

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

AGENCY ADAMSON INSURANCE & ASSOCIATES INC
07-0409-00 MKT TERR 109 515-965-5552

INSURED THE CRAFTSMAN AT GREENVIEW CROSSING
OWNERS ASSOCIATION
C/O PROPERTY MANAGEMENT BY DESIGN
ADDRESS 2602 SW WESTWINDS BLVD

ANKENY IA 50023-9554

TAILORED PROTECTION POLICY DECLARATIONS

Reissue Effective 07-18-2025

POLICY NUMBER 242307-39298434-25

Company Use 39-23-IA-2407

Company
Bill

Policy Term	
12:01 a.m.	12:01 a.m.
07-18-2025	07-18-2026

55039 (11-87)

COMMON POLICY INFORMATION

Business Description: Townhome Association

Entity: Association

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PART(S):

COMMERCIAL GENERAL LIABILITY COVERAGE
MINIMUM PREMIUM ADJUSTMENT (GL)

PREMIUM

\$519.00
\$202.00

TOTAL

\$721.00

THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

Paid in Full Discount applies.

The Paid in Full Discount does not apply to fixed fees, statutory charges or minimum premiums.

Forms that apply to all coverage part(s) shown above (except garage liability, dealer's blanket, commercial automobile, if applicable):

55003 (07-12) 59390 (11-20)

A 02% Cumulative Multi-Policy Discount applies. Supporting policies are marked with an (X):

Comm Umb(X) Comm Auto() WC() Life() Personal() Farm().

Countersigned By: COMPANY ISSUED



Owners Ins. Co.

Issued 06-25-2025

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 07-0409-00 MKT TERR 109

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INSURED THE CRAFTSMAN AT GREENVIEW CROSSING

Term 07-18-2025 to 07-18-2026

55040 (11-87)

COMMERCIAL GENERAL LIABILITY COVERAGE

COVERAGE	LIMITS OF INSURANCE
Bodily Injury General Aggregate	\$4,000,000
Property Damage General Aggregate	\$4,000,000
Bodily Injury Products/Completed Operations Aggregate	\$4,000,000
Property Damage Products/Completed Operations Aggregate	\$4,000,000
Personal And Advertising Injury	\$2,000,000
Bodily Injury	\$2,000,000 Each Occurrence
Property Damage	\$2,000,000 Each Occurrence
Damage to Premises Rented to You (Fire Damage)	\$50,000 Any One Premises
Medical Payments	\$5,000 Any One Person
Assn Directors/Officers Errors and Omissions Agg	\$2,000,000
Assn Directors/Officers Errors and Omissions Occ	\$2,000,000

Twice the "General Aggregate Limit", shown above, is provided at no additional charge for each 12 month period in accordance with form 55885.

AUDIT TYPE: Non-Audited

Forms that apply to this coverage:

59350 (01-15)	55405 (07-08)	55146 (06-04)	CG2106 (05-14)	CG2109 (06-15)
55010 (05-17)	CG2002 (11-85)	IL0021 (07-02)	CG2648 (06-08)	59325 (12-19)
CG0001 (04-13)	IL0276 (06-89)	IL0017 (11-85)	55537 (05-17)	55513 (05-17)
55029 (05-17)	CG2132 (05-09)	CG2147 (12-07)	55885 (05-17)	55051 (05-17)
CG2011 (04-13)	59390 (11-20)			

LOCATION 0001 - BUILDING 0001

Location: 3721 Sw 61St St Ste A, Des Moines, IA 50321-2418

Territory: 001

County: Polk

CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Assn Directors/Officers Errors And Omissions	00811	Professional	Flat Charge 49		\$394.00
Clubs - Civic, Service Or Social - No Buildings Or Premises Owned Or Leased Except For Office Purposes (Not-For Profit)	41670	Prem/Op Prod/Comp Op	Members 49 49	Each 1 1.650 .276	\$81.00 \$14.00
Additional Interests	49950				
Managers/Lessors Of Premises					
1. Property Management		Prem/Op	Flat Charge		\$25.00

Owners Ins. Co.

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COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0001 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 55405, 59390	\$5.00
LOCATION 0001	\$519.00



