

23-0796-00
AVID RISK SOLUTIONS
2501 PARMENTER ST STE 200A
MIDDLETON WI 53562

Auto-Owners INSURANCE

LIFE • HOME • CAR • BUSINESS

PO BOX 30660 • LANSING, MI 48909-8160

Agency phone: (608) 827-4525

OWNERS INSURANCE COMPANY

03-22-2023

You can view your policy, pay your bill, or change your paperless options at any time online at www.auto-owners.com.

ADDITIONAL WAYS TO PAY YOUR BILL

Pay Online
www.auto-owners.com
Pay My Bill

Pay by Mail
AUTO-OWNERS INSURANCE
PO BOX 740312
CINCINNATI, OH 45274-0312

Pay by Phone
1-800-288-8740

BRADFORD POINT PROPERTY OWNERS
ASSOCIATION INC
PO BOX 1223
EAGLE RIVER WI 54521-1223

RE: Policy 45-087-529-00

Billing Account 016671192

Thank you for selecting Auto-Owners Insurance Group to serve your insurance needs! Feel free to contact your independent Auto-Owners agent with questions you may have. If you have questions your agent is unable to answer, please contact us at 517.323.1200.

Auto-Owners and its affiliate companies offer a full complement of policies, each of which has its own eligibility requirements, coverages and rates. In addition, Auto-Owners also offers many billing options. Please take this opportunity to review your insurance needs with your Auto-Owners agent, and discuss which company, program, and billing option may be most appropriate for you.

Auto-Owners Insurance Company was formed in 1916. Our A++ (Superior) rating by A.M. Best Company signifies that we have the financial strength to provide the insurance protection you need. The Auto-Owners Insurance Group is comprised of six property and casualty companies and a life insurance company.

Serving Our Policyholders and Agents Since 1916

NOTICE OF PRIVACY PRACTICES

What We Do To Protect Your Privacy

At Auto-Owners Insurance Group*, we value your business and we want to retain your trust. In the course of providing products and services, we may obtain nonpublic personal information about you. We assure you that such information is used only for the purpose of providing our products and services to you.

Protecting Confidentiality

Our agents and Company associates may have access to nonpublic personal information only for the purpose of providing our products or services to you. We maintain physical, electronic and procedural safeguards against unauthorized use of your nonpublic personal information.

Information We Obtain

To assist in underwriting and servicing your policy, we may obtain nonpublic personal information about you. For example, we routinely obtain information through applications, forms related to our products or services, from visiting www.auto-owners.com, and your transactions with us. We may obtain such information from our affiliates, independent insurance agents, governmental agencies, third parties, or consumer reporting agencies.

The type of information that we collect depends on the product or service requested, but may include your name, address, contact information, social security number, credit history, claims history, information to properly investigate and resolve any claims, or billing information. We may obtain your medical history with your permission. The nature and extent of the information we obtain varies based on the nature of the products and services you receive.

The Internet and Your Information

If you would like to learn about how we gather and protect your information over the Internet, please see our online privacy statement at www.auto-owners.com/privacy.

Generally, Auto-Owners may use cookies, analytics, and other technologies to help us provide users with better service and a more customized web experience. Our business partners may use tracking services, analytics, and other technologies to monitor visits to www.auto-owners.com. The website may use web beacons in addition to cookies. You may choose to not accept cookies by changing the settings in your web browser.

Information obtained on our websites may include IP address, browser and platform types, domain names, access times, referral data, and your activity while using our site; who should use our web site; the security of information over the Internet; and links and co-branded sites.

Limited Disclosure

Auto-Owners Insurance Group companies do not disclose any nonpublic personal information about their customers or former customers except as permitted by law. We do not sell your personal information to anyone. We do not offer an opportunity for you to prevent or "opt out of" information sharing since we only share personal information with others as allowed by law.

When sharing information with third parties to help us conduct our business, we require them to protect your personal information. We do not permit them to use or share your personal information for any purpose other than the work they are doing on our behalf or as required by law.

The types of information disclosed may include personal information we collect as necessary to service your policy or account, investigate and pay claims, comply with state and federal regulatory requests or demands, and process other transactions that you request. Third parties that receive disclosures may include your independent agent, regulators, reinsurance companies, fraud prevention agencies, or insurance adjusters.

How Long We Retain Your Information

We generally retain your information as long as reasonably necessary to provide you services or to comply with applicable law and in accordance with our document retention policy. We may retain copies of information about you and any transactions or services you have used for a period of time that is consistent with applicable law, applicable statute of limitations or as we believe is reasonably necessary to comply with applicable law, regulation, legal process or governmental request, to detect or prevent fraud, to collect fees owed, to resolve disputes, to address problems with our services, to assist with investigations, to enforce other applicable agreements or policies or to take any other actions consistent with applicable law.

In some circumstances we may anonymize your personal information (so that it can no longer be associated with you) for research or statistical purposes, in which case we may use this information indefinitely without further notice to you. This allows the specific information collected (name, email, address, phone number, etc.) to become anonymous, but allows Auto-Owners to keep the transaction or engagement data.

Changes to the Privacy Policy

We will provide a notice of our privacy policy as required by law. This policy may change from time to time, but you can always review our current policy by visiting our website at www.auto-owners.com/privacy or by contacting us.

Contact Us

Auto-Owners Insurance Company
Phone: 844-359-4595 (toll free)
Email: privacyrequest@aoins.com

*Auto-Owners Insurance Group includes, Auto-Owners Insurance Company, Auto-Owners Life Insurance Company, Home-Owners Insurance Company, Owners Insurance Company, Property-Owners Insurance Company and Southern-Owners Insurance Company.

