#### IMPORTANT INSURANCE INFORMATION \*\*\*\*\*

\*\*\*\*

Please read this Notice carefully. No coverage is provided by this notice nor can it be construed to replace any provision of your policy. You should read your policy and review your declarations page for complete information on the coverages you are provided. If there is any conflict between the policy and this notice, the provisions of the policy shall prevail.

# NORTH CAROLINA - NOTICE OF EXCLUSION - FLOOD, EARTHQUAKE, MUDSLIDE, MUDFLOW, AND LANDSLIDE

WARNING: THIS PROPERTY INSURANCE POLICY DOES NOT PROTECT YOU AGAINST LOSSES FROM FLOODS, EARTHQUAKES, MUDSLIDES, MUDFLOWS, OR LANDSLIDES. YOU SHOULD CONTACT YOUR INSURANCE COMPANY OR AGENT TO DISCUSS YOUR OPTIONS FOR OBTAINING COVERAGE FOR THESE LOSSES. THIS IS NOT A COMPLETE LISTING OF ALL OF THE CAUSES OF LOSSES NOT COVERED UNDER YOUR POLICY. YOU SHOULD READ YOUR ENTIRE POLICY TO UNDERSTAND WHAT IS COVERED AND WHAT IS NOT COVERED.

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#### IMPORTANT INSURANCE INFORMATION

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Please read this Notice carefully. No coverage is provided by this notice nor can it be construed to replace any provision of your policy. You should read your policy and review your declarations page for complete information on the coverages you are provided. If there is any conflict between the policy and this notice, the provisions of the policy shall prevail.

## **DATA BREACH & IDENTITY RECOVERY SERVICES**

#### **Data Breach Services Information:**

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Through a partnership with Hartford Steam Boiler, you have access to a data breach risk management portal called the eRiskHub®. The portal is designed to help you understand data information exposures, help you plan and be prepared for a data breach, and establish a response plan to manage the costs and minimize the effects of a data breach.

#### Key features of the portal include:

- Incident Response Plan Roadmap suggested steps your business can take following data breach incident. Having an incident response plan prepared in advance of a breach can be useful for defense of potential litigation.
- Online Training Modules ready-to-use training for your business on privacy best practices and Red Flag Rules.
- Risk Management Tools- assist your business in managing data breach exposures including self-assessments and state breach notification laws.
- eRisk Resources a directory to quickly find external resources on pre and post-breach disciplines.
- News Center cyber risk stories, security and compliance blogs, security news, risk management events, and helpful industry links.
- Learning Center best practices and white papers written by leading authorities.

### To access the eRiskHub®portal:

- Enter <a href="https://www.eriskhub.com/nationwide">https://www.eriskhub.com/nationwide</a> in your browser.
- Complete the information, including your name and company. Your User ID and Password are case-sensitive.
- Enter your assigned access code: **12116-73**.
- Enter the challenge word on the screen, and click "Submit" and follow the instructions to complete your profile setup.
- You can now login to the portal.

You also have access to a help-line to answer breach related questions. Insureds having questions pertaining to how to prepare for a breach, help in identifying a breach, or other questions pertaining to breach related best practices can call our breach preparedness help-line. Experienced professionals are able to provide insights to help insureds understand the complicated environment pertaining to breaches of personal information. The breach preparedness help-line is 877-800-5028.

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In addition, you have the ability to purchase Data Compromise Insurance coverage and CyberOne Insurance coverage.

The Data Compromise coverage covers the costs incurred by an insured to respond to a data breach, including expenses related to forensic information technology review, legal review, notification to affected individuals, services to affected individuals, public relations services. Insureds will also have the ability to include Data Compromise Defense and Liability coverage which covers the liability from a suit brought by an individual affected by the data breach.

CyberOne coverage protects businesses against damage to electronic data and computer systems from a virus or other computer attack. It also protects a business's liability to third parties that may have suffered damage due to security weaknesses in the business's computer system.

