

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL STATEMENT OF VALUES

Policy Number: **ACP BPHL 3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

The values shown on this Statement of Values reflect the values you have requested or agreed to for each individual item that was included in the Blanket Limit of Insurance shown in the Declarations of your policy.

By your acceptance of this policy in the payment of the premium due, you are acknowledging that the values shown below are correct to the best of your knowledge and belief.

### BLANKET BUILDINGS

Loc. Bldg.	Description/Coverage Type	Value	Valuation of Property
01 01	BUILDING	525,000	Replacement cost
01 02	BUILDING	337,100	Replacement cost
01 03	BUILDING	535,500	Replacement cost
01 04	BUILDING	535,500	Replacement cost
01 05	BUILDING	258,300	Replacement cost

# PREMIER BUSINESSOWNERS POLICY

## STATEMENT OF VALUES

Policy Number:

From

Policy Period:

To

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Loc. Bldg.

Description/Coverage Type

Value

Valuation of Property

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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL COMMON DECLARATIONS

Policy Number: ACP BPHL 3019178789  
 Named Insured: CALLAN PARK TOWNHOMES OWNERS ASSOCIATION  
 Mailing Address: PO BOX 1149  
 APEX, NC 27502-3149  
 Agency: CAROLINA INSURANCE GROUP  
 Address: GARNER NC 27529-5800  
 Agency Phone Number: (919)234-7868

Policy Period: Effective From 02-07-20 To 02-07-21  
 12:01 AM Standard Time at your principal place of business.

Form of your business entity: ASSOCIATION

Description of your business: RESIDENTIAL CONDO OWNERS ASSC

IN RETURN FOR THE PAYMENT OF THE PREMIUM AND SUBJECT TO ALL THE TERMS OF THIS POLICY,  
 WE AGREE TO PROVIDE THE INSURANCE STATED IN THIS POLICY.

**CONTINUATION PROVISION:** If we offer to continue your coverage and you or your representative do not accept, this policy will automatically terminate on the expiration date of the current policy period stated above. Failure to pay the required premium when due shall mean that you have not accepted our offer to continue your coverage. This policy will terminate sooner if any portion of the current policy period premium is not paid when due.

**RENEWAL POLICY NOTICE:** In an effort to keep insurance premiums as low as possible, we have streamlined your renewal policy by not including printed copies of policy forms or endorsements that have not changed from your expiring policies, unless they include variable information that is unique to you. Refer to your prior policies for printed copies of these forms. If you have a need for any form, they are available by request from your agent.

**FLOOD INSURANCE:** The North Carolina Department of Insurance requires us to advise you that your Policy does NOT provide flood coverage. You will not have coverage for property damage from floods unless you take steps to purchase a separate policy of flood insurance. If you would like information about obtaining flood insurance, please contact your agent shown on your Policy Declarations or this company at 1-866-322-3214

**TOTAL POLICY PREMIUM \$ 7,107.00**

Previous Policy Number	STATUS	I	TOTAL AGENT COMMISSION	\$ 1,066.05
ACP BPHL 3009178789	ENTRY DATE	11-25-19	Countersignature	Date

These Common Policy Declarations, together with the Common Policy Conditions, Coverage Form Declarations, Coverage Forms and any endorsements issued to form a part thereof, complete the Policy numbered above.

# PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL

## SCHEDULE OF NAMED INSUREDS

Policy Number: ACP BPHL 3019178789

From 02-07-20

Policy Period:  
To 02-07-21

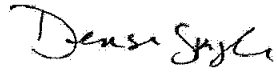
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Named Insured:


CALLAN PARK TOWNHOMES OWNERS ASSOCIATION

**ALLIED INSURANCE COMPANY OF AMERICA**

**IN WITNESS WHEREOF**, the Company has caused this policy to be signed by its president and secretary and countersigned as may be required on the declarations page by a duly authorized representative of the company.