59546 (1-17)

Policy Number: 45-087-529-00
Insurance Company: OWNERS INS. CO.
Renewal Effective Date: 05-26-2023

Dear Policyholder,

Thank you for choosing us for your insurance needs. Your policy is set to renew on the renewal effective date shown above. This letter gives you advance notice of change(s) as listed below:

Your renewal premium will be: \$21,244.62 OR \$19,120.11 IF PAID IN FULL.
(Calculated changes are based on your current policy information. Your actual premium could vary if the information on file is incorrect or if your needs and renewal coverages change.)

Increase in deductible: _____

Reduction of limits: _____

Reduction or removal of coverage: _____

Other: SEE ATTACHED. _____

The first Named Insured shown in the Declarations may cancel this policy at any time by notifying us of the date on which cancellation is to take effect.

This notice is for informational purposes only. Your policy contains the specific terms and conditions of coverage.

If you have any questions regarding your policy or this notice, please contact your Auto-Owners Insurance agency.

AVID RISK SOLUTIONS
2501 PARMENTER ST STE 200A
MIDDLETON WI 53562
(608) 827-4525

54269 (5-02)

NOTICE TO POLICYHOLDER FUNGI OR BACTERIA EXCLUSIONS

Dear Policyholder:

The BUSINESSOWNERS LIABILITY coverage provided by this policy is amended by form number 54254 (4-02), FUNGI OR BACTERIA EXCLUSIONS. This endorsement will exclude coverage for bodily injury and property damage arising out of fungi, bacteria or mold.

This notice is for informational purposes only.

Please review this new endorsement and your policy carefully. If you have any questions concerning this exclusion, please contact your Auto-Owners Agency.

54269 (5-02)

Page 1 of 1

54367 (7-09)

NOTICE TO POLICYHOLDER Adjusted Value Factor Inflation Guard Coverage

Dear Policyholder:

This notice is for informational purposes only.

Effective upon the renewal of your policy, form 54239, BUILDING AND BUSINESS PERSONAL PROPERTY - AUTOMATIC INCREASE, will be replaced with form 54098, ADJUSTED VALUE FACTOR INFLATION GUARD COVERAGE. Form 54098 will continue to automatically increase your Building and Business Personal Property coverages throughout the policy period based on inflation.

This change may result in a reduction of the amount by which your coverage limits will increase on an annual basis. Please review this new endorsement and your policy carefully. If you have questions concerning your renewal, please contact your Auto-Owners agency.

Thank you for the opportunity to provide insurance coverage for your commercial business.

54367 (7-09)

Page 1 of 1

OWNERS INSURANCE COMPANY

The following is the address of our home office:

Owners Insurance Company
2325 North Cole Street
P.O. Box 4570
Lima, OH 45802-4570

Please direct your questions to:

Owners Insurance Company
W. 6207 Aerotech Drive
P.O. Box 8505
Appleton, WI 54912-8505

KEEP THIS NOTICE WITH YOUR INSURANCE PAPERS

PROBLEMS WITH YOUR INSURANCE? - If you are having problems with your insurance company or agent, do not hesitate to contact the insurance company or agent to resolve your problem.

AUTO-OWNERS INSURANCE COMPANY
W. 6207 Aerotech Drive
P.O. Box 8505
Appleton, WI 54912-8505
920-993-8550

You can also contact the **OFFICE OF THE COMMISSIONER OF INSURANCE**, a state agency which enforces Wisconsin's insurance laws, and file a complaint. You can file a complaint electronically with the **OFFICE OF THE COMMISSIONER OF INSURANCE** at its website at <http://oci.wi.gov/>, or by contacting:

Office of the Commissioner of Insurance
Complaints Department
P.O. Box 7873
Madison, WI 53707-7873
1-800-236-8517
608-266-0103
711 (TDD) (ask for 608-266-3586)

NOTICE OF CHANGE IN POLICY TERMS COMMUNICABLE DISEASES EXCLUSION

NOTICE OF REDUCTION IN COVERAGE

Dear Policyholder,

Your form 54679 (6-92) Communicable Diseases Exclusion has changed to 54679 (12-20) Communicable Diseases Exclusion. Language has been updated to also exclude liability coverage even if claims against any insured allege negligence or other wrongdoing in the:

- a. Supervising, hiring, employing, training or monitoring of others that may be infected with and spread a communicable disease;
- b. Testing for a communicable disease;
- c. Failure to prevent the spread of the disease; or
- d. Failure to report the disease to authorities.

This notice is for informational purposes only. Your policy contains the specific terms and conditions of coverage.

Please review the endorsement and your policy carefully. If you have any questions regarding your policy or this notice, please contact your Auto-Owners Insurance agency.

NOTICE OF CHANGE IN POLICY TERMS EXCLUSION - VIRUS OR BACTERIA AND LIMITED COVERAGE FOR FUNGI, WET ROT OR DRY ROT

Dear Policyholder:

The Businessowners Property Coverage provided by this policy is amended by form 64855 (4-20) EXCLUSION - VIRUS OR BACTERIA. This endorsement excludes property coverage arising out of a virus, bacterium or other microorganism that induces or is capable of inducing physical distress, illness or disease. The addition of this exclusion is a reduction in coverage.