#### **Identity Recovery Services Information:**

Through a partnership Hartford Steam Boiler, you will have access to a Toll-Free Identity Recovery Help Line designed to provide education about identity theft and identity theft risks. The toll-free Help Line is staffed by experienced identity theft counsellors who can answer questions and provide useful information and resources to identity theft victims. The Identity Recovery Help Line number is 877-800-5028.

In addition, you have the ability to buy Identity Recovery insurance coverage as an included element of Data Compromise coverage or separately, on its own. The Identity Recovery coverage insures against the theft of identities of the insured's key owners, officers, and resident family members. The coverage provides the services of an identity theft case manager and pays for various out-of-pocket expenses due to a covered identity theft, including:

- Legal fees for answer of civil judgments and defense of criminal charges
- Phone, postage, shipping fees
- · Notary and filing fees
- Credit bureau reports
- Lost Wages and Child or Elder Care
- Mental Health Counseling costs (Not Available in NY)
- Miscellaneous Expense coverage

ALLIED INSURANCE CO OF AMERICA 1100 LOCUST ST DEPT 1100 DES MOINES, IA 50391-2000 32 56400 RENEWAL

## PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL
COMMON DECLARATIONS

Policy Number: ACP BPHL 3038802933

Named Insured: FLEMING FIELDS SUBDIVISION HOMEOWNERS 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 06-03-21 To 06-03-22

12:01 AM Standard Time at your principal place of business.

Form of your business entity: ASSOCIATION

Description of your business: RESIDENTIAL HOA

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 \$ 1,858.00

Previous Policy Number					
ACP BPHL	3028802933	ENTRY DATE	03-17-21	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.

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PREMIER HABITATIONAL

SCHEDULE OF NAMED INSUREDS

Policy Period:

From 06-03-21 To 06-03-22

Named Insured:

Policy Number: ACP

FLEMING FIELDS SUBDIVISION HOMEOWNERS ASSOCIATION

BPHL 3038802933

PB 81 00 (01-01) Page 2 of 2

#### **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

ACP BPHL3038802933

Densi Syli

**PRESIDENT** 

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PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Period: Policy Number: ACP BPHL3038802933 From **06-03-21** To **06-03-22** 

Description of Premises Number: 001 Building Number: 001 Construction: JOISTED MASONRY

Premises Address 505 GOAL KICK DR **FUQUAY VARINA** NC 27526-5890

Premises ID

Occupancy **00** Classification: HOMEOWNERS ASSOCIATIONS

Described as: HOMEOWNERS ASSOCIATIONS (12777)

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.

LIMITS OF INSURANCE **COVERAGES** 

Building - Replacement cost

\$57,600 NOT PROVIDED Business Personal Property -

ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.

Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit **INCLUDED** Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NOHour Waiting Period INCLUDED Equipment Breakdown INCLUDED

Automatic Increase in Insurance - Building

NOT PROVIDED Automatic Increase in Insurance - Business Personal Property

Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)

\$5,000 Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure INCLUDED Increased Cost of Construction \$25,000

**Included Limit OPTIONAL INCREASED LIMITS Additional Limit** Account Receivable \$25,000 \$25,000 Valuable Papers and Records (At the Described Premises) \$25,000 \$25,000 Forgery and Alteration \$10,000 \$10,000 Money and Securities - Inside the Premises \$10,000 \$10,000 Outside the Premises (Limited) \$10,000 \$10,000 Outdoor Signs \$2,500 \$2,500 Outdoor Trees, Shrubs, Plants and Lawns \$10,000 \$10,000 Business Personal Property Away From Premises \$15,000 \$15,000 Business Personal Property Away From Premises - Transit \$15,000 \$15,000 Electronic Data \$10,000 \$10,000 Interruption of Computer Operations \$10,000 \$10,000 **Building Property of Others** \$10,000 \$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$25,000 Policy Occurrence INCLUDED Ordinance or Law - 1 - Loss to Undamaged Portion NOT PROVIDED

2 - Demolition Cost and Broadened Increased Cost of Construction NOT PROVIDED NOT PROVIDED Ordinance or Law Broadened

#### 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

ALLIED INSURANCE COMPANY OF AMERICA PB 81 01 (04-11)

