info Building Under Co	onstruction				
PARTMENTS AND COND	OMINIUMS					
PLAIN ALL "YES" RESPONSES UN	LESS STATED OTHERWISE					Y/N
IS THERE A PLAYGROUND	ON PREMISES?			Apartments	and Condor	niniѱms
Anartments and Co	ondominiums Playgro	und on Pramises				
Apartificitis and Co						
IS ALUMINUM WIRE USED?				Apartmo	ents and Co	ndomini
INSTALLATION DATE [DESCRIPTION					
09/08/2024	Lorem ipsum dolor si	t amet, consectetur ac	dipiscing elit, sec	l do eiusmod temp	or.	
IS DEVELOPER OR CONTRA	ACTOR A BOARD MEMBER? (N	o explanation needed)		Apartments a	and Condom	iniums
IC A DRODERTY MANAGER	EMPLOVED2 (No explanation no	and and \		•		
15 A PROPERTY MANAGER	EMPLOYED? (No explanation ne	edea)		Apartments ar		
VERAGE APPLIES TO	SMOKE DETECT	ORS:	# OF FIRE DIVISIONS	# UNITS PER FIRE DIVISION	# UNITS OWNER	OCCUPIED
BARE WALLS FINISH	HED WALLS X NONE	BATTERY WIRED	12,345	Apartments	12,345	
RIME				and		
ARM TYPE ALARM DESCRI		EXTENT OF PROTECTION		CLEMANUFACTIORER'S MAME		LABEL
HOLD-UP X LOCAL GO	NG GRADE S	AFE / VAULT PREMISES ALARM	Crime Safe/Vau	ult /Uneite:phencFeirk nan	ufacturer's	X UL
PREMISES CNTRL STA	AT W/ KEYS	PARTIAL 1 2 3	Name	Division		X SMNA
SAFE / VAULT CNTRL STA	AT W/O KEYS Crime	COMPLETE Y				CLASS
Crime POLICE CO	ONNECT Grade CERT #: Crime	EXP 09/08/2024				Crim-
	XXIMUM CASH H MESSENGER PREMISES		Y DEADBOLT	SAFE DOOR CONSTR	LICTION	e
		OF DEPOSIT		Sylinde C Door Safek		۔ محطامہ د
	,345.67 \s 1\text{10},345			Lylinder Dioger Statekt	SOM CONSTR	ncmon22
HERPROTECTION (Lighting, fence		- 1 7	Of			
Descri- Crime Other Descripti ption	on	Deposits				
•						
MARKS (ACORD 101, A	dditional Remarks Schedu	le, may be attached if mo	re space is required	l)		
orem ipsum dolor sit	t amet, consectetur ad	ipiscina elit, sed do ei	usmod tempor.			



SIGNATURE AGENCY CUSTOMER ID: Agency Customer ID

Applicable in AL, AR, DC, LA, MD, NM, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties* (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Robin W. Smith		STATE PRODUCER LICENSE NO (Required in Florida) State Producer
APPLICANT'S SIGNATURE		DATE	NATIONAL PRODUCER NUMBER
			National

ACORD 160 (2016/09) Page 6 of 6 Producer Number