Additionally, the Limited Coverage for Fungi, Wet Rot or Dry Rot endorsement form 54315 (4-20) or 54319 (4-20) has been amended to remove any reference to the term bacteria. The removal of bacteria from the aforementioned endorsement constitutes a reduction in coverage.

This notice is for informational purposes only. Your policy contains the specific terms and conditions of coverage.

Please review the endorsement and your policy carefully. If you have any questions regarding your policy or this notice, please contact your Auto-Owners Insurance agency.

NOTIFICATION OF POSSIBLE CHANGES IN COVERAGE FOR TERRORISM

Dear Policyholder:

The Terrorism Risk Insurance Act (including ensuing Congressional actions pursuant to the Act) will expire on December 31, 2027 unless the Federal government extends the Act. What this means to you is the following:

1. Subject to policy terms and conditions, the enclosed policy will provide insurance coverage for certified acts of terrorism as defined in the Act only until December 31, 2027.
2. A conditional endorsement entitled, Conditional Exclusion Of Terrorism Involving Nuclear, Biological Or Chemical Terrorism (Relating To Disposition Of Federal Terrorism Risk Insurance Act) is enclosed. This conditional endorsement will only apply if the Act is not extended or if the Act is revised to increase statutory deductibles, decrease the federal government's share in potential losses above the statutory deductibles, change the levels, terms or conditions of coverage and we are no longer required to make terrorism coverage available and elect not to do so. It will not apply if the Act is simply extended.
3. The conditional endorsement will provide coverage for an incident of terrorism pursuant to the terms and conditions of the policy only if the incident does not involve nuclear, biological or chemical material.
4. A premium charge for the conditional endorsement will be applied effective January 1, 2028. The premium will be pro rated for the remainder of the policy term and is one-half of the current premium charge appearing in the Declarations for TERRORISM - CERTIFIED ACTS. However, it will only be made if the Terrorism Risk Insurance Act (including ensuing Congressional actions pursuant to the Act) is not extend. Revised Declarations will be mailed to you after January 1, 2028.
5. If the Act is extended without any revision, the enclosed policy will continue to provide coverage for certified acts of terrorism. The conditional endorsement will not be activated and the changes in coverage or premium referenced above will not apply.
6. If the Act is extended with revisions or is replaced, and we are required or elect to continue to offer coverage for certified acts of terrorism, we may amend this policy in accordance with the provisions of the revised Act or its replacement.

This notice is for informational purposes only.

If you have any questions concerning your policy or this notice, please contact your Auto-Owners agency.

INSURANCE COMPANY
6101 ANACAPRI BLVD., LANSING, MI 48917-3999

BUSINESSOWNERS POLICY DECLARATIONS

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029 (608) 827-4525

Renewal Effective 05-26-2023

POLICY NUMBER 45-087-529-00

INSURED BRADFORD POINT PROPERTY OWNERS
ASSOCIATION INC

Company Use 61-57-WI-0405

ADDRESS PO BOX 1223
EAGLE RIVER WI 54521-1223

Company
Bill

POLICY TERM	
12:01 a.m.	12:01 a.m.
to	
05-26-2023	05-26-2024

In consideration of payment of the premium shown below, this policy is renewed. Please attach this Declarations and attachments to your policy. If you have any questions, please consult with your agent.

54643 (01-90)

Entity: Corporation

PROPERTY COVERAGES - ALL DESCRIBED LOCATIONS

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
SPECIAL COVERAGE FORM				
EXTENDED EMPLOYEE DISHONESTY	See Schedule	See Schedule	\$38.41	
TERRORISM - CERTIFIED ACTS			\$172.13	

BUSINESS LIABILITY PROTECTION

COVERAGE	LIMIT	PREMIUM	CHANGE
AGGREGATE LIMIT (Other than Products - Completed Operations)	\$2,000,000	\$3,646.47	
PRODUCTS - COMPLETED OPERATIONS AGGREGATE	\$1,000,000	Included	
LIABILITY AND MEDICAL EXPENSE	\$1,000,000	Included	
Medical Expense - Per Person	\$5,000	Included	
Personal Injury	Included	Included	
TENANTS FIRE LEGAL - ANY ONE FIRE	\$50,000	Included	
HIRED AUTO & NON-OWNED AUTO LIABILITY	\$1,000,000	\$16.46	
ASSOCIATION DIRECTORS & OFFICERS EACH OCCURRENCE	\$1,000,000	\$157.90	
ASSOCIATION DIRECTORS & OFFICERS AGGREGATE	\$1,000,000	Included	
TERRORISM - CERTIFIED ACTS		\$38.20	

Forms that apply to all locations:

54521 (07-12)	BP0002 (01-87)	BP0006 (01-87)	54961 (11-11)	BP0009 (01-87)
54679 (12-20)	54709 (04-10)	54098 (05-07)	54319 (04-20)	54867 (03-08)
54656 (08-91)	54088 (09-09)	64728 (02-14)	54383 (02-12)	64839 (07-19)
64855 (04-20)	54254 (04-02)	54861 (11-07)	54617 (02-08)	54698 (06-93)

STANDARD PROPERTY PLUS COVERAGE PACKAGE DECLARATIONS

The coverages and limits below apply separately to each location or sublocation that sustains a loss to covered property and is designated in the Declarations. No deductible applies to the below Property Plus Coverages unless indicated.

