



725 S. Figueroa Street, Suite 3900
 Los Angeles, CA 90017
 (800) 339-4099
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California FAIR Plan Association
COMMERCIAL INSURANCE POLICY DECLARATIONS

TRANSACTION TYPE Commercial-Renewal Offer

YOUR INSURANCE BROKER

SKY FINANCIAL AND INSURANCE SERVICES LLC
 DBA:SKY INSURANCE BROKERS
 1501 EL CAMINO AVE STE 1
 SACRAMENTO, CA 95815

PHONE NUMBER (916) 540-7000

DATE ISSUED 04/07/2023
POLICY NUMBER COM 2805749 01
POLICY PERIOD 06/09/2023 To 06/09/2024
 12:01 a.m. at the property location

INSURED NAME AND MAILING ADDRESS

GOLD RIDGE FOREST PROPERTY
 OWNERS ASSOCIATION GOLD
 4101 OPAL TRL
 POLLOCK PINES, CA 95726
see Schedule attached

PROPERTY LOCATION

see Schedule attached

IMPORTANT NOTICE TO INSURED

Check to see that the amount and type of coverage provided by this policy is appropriate. That determination is solely your responsibility.

RATING INFORMATION

DEDUCTIBLE (Per Occurrence) \$5000

COVERAGE AND PREMIUM INFORMATION

In case of loss we cover only that part of the loss which exceeds the deductible shown. We provide only those coverages and perils shown below as selected (✓). These are brief summary descriptions; please read the entire policy for details about coverages and covered perils. Please ask your broker for assistance if you wish to obtain information about any coverages you have not purchased.

COVERAGES, LIMITS, PERILS AND PREMIUMS

SELECTED COVERAGES		LIMITS	PERILS INSURED AGAINST	PREMIUMS
<input checked="" type="checkbox"/>	Building(s) <i>see Schedule attached</i>	\$ 930,000	<input checked="" type="checkbox"/> Fire, Lightning and Explosion	\$ 5,190
<input checked="" type="checkbox"/>	Business Personal Property	\$ 120,000	<input checked="" type="checkbox"/> Extended Coverages	\$ 898
<input type="checkbox"/>	Personal Property of Others	\$ 0	<input checked="" type="checkbox"/> Vandalism	INCLUDED
<input checked="" type="checkbox"/>	Business Income and Extra Expense <small>25% Monthly Limitation</small>	\$ 150,000	<input type="checkbox"/> Sprinkler Leakage	EXCLUDED
<input checked="" type="checkbox"/>	Other Structures	\$ 100,000		
<input type="checkbox"/>	Improvements and Betterments	\$ 0	Total Base Premium	\$ 6,088
<input type="checkbox"/>	Replacement Cost	EXCLUDED	Brush/Wildfire Area Charge	\$ 4,814
<input type="checkbox"/>	Yard	\$ 0	Total Annual Premium \$ 10,902	

THIS IS NOT A BILL

You will be sent a bill approximately 30 days prior to the renewal effective date or you may pay any time online at WWW.CFPNET.COM

GOLD RIDGE FOREST PROPERTY
 4101 OPAL TRL
 POLLOCK PINES, CA 95726

READ YOUR INSURANCE POLICY

Selecting the amount and type of insurance coverage appropriate for your needs is your responsibility.

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY

NUMBER	EDITION DATE	NAME
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CP0030	1/1993	Business Income Coverage Form (and Extra Expense)
CP 00 99	01/2005	Revised Commercial Property Form
IL 09 52 01 15	01/2015	Cap on Losses From Certified Acts of Terrorism
IL 09 85 01 15	01/2015	Disclosure Pursuant to Terrorism Risk Insurance Act

MORTGAGEE/LOSS PAYEES: Subject to the provisions of the loss payable clauses attached hereto, loss, if any, on dwelling (and other structures, if applicable) shall be payable to:

1st Mortgagee

2nd Mortgagee

THESE DECLARATIONS WITH FORMS AND ENDORSEMENTS LISTED ABOVE ARE YOUR INSURANCE POLICY

MESSAGE BOARD

- ✓ This policy is a contract between us and the Named Insured(s) and any loss payees identified on this Declarations Page. This policy does not provide coverage to any person or entity not named here.