SECRETARY



PRESIDENT

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPHL3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Description of Premises Number: **001** Building Number: **001** Construction: **FRAME**  
Premises Address **121 CALLAN PARK LN** **CARY** **NC** **27511-3476**  
Premises ID  
Occupancy **OO** Classification: **TOWNHOUSE ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT  
A PREMISES WITH 5 OR MORE UNITS - 1-4 FAMILY BUILDINGS**  
Described as: **121 TO 129 CALLAN PARK LN**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 1,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanket Limit - Replacement cost		<b>\$2,191,400</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building		<b>1%</b>
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
Increased Cost of Construction		<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty		<b>NOT PROVIDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>NOT PROVIDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>NOT PROVIDED</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>

### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL

### MORTGAGEE ASSIGNMENT INFORMATION

Policy Period:

Policy Number: **ACP BPHL3019178789**

From **02-07-20** To **02-07-21**

Additional Interest:  
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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPHL3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Description of Premises Number: **001** Building Number: **002** Construction: **FRAME**  
Premises Address **130 CALLAN PARK LN** **CARY** **NC** **27511-3476**  
Premises ID  
Occupancy **OO** Classification: **TOWNHOUSE ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT  
A PREMISES WITH 5 OR MORE UNITS - 1-4 FAMILY BUILDINGS**  
Described as: **130 TO 134 CALLAN PARK LN**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 1,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		<b>INCLUDED</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building		<b>1%</b>
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
Increased Cost of Construction		<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty		<b>NOT PROVIDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>NOT PROVIDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>NOT PROVIDED</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>

### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**



# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL

### MORTGAGEE ASSIGNMENT INFORMATION

Policy Period:

Policy Number: **ACP BPHL3019178789**

From **02-07-20** To **02-07-21**

Additional Interest:  
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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPHL3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Description of Premises Number: **001** Building Number: **003** Construction: **FRAME**  
Premises Address **140 CALLAN PARK LN** **CARY** **NC** **27511-3476**  
Premises ID  
Occupancy **OO** Classification: **TOWNHOUSE ASSOCIATION - RESIDENTIAL - SINGLE BUILDING AT A  
PREMISES WITH 5 OR MORE UNITS**  
Described as: **140 TO 148 CALLAN PARK LN**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 1,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		<b>INCLUDED</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building		<b>1%</b>
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
Increased Cost of Construction		<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty		<b>NOT PROVIDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>NOT PROVIDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>NOT PROVIDED</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>

### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL

### MORTGAGEE ASSIGNMENT INFORMATION

Policy Period:

Policy Number: **ACP BPHL3019178789**

From **02-07-20** To **02-07-21**

Additional Interest:  
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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPHL3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Description of Premises Number: **001** Building Number: **004** Construction: **FRAME**  
 Premises Address **141 CALLAN PARK LN** **CARY NC** **27511-3476**  
 Premises ID  
 Occupancy **OO** Classification: **TOWNHOUSE ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT  
 A PREMISES WITH 5 OR MORE UNITS - 1-4 FAMILY BUILDINGS**  
 Described as: **141 TO 149 CALLAN PARK LN**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 1,000** Deductible, unless otherwise stated.

<b>COVERAGES</b>	<b>LIMITS OF INSURANCE</b>	
Building - Blanketed - Replacement cost		<b>INCLUDED</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building		<b>1%</b>
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
Increased Cost of Construction		<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty		<b>NOT PROVIDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>NOT PROVIDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>NOT PROVIDED</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>

### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL

### MORTGAGEE ASSIGNMENT INFORMATION

Policy Period:

Policy Number: **ACP BPHL3019178789**

From **02-07-20** To **02-07-21**

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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPHL3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Description of Premises Number: **001**    Building Number: **005**    Construction: **FRAME**  
 Premises Address **218 WALDO ST**    **CARY**    **NC**    **27511-3419**  
 Premises ID  
 Occupancy **OO**    Classification: **TOWNHOUSE ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT  
 A PREMISES WITH 5 OR MORE UNITS - 1-4 FAMILY BUILDINGS**  
 Described as: **218 TO 220 WALDO ST**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 1,000** Deductible, unless otherwise stated.