COVERAGE	LIMIT
ACCOUNTS RECEIVABLE	\$100,000
ARSON REWARD	\$7,500

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029Company
Bill

POLICY NUMBER

45-087-529-00
61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

STANDARD PROPERTY PLUS COVERAGE PACKAGE DECLARATIONS

COVERAGE	LIMIT
BAILEES COVERAGE	\$5,000
	\$2,500 PER ITEM
BUILDING GLASS COVERAGE	SEE FORM
BUSINESS PERSONAL PROPERTY - EXPANDED COVERAGE	UP TO 1,000 FT
BUSINESS PERSONAL PROPERTY AT FAIRS OR EXHIBITIONS	\$5,000
BUSINESS PERSONAL PROPERTY AT NEWLY ACQUIRED PREMISES	\$500,000 FOR 90 DAYS
BUSINESS PERSONAL PROPERTY IN TRANSIT	\$25,000
BUSINESS PERSONAL PROPERTY OFF PREMISES	\$25,000
DEBRIS REMOVAL	\$25,000
ELECTRONIC EQUIPMENT	
UNSCHEDULED EQUIPMENT	\$25,000
ELECTRICAL DISTURBANCE (SEE FORM FOR DEDUCTIBLE)	\$25,000
MECHANICAL BREAKDOWN	\$25,000
BUSINESS INCOME AND EXTRA EXPENSE	\$100,000
MEDIA	\$25,000
TRANSPORTATION	\$25,000
EMPLOYEE DISHONESTY	\$15,000
FINE ARTS, COLLECTIBLES, AND MEMORABILIA	\$10,000
	\$2,500 PER ITEM
FIRE DEPARTMENT SERVICE CHARGE*	\$5,000
*NOT AVAILABLE IN AZ	
FIRE EXTINGUISHER AND FIRE SUPPRESSION SYSTEM RECHARGE	\$10,000
FORGERY AND ALTERATION	\$10,000
MONEY & SECURITIES INSIDE PREMISES	\$15,000
MONEY & SECURITIES OUTSIDE PREMISES	\$15,000
NEWLY ACQUIRED OR CONSTRUCTED PROPERTY	\$1,000,000 FOR 90 DAYS
OFF-PREMISES UTILITY SERVICE FAILURE	\$50,000
*BUSINESS INCOME/EXTRA EXPENSE LIMITED TO \$10,000 IN AL, NC, AND SC	
ORDINANCE OR LAW	
COVERAGE A, B AND C COMBINED	\$50,000
OUTDOOR PROPERTY	\$10,000
TREES, SHRUBS OR PLANTS	\$1,000 PER ITEM
OUTDOOR SIGNS	\$5,000
PERSONAL EFFECTS AND PROPERTY OF OTHERS	\$15,000
POLLUTANT CLEAN UP AND REMOVAL	\$25,000
REFRIGERATED PRODUCTS	\$10,000

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

STANDARD PROPERTY PLUS COVERAGE PACKAGE DECLARATIONS

COVERAGE	LIMIT
REKEYING OF LOCKS	\$1,000
SALESPERSON'S SAMPLES	\$10,000
VALUABLE PAPERS AND RECORDS	\$50,000
WATER BACK-UP FROM SEWERS OR DRAINS	\$15,000

LOCATION 0001

Location: 1465-1467 Bucky Lane, St Germain, WI 54558

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
COVERAGE PACKAGE: PROPERTY PLUS		See Property Plus Declarations	\$693.85	
Tier: Standard				
TERRORISM - CERTIFIED ACTS SEE FORM(S) 54309, 59350, 59390				
Total Building Blanket Limit of Insurance		\$12,930,800		

Forms that apply to this location:

54094 (11-19) 54238 (12-01) 54244 (05-07) 54309 (09-19) 54604 (07-88)
54614 (11-87) 54661 (08-91) 54805 (07-18) 59350 (01-15)

LOCATION 0001 - BUILDING 0001

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$534,300	\$652.38	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11) BP1203 (06-89) 54659 (12-20) 54499 (04-13) 54500 (04-13)
54069 (08-00) 54340 (04-13) 54743 (08-00) 54750 (08-00) 54073 (08-00)
54226 (08-00) 54752 (08-00) 54064 (08-00) 54072 (04-14) 54067 (08-00)
54708 (01-07) 54062 (08-00) 54060 (02-06) 54070 (02-05) 54745 (08-00)
54066 (08-00) 54065 (08-00) 54658 (04-07) 54749 (08-10) 54068 (08-00)
54063 (03-13) 54227 (08-00) 54341 (03-13) 54748 (08-00) 54228 (04-13)

Occupied As: 1465-1467 BUCKY LN

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Secured Interested Parties: See Attached Schedule

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143
Program: Premier Condominium
Liability Rate Number: 00
Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered
Protection Class: 06
Territory: 003 Vilas County
Construction Year: 1999

LOCATION 0001 - BUILDING 0002

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$645.61	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1471 BUCKY LN & 1473 OTTER LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143
Program: Premier Condominium
Liability Rate Number: 00
Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered
Protection Class: 06
Territory: 003 Vilas County
Construction Year: 1999

LOCATION 0001 - BUILDING 0003

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$645.61	
Special Coverage Form Deductible	\$5,000	Included		

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Windstorm or Hail Flat Deductible Adjusted Value Factor 0.0900	\$5,000	Included		
BUSINESS INCOME AND EXTRA EXPENSE LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		12 Months See Form	Included Included	
COVERAGE PACKAGE: PROPERTY PLUS Tier: Standard * This deductible will apply separately to each building.			Included	

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1477-1479 OTTER LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 1999