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#### PREMIER HABITATIONAL

Policy Period:

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: ACP BPHL3038802933 From **06-03-21**To **06-03-22** Additional Interest: Interest Number: Loan Number: Interest: Additional Interest: Interest Number: Loan Number: Interest:

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PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: ACP BPHL3038802933 Policy DECLARATIONS Policy Period: From 06-03-21 To 06-03-22

Description of Premises Number: 001 Building Number: 002 Construction: NON-COMBUSTIBLE

Premises Address 505 GOAL KICK DR FUQUAY VARINA NC 27526-5890

Premises ID

Occupancy OO Classification: SWIMMING POOLS (HABITATIONAL)

Described as: SWIMMING POOLS (11192)

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.

LIMITS OF INSURANCE **COVERAGES** Building - Replacement cost \$265,000 Business Personal Property - Replacement cost \$32,800 ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown. Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit INCLUDED Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NOHour Waiting Period INCLUDED Equipment Breakdown INCLUDED Automatic Increase in Insurance - Building 6% 2.9% Automatic Increase in Insurance - Business Personal Property Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate) \$5,000 Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure INCLUDED Increased Cost of Construction \$25,000 **Included Limit OPTIONAL INCREASED LIMITS Additional Limit** Account Receivable \$25,000 \$25,000 Valuable Papers and Records (At the Described Premises) \$25,000 \$25,000 Forgery and Alteration \$10,000 \$10,000 Money and Securities - Inside the Premises \$10,000 \$10,000 Outside the Premises (Limited) \$10,000 \$10,000 Outdoor Signs \$2,500 \$2,500 Outdoor Trees, Shrubs, Plants and Lawns \$10,000 \$10,000 Business Personal Property Away From Premises \$15,000 \$15,000 Business Personal Property Away From Premises - Transit \$15,000 \$15,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$25,000 Policy Occurrence
Ordinance or Law - 1 - Loss to Undamaged Portion
2 - Demolition Cost and Broadened Increased Cost of Construction
Ordinance or Law Broadened

NOT PROVIDED

NOT PROVIDED

\$10,000

\$10,000

\$10,000

#### 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** 

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\$10,000

\$10,000

\$10,000

Electronic Data

Interruption of Computer Operations

**Building Property of Others** 

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#### PREMIER HABITATIONAL

Policy Period:

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: ACP BPHL3038802933 From **06-03-21**To **06-03-22** Additional Interest: Interest Number: Loan Number: Interest: Additional Interest: Interest Number: Loan Number: Interest:

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PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Period: Policy Number: ACP BPHL3038802933 From **06-03-21** To **06-03-22** 

Description of Premises Number: 001 Construction: FIRE RESISTIVE Building Number: 003

**FUQUAY VARINA** Premises Address 505 GOAL KICK DR NC 27526-5890

Premises ID

Occupancy OO Classification: FENCES (HABITATIONAL)

Described as: FENCES (11195)

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.

LIMITS OF INSURANCE **COVERAGES** \$12,800

Building - Replacement cost

NOT PROVIDED Business Personal Property -

ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.

Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit **INCLUDED** Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NOHour Waiting Period INCLUDED Equipment Breakdown INCLUDED

Automatic Increase in Insurance - Building

NOT PROVIDED Automatic Increase in Insurance - Business Personal Property

Back Up of Sewer and Drain Water (limit shown per Building, subject to \$25,000 policy aggregate)

\$5,000 Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure INCLUDED Increased Cost of Construction \$25,000

**Included Limit OPTIONAL INCREASED LIMITS Additional Limit** Account Receivable \$25,000 \$25,000 Valuable Papers and Records (At the Described Premises) \$25,000 \$25,000 Forgery and Alteration \$10,000 \$10,000 Money and Securities - Inside the Premises \$10,000 \$10,000 Outside the Premises (Limited) \$10,000 \$10,000 Outdoor Signs \$2,500 \$2,500 Outdoor Trees, Shrubs, Plants and Lawns \$10,000 \$10,000 Business Personal Property Away From Premises \$15,000 \$15,000 Business Personal Property Away From Premises - Transit \$15,000 \$15,000 Electronic Data \$10,000 \$10,000 Interruption of Computer Operations \$10,000 \$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$25,000 Policy Occurrence INCLUDED Ordinance or Law - 1 - Loss to Undamaged Portion NOT PROVIDED