<b>COVERAGES</b>	<b>LIMITS OF INSURANCE</b>
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>1%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>
Increased Cost of Construction	<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>	
	<b>Included Limit      Additional Limit</b>
Account Receivable	\$25,000 <b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000 <b>\$25,000</b>
Forgery and Alteration	\$10,000 <b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000 <b>\$10,000</b>
Outside the Premises (Limited)	\$10,000 <b>\$10,000</b>
Outdoor Signs	\$2,500 <b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000 <b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000 <b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000 <b>\$15,000</b>
Electronic Data	\$10,000 <b>\$10,000</b>
Interruption of Computer Operations	\$10,000 <b>\$10,000</b>
Building Property of Others	\$10,000 <b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>	
Employee Dishonesty	<b>NOT PROVIDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>NOT PROVIDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>NOT PROVIDED</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>

### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL

### MORTGAGEE ASSIGNMENT INFORMATION

Policy Period:

Policy Number: **ACP BPHL3019178789**

From **02-07-20** To **02-07-21**

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# PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL

## LIABILITY DECLARATIONS

Policy Number: **ACP BPHL 3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

### LIMITS OF INSURANCE

Each Occurrence Limit of Insurance	Per Occurrence	<b>\$1,000,000</b>
Medical Payments Coverage Sub Limit	Per Person	<b>\$5,000</b>
Tenants Property Damage Legal Liability Sub Limit	Per Covered Loss	<b>\$300,000</b>
Personal and Advertising Injury	Per Person Or Organization	<b>\$1,000,000</b>
Products – Completed Operations Aggregate	All Occurrences	<b>\$2,000,000</b>
General Aggregate (Other than Products – Completed Operations)	All Occurrences	<b>\$2,000,000</b>

### AUTOMATIC ADDITIONAL INSUREDS STATUS

The following persons or organizations are automatically insureds when you and they have agreed in a written contract or agreement that such person or organization be added as an additional insured on your policy.

Co-Owners of Insured Premises  
Controlling Interest  
Grantor of Franchise or License  
Lessors of Leased Equipment  
Managers or Lessors of Leased Premises  
Mortgagee, Assignee or Receiver  
Owners or Other Interest from Whom Land has been Leased  
State or Political Subdivisions - Permits Relating to Premises

### PROPERTY DAMAGE DEDUCTIBLE

NONE

### OPTIONAL COVERAGES

Hired Auto Liability Coverage	<b>Included in Each Occurrence Limit of Insurance</b>
Nonowned Auto Liability Coverage	<b>Included in Each Occurrence Limit of Insurance</b>
Directors & Officers with Non-Monetary Relief	<b>Per Occurrence \$1,000,000</b>
Directors & Officers Liab-Retro Date 02/07/19	<b>Aggregate \$1,000,000</b>



# PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL

## FORMS AND ENDORSEMENTS SUMMARY

Policy Period:

Policy Number: ACP BPHL 3019178789

From 02-07-20 To 02-07-21

FORM NUMBER	TITLE
LI0021	0101 NUCLEAR ENERGY LIABILITY EXCLUSION
PB0002	1114 PREMIER BUSINESSOWNERS
PB0006	1114 PREMIER BUSINESSOWNERS LIABILITY COVERAGE FORM
PB0009	1114 PREMIER BUSINESSOWNERS COMMON POLICY CONDITIONS
PB0404	0101 HIRED AUTO AND NON-OWNED AUTO LIABILITY
PB0412	0101 LIMITATION OF COVERAGE TO DESIGNATED PREMISES
PB0523	0715 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
PB1504	1114 ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION
PB1701	1114 CONDOMINIUM ASSOCIATION COVERAGE
PB2998	0908 EXCLUSION - VIOLATION OF CONSUMER PROTEC
PB2999	0215 EXCLUSION - FUNGI OR BACTERIA
PB4151	0515 D&O LIABILITY (COOPERATIVES OR CONDOMINIUMS) WITH NON-MONETA
PB9032	1114 NORTH CAROLINA AMENDATORY ENDORSEMENT