LOCATION 0001 - BUILDING 0004

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$645.61	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible Adjusted Value Factor 0.0900	\$5,000	Included		
BUSINESS INCOME AND EXTRA EXPENSE LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		12 Months See Form	Included Included	
COVERAGE PACKAGE: PROPERTY PLUS Tier: Standard * This deductible will apply separately to each building.			Included	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1483-1485 BEACH LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 1999

LOCATION 0001 - BUILDING 0005

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$342,800	\$473.90	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1489-1491 DRAGONFLY LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 1999

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

LOCATION 0001 - BUILDING 0006

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$342,800	\$473.90	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1495-1497 DRAGONFLY LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 1999

LOCATION 0001 - BUILDING 0007

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$342,800	\$472.58	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1484-1486 NATURE LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0008

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$342,800	\$472.58	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1478-1480 NATURE LN

Secured Interested Parties: None

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143
Program: Premier Condominium
Liability Rate Number: 00
Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered
Protection Class: 06
Territory: 003 Vilas County
Construction Year: 2000

LOCATION 0001 - BUILDING 0009

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$643.82	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1472-1474 BRADFORD POINT RD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143
Program: Premier Condominium
Liability Rate Number: 00
Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered
Protection Class: 06
Territory: 003 Vilas County
Construction Year: 2000

LOCATION 0001 - BUILDING 0010

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$643.82	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1466-1468 BRADFORD POINT RD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0011

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$643.82	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Occupied As: 1460-1462 BRADFORD POINT RD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0012

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$534,300	\$650.57	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1454-1456 SHADY LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

LOCATION 0001 - BUILDING 0013

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$534,300	\$650.57	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1448-1450 SHADY LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0014

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$534,300	\$650.57	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER
Bill 45-087-529-00
61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1442-1444 CREEK CHANNEL LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0015

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$534,300	\$650.57	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1436-1438 CREEK CHANNEL LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

LOCATION 0001 - BUILDING 0016

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$643.82	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1430-1432 CREEK CHANNEL LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0017

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$641.44	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

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COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1424-1426 CREEK CHANNEL LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2001

LOCATION 0001 - BUILDING 0018

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$641.44	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1418-1420 CREEK CHANNEL LN

Secured Interested Parties: None

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2001

LOCATION 0001 - BUILDING 0019

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$525,100	\$635.47	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1414-1416 CREEK CHANNEL LN

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

LOCATION 0001 - BUILDING 0020

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$363,400	\$483.55	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1501-1503 BRADFORD POINT RD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

LOCATION 0001 - BUILDING 0021

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$441,500	\$530.24	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Occupied As: 8838-8840 BRADFORD POINT CT

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2004

LOCATION 0001 - BUILDING 0022

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$168.73	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

LOCATION 0001 - BUILDING 0023

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$168.73	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$168.73	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2000

LOCATION 0001 - BUILDING 0025

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$166.54	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

LOCATION 0001 - BUILDING 0026

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$166.54	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

LOCATION 0001 - BUILDING 0027

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$166.54	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

LOCATION 0001 - BUILDING 0028

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$441,500	\$537.91	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 8832-8834 BRADFORD POINT COURT

Secured Interested Parties: None

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2003

LOCATION 0001 - BUILDING 0029

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$441,500	\$537.91	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 8826-8828 BRADFORD POINT COURT

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2003

LOCATION 0001 - BUILDING 0030

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$99,300	\$162.16	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: GARAGE

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2004

LOCATION 0001 - BUILDING 0031

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$363,400	\$483.55	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Occupied As: 1507-1509 BRADFORD POINT ROAD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2002

LOCATION 0001 - BUILDING 0032

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$107,300	\$160.47	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Secured Interested Parties: None

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2007

LOCATION 0001 - BUILDING 0033

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$148,500	\$207.56	
Special Coverage Form Deductible	\$5,000	Included		

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
Windstorm or Hail Flat Deductible Adjusted Value Factor 0.0900	\$5,000	Included		
BUSINESS INCOME AND EXTRA EXPENSE LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		12 Months See Form	Included Included	
COVERAGE PACKAGE: PROPERTY PLUS Tier: Standard * This deductible will apply separately to each building.			Included	

Forms that apply to this building:

54965 (05-11)	BP1203 (06-89)	54659 (12-20)	54499 (04-13)	54500 (04-13)
54069 (08-00)	54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)
54226 (08-00)	54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)
54708 (01-07)	54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)
54066 (08-00)	54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)
54063 (03-13)	54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)

Occupied As: GARAGE/OFFICE

Secured Interested Parties: See Attached Schedule

Rating Information

Occupancy: Garages, Carports

Class Code: 65156

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2007

LOCATION 0001 - BUILDING 0034

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - GUARANTEED REPLACEMENT COST - BLANKET	\$5,000*	\$374,000	\$445.38	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible Adjusted Value Factor 0.0900	\$5,000	Included		
BUSINESS INCOME AND EXTRA EXPENSE LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		12 Months See Form	Included Included	
COVERAGE PACKAGE: PROPERTY PLUS Tier: Standard * This deductible will apply separately to each building.			Included	

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company POLICY NUMBER 45-087-529-00
Bill 61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

Forms that apply to this building:

54965 (05-11)	54659 (12-20)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: 1513-1515 BRADFORD POINT RD

Secured Interested Parties: None

Rating Information

Occupancy: 2 Unit Condominium

Class Code: 65143

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 2007

LOCATION 0001 - BUILDING 0035

COVERAGE	DEDUCTIBLE	LIMIT	PREMIUM	CHANGE
BUILDING - REPLACEMENT COST - BLANKET	\$5,000*	\$260,900	\$348.58	
Special Coverage Form Deductible	\$5,000	Included		
Windstorm or Hail Flat Deductible	\$5,000	Included		
Adjusted Value Factor 0.0900				
BUSINESS INCOME AND EXTRA EXPENSE		12 Months	Included	
LIMITATION OF COVERAGE FOR FUNGI, MOLD, DRY ROT, AND WET ROT		See Form	Included	
COVERAGE PACKAGE: PROPERTY PLUS			Included	
Tier: Standard				
* This deductible will apply separately to each building.				