2 - Demolition Cost and Broadened Increased Cost of Construction NOT PROVIDED NOT PROVIDED Ordinance or Law Broadened

\$10,000

#### PROTECTIVE SAFEGUARDS

**Building Property of Others** 

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

ALLIED INSURANCE COMPANY OF AMERICA PB 81 01 (04-11)

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\$10,000

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#### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Period: Policy Number: ACP BPHL3038802933 From **06-03-21**To **06-03-22** 

Additional Interest: Interest Number: Loan Number: Interest: Additional Interest: Interest Number: Loan Number: Interest:

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PREMIER HABITATIONAL

LIABILITY DECLARATIONS

Policy Period: Policy Number: ACP BPHL 3038802933 From 06-03-21 To 06-03-22

#### **LIMITS OF INSURANCE**

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

(Other than Products - Completed Operations)

#### **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	Included in Each Occurrence Limit of Insurance
Nonowned Auto Liability Coverage	Included in Each Occurrence Limit of Insurance
Directors & Officers with Non-Monetary Relief	Per Occurrence \$1,000,000
Directors & Officers Liab-Retro Date 06/03/18	Aggregate \$1,000,000

#### PREMIER HABITATIONAL

Policy Number: ACP BPHL 3038802933

#### FORMS AND ENDORSEMENTS SUMMARY

Policy Period: From **06-03-21** To **06-03-22** 

FORM NUMBER		TITLE				
PB0006 11 PB0009 11 PB0404 01 PB0523 07 PB1504 11 PB2998 09 PB2999 02 PB4151 05 PB5422 04 PB6005 11 PB9032 11	14 14 14	NUCLEAR ENERGY LIABILITY EXCLUSION PREMIER BUSINESSOWNERS PREMIER BUSINESSOWNERS LIABILITY COVERAGE FORM PREMIER BUSINESSOWNERS COMMON POLICY CONDITIONS HIRED AUTO AND NON-OWNED AUTO LIABILITY CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION EXCLUSION - VIOLATION OF CONSUMER PROTEC EXCLUSION - FUNGI OR BACTERIA D&O LIABILITY (COOPERATIVES OR CONDOMINIUMS) WITH NON-MONETA AMENDMENT - EMPLOYEE DISHONESTY OPTIONAL ADDITIONAL INSURED - HOMEOWNERS ASSOCIATIONS NORTH CAROLINA AMENDATORY ENDORSEMENT LIMITATION OF COVERAGE TO DESIGNATED PREMISES				
		IMPORTANT NOTICES				
	.07 .15	NC - NOTICE OF EXCLUSION-FLOOD, EARTHQUAKE, MUDSLIDE, MUDFLO DATA BREACH & IDENTITY RECOVERY SERVICES				

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#### 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 275020000

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 FLEMING FIELDS SUBDIVISION HOMEOWNERS ASSOCIATION

Issuing Company: AICOA

ACP BPHL3038802933

Policy Number: **ACP BPHL3038802933**Policy Term: **06-03-21 To 06-03-22** 

Limits of Insurance: Per Occurrence \$1,000,000 \$2,000,000

**INSURED COPY** 

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

## ADDITIONAL INSURED – HOMEOWNERS ASSOCIATIONS

This endorsement modifies insurance provided under the following:

PREMIER BUSINESSOWNERS LIABILITY COVERAGE FORM

- A. Under Section II WHO IS AN INSURED, the following is added:

  Each individual homeowners is also an insured, but only with respect to liability as a member of the homeowners association and not with respect to any liability arising out of the ownership, maintenance, use or repair of the real property to which the owner has title to.
- B. Under Section I. COVERAGES, A. COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY, 2. EXCLUSIONS, paragraph p. Bodily Injury To Any Insured is removed.

All terms and conditions of this policy apply unless modified by this endorsement.