





# ADDITIONAL REMARKS SCHEDULE

<b>AGENCY</b> Brown & Brown of Lehigh Valley, LP		<b>NAMED INSURED</b> Peachtree Village Condominium Association Inc	
<b>POLICY NUMBER</b> _____		<b>EFFECTIVE DATE:</b> _____	
<b>CARRIER</b> _____	<b>NAIC CODE</b> _____		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

**FORM NUMBER:** 25      **FORM TITLE:** Certificate of Liability Insurance: Notes

(A) Property: Policy, #CAU502298-2, eff. 10/01/23-10/01/24  
 The policy shows 72 units. Building Coverage is Guaranteed Replacement Cost with a \$5,000 deductible. A \$5,000 PER-UNIT ice damming deductible applies. Coverage is Guaranteed Replacement Cost, this definition means claims will be paid on a replacement cost basis, but the amount of insurance is unlimited. All ratable limits and valuations are handled by and unique to each carrier. The limit we can provide is \$XXX,XXX,XXX, but this is only what the insurance company is using to rate the policy, not an actual coverage limit. Property coverage is Original Specifications. Improvements or betterments completed after the original sale of the unit are NOT covered by the association. Policy is Special Form with no co-insurance. Includes Terrorism, Wind/Hail, and Equipment Breakdown. There is no inflation guard endorsement, it's not required by the association, and the limits are reviewed annually.

(A) Ordinance or Law:  
 Coverage A - Full Limit  
 Coverage B - \$500,000  
 Coverage C - \$500,000

(A) Crime/Fidelity: Policy, # CAU502298-2, eff. 10/01/23-10/01/24 , Employee Dishonesty limit \$150,000 ; \$0 retention. Policy covers volunteers & board members, or other paid personnel with access to the Association's funds.

(A) – Directors & Officers "Claims-Made" Policy, # CAU502298-2, eff. 10/01/23-10/01/24 , limit \$1,000,000 ; \$0 retention.  
 Property manager included as Additional Insured for General Liability, Crime, and D&O.  
 Policy includes Separation/Severability and Waiver of Subrogation on behalf of the unit owners.  
 Cancellation Notice to Named Insured only:  
 - Minimum 10 days before the cancellation date for nonpayment of premium; or  
 - Minimum 30 days before the cancellation date for any other reason