Forms that apply to this building:

54965 (05-11)	54606 (01-90)	54499 (04-13)	54500 (04-13)	54069 (08-00)
54340 (04-13)	54743 (08-00)	54750 (08-00)	54073 (08-00)	54226 (08-00)
54752 (08-00)	54064 (08-00)	54072 (04-14)	54067 (08-00)	54708 (01-07)
54062 (08-00)	54060 (02-06)	54070 (02-05)	54745 (08-00)	54066 (08-00)
54065 (08-00)	54658 (04-07)	54749 (08-10)	54068 (08-00)	54063 (03-13)
54227 (08-00)	54341 (03-13)	54748 (08-00)	54228 (04-13)	

Occupied As: PIERS

Secured Interested Parties: None

Rating Information

Occupancy: Special Structures

Class Code: 65157

Program: Premier Condominium

Liability Rate Number: 00

Burglary Rate Group: 00

Construction: Frame, Non-Sprinklered

Protection Class: 06

Territory: 003 Vilas County

Construction Year: 1999

OWNERS INS. CO.

Issued 03-22-2023

AGENCY AVID RISK SOLUTIONS
23-0796-00 MKT TERR 029

Company
Bill

POLICY NUMBER

45-087-529-00
61-57-WI-0405

INSURED BRADFORD POINT PROPERTY OWNERS

Term 05-26-2023 to 05-26-2024

	TERM	CHANGE
TOTAL POLICY PREMIUM	\$21,244.62	
PAID IN FULL DISCOUNT	\$2,124.51	
TOTAL POLICY PREMIUM IF PAID IN FULL	\$19,120.11	

Paid In Full does not apply to fixed fees, statutory charges, or minimum premium.

Paid In Full Discount is available.

Merit Rating Discount of 10% Applies

A 04% Cumulative Multi-Policy Discount applies. Supporting policies are marked with an (X):
Comm Umb(X) Comm Auto() WC(X) Life() Personal() Farm().

Secured Interested Parties and/or Additional Interested Parties

LOC 001 BLDG 0001
DEERE & COMPANY
PO BOX 6600
JOHNSTON IA 53131
INTEREST: LOSS PAYABLE 2015 JD GATOR #2008
FORM: BP1203 (06-89) PARAGRAPH A
SIP-ID: IA054560

LOC 001 BLDG 0033
DEERE AND COMPANY
ISAOA
8402 EXCELSIOR DR
MADISON WI 53717-1909
INTEREST: LOSS PAYABLE TRACTOR EQUIPMENT
FORM: BP1203 (06-89) PARAGRAPH A
SIP-ID: WI031677

EXTENDED EMPLOYEE DISHONESTY SCHEDULE

COVERAGE	DEDUCTIBLE	LIMIT
Extended Employee Dishonesty for Officers, Directors, and Volunteers		
EMPLOYEE	\$250	\$10,000
EMPLOYEE	\$250	\$10,000

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FUNGI OR BACTERIA EXCLUSIONS

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER THE BUSINESSOWNERS LIABILITY COVER-AGE FORM.

It is agreed:

A. The following exclusions are added to section **1.** of **B. EXCLUSIONS:**

1. "Bodily injury" or "property damage" arising out of, in whole or in part, the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, or presence of, any "fungi" or bacteria, whether airborne or not, on or within a building or structure, including its contents. This exclusion applies whether any other cause, event, material or product contributed concurrently or in any sequence to such injury or damage.
2. Any loss, cost or expenses arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of, "fungi" or bacteria, by any insured or by any other person, entity or governmental authority.

These exclusions do not apply to any "fungi" or bacteria that are on, or are contained in, a good or product intended for human consumption.

B. The following exclusions are added to section **1.** paragraph **p.** of **B. EXCLUSIONS:**

1. Arising out of, in whole or in part, the actual, alleged or threatened inhalation of, ingestion of, contact with, exposure to, existence of, or presence of, any "fungi" or bacteria, whether airborne or not, on or within a building or structure, including its contents. This exclusion applies whether any other cause, event, material or product contributed concurrently or in any sequence to such injury.
2. For any loss, cost or expenses arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to, or assessing the effects of, "fungi" or bacteria, by any insured or by any other person, entity or governmental authority.

C. The following definition is added to **F. LIABILITY AND MEDICAL EXPENSE DEFINITIONS:**

"Fungi" means any type or form of fungus, including but not limited to, any mold, mildew, mycotoxins, spores, scents or byproducts produced or released by any type or form of fungus.

All other policy terms and conditions apply.

54679 (12-20)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMUNICABLE DISEASES EXCLUSION

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS LIABILITY COVERAGE FORM

The following exclusion is added to **B. EXCLUSIONS. Communicable Disease**

This insurance does not apply to "bodily injury", "property damage", "personal injury" or "advertising injury" arising out of the actual or alleged transmission of a communicable disease. This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the:

- a. Supervising, hiring, employing, training or monitoring of others that may be infected with and spread a communicable disease;
- b. Testing for a communicable disease;
- c. Failure to prevent the spread of the disease; or
- d. Failure to report the disease to authorities.