### IMPORTANT NOTICES

IN7395	0107 NC - NOTICE OF EXCLUSION-FLOOD, EARTHQUAKE, MUDSLIDE, MUDFLO
IN7809	1115 DATA BREACH & IDENTITY RECOVERY SERVICES

# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL AGENT PREMIUM SUMMARY

Policy Number: **ACP BPHL 3019178789**

Policy Period:  
From **02-07-20** To **02-07-21**

Loc /Bldg	Coverage	Limits	Premium
	<b>POLICY WIDE OPTIONAL COVERAGES</b>		
	BLANKET BUILDING	<b>2,191,400</b>	<b>6,107</b>
	DIRECTORS & OFFICERS WITH NON-MONETARY RELIEF	<b>1,000,000</b>	<b>180</b>
	HIRED AUTO	<b>INCLUDED</b>	<b>44</b>
	NONOWNED AUTO	<b>INCLUDED</b>	<b>44</b>
01 01	BUILDING	<b>525,000</b>	
	EQUIPMENT BREAKDOWN	<b>INCLUDED</b>	<b>41</b>
	LIABILITY	<b>1,000,000</b>	<b>137</b>
	<b>BUILDING TOTAL PREMIUM</b>		<b>178</b>
01 02	BUILDING	<b>337,100</b>	
	EQUIPMENT BREAKDOWN	<b>INCLUDED</b>	<b>23</b>
	LIABILITY	<b>1,000,000</b>	<b>92</b>
	<b>BUILDING TOTAL PREMIUM</b>		<b>115</b>
01 03	BUILDING	<b>535,500</b>	
	EQUIPMENT BREAKDOWN	<b>INCLUDED</b>	<b>41</b>
	LIABILITY	<b>1,000,000</b>	<b>181</b>
	<b>BUILDING TOTAL PREMIUM</b>		<b>222</b>
01 04	BUILDING	<b>535,500</b>	
	EQUIPMENT BREAKDOWN	<b>INCLUDED</b>	<b>41</b>
	LIABILITY	<b>1,000,000</b>	<b>92</b>
	<b>BUILDING TOTAL PREMIUM</b>		<b>133</b>
01 05	BUILDING	<b>258,300</b>	
	EQUIPMENT BREAKDOWN	<b>INCLUDED</b>	<b>23</b>
	LIABILITY	<b>1,000,000</b>	<b>61</b>
	<b>BUILDING TOTAL PREMIUM</b>		<b>84</b>

If an \* is shown for a coverage, then the limit shown is the additional amount of insurance for that coverage - see the Declarations page for the total amount.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ACKNOWLEDGEMENT OF INSURED STATUS YOUR REAL ESTATE MANAGER**

**Person or Organization Designated as an Insured:**

**GRANDCHESTER MEADOWS INC.**

**P O BOX 1149  
APEX NC 275023149**

This form has been sent to you to acknowledge your status as an insured under our, meaning the issuing Company stated below, insurance policy issued to the Named Insured shown below.

Under our Premier Businessowners Liability Coverage Form, Section II. WHO IS AN INSURED provides:

The following is also an insured:

Any person (other than your "employee"), or any organization while acting as your real estate manager.

The policy language set forth above is subject to all of the terms and conditions of the policy issued to the Named Insured shown below. For your information, our Named Insured, the Policy Number, Policy Term and Limits of Insurance are stated below.

Named Insured           **CALLAN PARK TOWNHOMES OWNERS ASSOCIATION**

Issuing Company:   **AICOA**  
Policy Number:     **ACP BPHL3019178789**  
Policy Term:       **02-07-20 To 02-07-21**  
Limits of Insurance: **Per Occurrence           \$1,000,000**  
                          **All Occurrences         \$2,000,000**

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Policy Number:     **ACP BPHL3019178789**  
Policy Term:       **02-07-20 To 02-07-21**  
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                          **All Occurrences         \$2,000,000**