All other policy terms and conditions apply.

54679 (12-20) Includes copyrighted material of Insurance Services Office, Inc., with its permission. Page 1 of 1

64855 (4-20)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EXCLUSION - VIRUS OR BACTERIA

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS SPECIAL PROPERTY COVERAGE FORM BUSINESSOWNERS STANDARD PROPERTY COVERAGE FORM

B. EXCLUSIONS, Paragraph **1.** is amended. The following exclusion is added.

Virus Or Bacteria

- (1) Any virus, bacterium or other microorganism that induces or is capable of inducing physical distress, illness or disease.
- (2) However, the exclusion in Paragraph (1) does not apply to loss or damage caused by or resulting from "fungi", wet rot or dry rot. Such loss or damage is addressed in the Limited Coverage For Fungi, Wet Rot Or Dry Rot endorsement.

- (3) With respect to any loss or damage subject to the exclusion in Paragraph (1), such exclusion supersedes any exclusion relating to "pollutants". This exclusion applies whether or not the loss event results in widespread damage or affects a substantial area.

All other policy terms and conditions apply.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

GUARANTEED BUILDING REPLACEMENT COST

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS SPECIAL PROPERTY COVERAGE FORM

It is agreed:

When Guaranteed Replacement Cost is shown in the Declarations, **C. LIMITS OF INSURANCE** is amended to include the following:

Guaranteed Building Replacement Cost

If you have:

- a. permitted us to adjust the Limit of Insurance for the Building to reflect:
 - (1) any increase due to inflation; and
 - (2) property valuation estimates made by us;
- b. paid any additional premium for adjustment of the Limit of Insurance for the Building;
- c. notified us within 90 days from the start of construction of any new building, addition to or remodeling of an existing insured building, which increases the replacement cost by \$10,000 or more; and

d. elected to repair or replace the damaged building then, at the time of loss to your building, we will adjust the Limit of Insurance for Building to equal the current replacement cost of the building if the amount of loss to the building exceeds the Limits of Insurance as determined by **4. Building Limit - Automatic Increase**. These provisions do not apply to any loss or damage to a covered building or structure resulting directly or indirectly from mine subsidence. In no event shall our payment under the Additional Coverage, Limited Coverage For "Fungi", Wet Rot or Dry Rot, be increased because of these provisions.

All other policy terms and conditions apply.

64839 (7-19)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CHANGES - ACTUAL CASH VALUE AND DEPRECIATION

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS STANDARD PROPERTY COVERAGE FORM
BUSINESSOWNERS SPECIAL PROPERTY COVERAGE FORM

Wherever it appears in this Coverage Form and any endorsement attached to this Coverage Form:

1. Actual cash value means the cost to repair or replace lost or damaged property with property of similar quality and features reduced by the amount of depreciation applicable to the lost or damaged property immediately prior to the loss.
2. Depreciation means a decrease in value because of age, wear, obsolescence or market value and includes:
 - a. The cost of materials, labor and services;

- b. Any applicable taxes; and
- c. Profit and overhead necessary to repair, rebuild or replace lost or damaged property.

The meanings of actual cash value and depreciation in this endorsement supersede any provision in this Coverage Form and any endorsement attached to the Coverage Form to the contrary.

All other policy terms and conditions apply.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITED COVERAGE FOR FUNGI, WET ROT OR DRY ROT

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS SPECIAL PROPERTY COVERAGE FORM

A. A. COVERAGE, 5. Additional Coverages is amended. The following additional coverage is added.

Limited Coverage For "Fungi", Wet Rot or Dry Rot

- (1) The coverage described in paragraphs (2) and (6) immediately below, only applies when the "fungi", wet rot or dry rot are the result of a "specified cause of loss" other than fire or lightning that occurs during the policy period and only if all reasonable means were used to save and preserve the property from further damage at the time of and after that occurrence.
- (2) We will pay for loss or damage by "fungi", wet rot or dry rot. As used in this Limited Coverage, the term loss or damage means:
 - (a) Direct physical loss or damage to Covered Property caused by "fungi", wet rot or dry rot including the cost of removal of the "fungi", wet rot or dry rot;
 - (b) The cost to tear out and replace any part of the building or other property as needed to gain access to the "fungi", wet rot or dry rot; and
 - (c) The cost of testing performed after removal, repair, replacement or restoration of the damaged property is completed, provided there is a reason to believe that "fungi", wet rot or dry rot are present.
- (3) The coverage described under this Limited Coverage is limited to 10% of the building or business personal property limit of insurance, whichever is greater, subject to a maximum of \$100,000 and a minimum of \$15,000. This is the most we shall pay for the total of all loss or damage arising out of all occurrences of a "specified cause of loss" (other than fire or lightning) which take place in a 12-month period (starting with the beginning of the present

annual policy period) regardless of the number of locations covered by this policy or claims made. With respect to a particular occurrence of loss which results in "fungi", wet rot or dry rot, we will not pay more than this limit even if "fungi", wet rot or dry rot continue to be present or active, or recurs, in a later policy period.

- (4) The coverage provided under this Limited Coverage does not increase the applicable Limit of Insurance on any Covered Property. If a particular occurrence results in loss or damage by "fungi", wet rot or dry rot, and other loss or damage, we will not pay more, for the total of all loss or damage, than the applicable Limit of Insurance on the affected Covered Property. If there is covered loss or damage to Covered Property, not caused by "fungi", wet rot or dry rot, loss payment will not be limited by the terms of this Limited Coverage, except to the extent that "fungi", wet rot or dry rot causes an increase in the loss. Any such increase in the loss will be subject to the terms of this Limited Coverage.
- (5) The terms of this Limited Coverage do not increase or reduce the coverage provided under the Water Damage Additional Coverage.
- (6) The following applies only if Business Income and/or Extra Expense Coverage applies to the described premises and only if the suspension of "operations" satisfies all the terms and conditions of the applicable Business Income and/or Extra Expense Additional Coverage.
 - (a) If the loss which resulted in "fungi", wet rot or dry rot does not in itself necessitate a suspension of "operations", but such suspension is necessary due to loss or damage to property caused by "fungi", wet rot or dry rot, then our payment under the Business Income and/or Extra Expense is

limited to the amount of loss and/or expense sustained in a period of not more than 45 days. The days need not be consecutive.

- (b) If a covered suspension of "operations" was caused by loss or damage other than "fungi", wet rot or dry rot, but remediation of "fungi", wet rot or dry rot prolongs the "period of restoration", we will pay for loss and/or expense sustained during the delay (regardless of when such a delay occurs during the "period of restoration"), but such coverage is limited to 45 days. The days need not be consecutive.

B. B. EXCLUSIONS is amended. **2.d.(2)** is deleted and replaced by the following exclusion.

- (2) Rust, corrosion, decay, deterioration, hidden or latent defect or any quality in property that causes it to damage itself;

C. B. EXCLUSIONS is amended. The following exclusion is added.

"Fungi"

Presence, growth, proliferation, spread or any activity of "fungi", wet rot or dry rot. This exclusion does not apply to loss or damage to covered property:

- (1) If "fungi", wet rot or dry rot results from fire or lightning;
- (2) If the ensuing loss not otherwise excluded results directly or indirectly from "fungi", wet rot or dry rot; or
- (3) As provided under the Additional Coverage, **Limited Coverage For "Fungi", Wet Rot or Dry Rot.**

D. H. PROPERTY DEFINITIONS is amended. The following definition is added.

"Fungi" means any type or form of fungus, including but not limited to, any mold, mildew mycotoxins, spores, scents or byproducts produced or released by any type or form of fungus.

All other policy terms and conditions apply.

**CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
AND
IMPORTANT INFORMATION REGARDING TERRORISM RISK
INSURANCE COVERAGE**

It is agreed:

1. With respect to any one or more certified acts of terrorism, we will not pay any amounts for which we are not responsible because of the application of any provision which results in a cap on our liability for payments for terrorism losses in accordance with the terms of the federal Terrorism Risk Insurance Act of 2002 (including ensuing Congressional actions pursuant to the Act).
2. Certified act of terrorism means any act certified by the Secretary of the Treasury, in consultation with:
 - a. the Secretary of Homeland Security; and
 - b. the Attorney General of the United Statesto be an act of terrorism as defined and in accordance with the federal Terrorism Risk Insurance Act of 2002 (including ensuing Congressional actions pursuant to the Act).
3. Under the federal Terrorism Risk Act of 2002 (including ensuing Congressional actions pursuant to the Act) a terrorist act may be certified:
 - a. if the aggregate covered commercial property and casualty insurance losses resulting from the terrorist act exceed \$5 million; and
 - b. (1) if the act of terrorism is:
 - a) a violent act; or
 - b) an act that is dangerous to human life, property or infrastructure; and(2) if the act is committed:
 - a) by an individual or individuals as part of an effort to coerce the civilian population of the United States; or
 - b) to influence the policy or affect the conduct of the United States government by coercion.

All other policy terms and conditions apply.

IMPORTANT INFORMATION REGARDING TERRORISM RISK INSURANCE COVERAGE

The Terrorism Risk Insurance Act of 2002 was signed into law on November 26, 2002. The Act (including ensuing Congressional actions pursuant to the Act) defines an act of terrorism, to mean any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security and the Attorney General of the United States to be (i) an act of terrorism; (ii) to be a violent act or an act that is dangerous to human life, property or infrastructure; (iii) to have resulted in damage within the United States or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and (iv) to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States government by coercion.

Subject to the policy terms and conditions, this policy provides insurance coverage for acts of terrorism as defined in the Act.

Any coverage for certain commercial lines of property and casualty insurance provided by your policy for losses caused by certified acts of terrorism are partially paid by the federal government under a formula established by federal law. Under this formula, the government will reimburse us for 85% of such covered losses that exceed the statutory deductible paid by us. However, beginning January 1, 2016 the share will decrease 1% per calendar year until it equals 80%. **You should also know that in the event aggregate insured losses exceed \$100 billion during any year the Act is in effect, then the federal government and participating United States insurers that have met their insurer deductible shall not be liable for the payment of any portion of that amount of the loss that exceeds \$100 billion. In the event that aggregate insured losses exceed \$100 billion annually, no additional claims will be paid by the federal government or insurers.** This formula is currently effective through December 31, 2020 unless extended.

The premium charge, if any, for this coverage is shown separately on the attached Declarations page. In the event of a certified act of terrorism, future policies also may include a government assessed terrorism loss risk-spreading premium in accordance with the provisions of the Act.

Please contact us if you would like to reject coverage for certified acts of terrorism.