

Mid-Century Insurance Company (A Stock Company) Member Of The Farmers Insurance Group Of Companies®

Home Office: 6301 Owensmouth Ave., Woodland Hills, CA 91367

POLICY DECLARATIONS - CONDO/TOWNHOME PREMIER POLICY

| Named Insured Mailing Address | *SEE J7104 AMEND TO NAMED INS PO BOX 9073 | |
|--|---|-----------|
| Policy Nu | Number 06592-36-27 Auditable | |
| Policy Period | | ın above. |
| | rn for the payment of premium and subject to all the terms of this policy, we agree with you to provide i licy. We provide insurance only for those Coverages described and for which a specific limit of insurance is | |
| | lowing premium credits and discounts applied to the premium associated with this coverage part: | |
| There may b | may be other credits and discounts you may be able to enjoy, please contact your agent for full details. | |
| | | |
| | | |
| | | |

Your Agent Shaine Reece

Shaine Reece Ins Agency Inc 575 Sunset Blvd #102 Kalispell, MT 59901 (406) 752-9100

PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS

The following coverages apply to the described locations and/or building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level.

Option: BV - Blanket Value (see Base Coverage & Extensions for the total limit)

Valuation: ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;

ERC - Extended RC; FRC- Functional RC; GRC - Guaranteed RC

Abbreviation: ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

| | | | <u> </u> |
|--------------------|--------------|--|----------------------------|
| Premises Number | Bldg. No. | Covered Premises Address | Mortgagee Name And Address |
| 001 | All | 109 Fairway Blvd Kalispell, MT 59901-2759 | |

| Coverage | | Valuation | Limit Of Insurance | Deductible/ Waiting Period | |
|---|--|-----------|----------------------|-------------------------------|--|
| Building | | ERC | \$36,395,508 | \$5,000 | |
| Accounts Receivables - On-Premises | | | \$5,000 | \$5,000 | |
| Building - Automatic Increase Amount | | | 2% | | |
| Building Ordinance Or Law - 1 (Undamaged Part) | | | Included | None | |
| Building Ordinance Or Law - 2 (Demolition Cost) | | | \$857,500 | None | |
| Building Ordinance Or Law - 3 (Increased Cost) | | | \$857,405 | None | |
| Building Ordinance Or Law - Increased Period of Restoration | | | Included | None | |
| Cosmetic Damage Exclusion | | | | | |
| Debris Removal | | | 25% Of Loss + 10,000 | | |
| Electronic Data Processing Equipment | | | \$10,000 | \$5,000 | |
| Equipment Breakdown | | | Included | \$5,000 | |
| Equipment Breakdown - Ammonia Contamination | | | \$25,000 | | |
| Equipment Breakdown - Drying Out Coverage | | | Included | | |
| Equipment Breakdown - Expediting Expenses | | | Included | | |
| Equipment Breakdown - Hazardous Substances | | | \$25,000 | | |
| Equipment Breakdown - Water Damage | | | \$25,000 | | |
| Exterior Building Glass | | | Included | \$100 | |
| Glass Deductible Buyback | | | Included | | |
| Outdoor Property | | | \$50,000 | \$5,000 | |
| Outdoor Property - Trees, Shrubs & Plants (Per Item) | | | \$25,000 | \$5,000 | |
| Personal Effects | | | \$2,500 | \$5,000 | |
| Specified Property | | | \$10,000 | \$5,000 | |
| Valuable Paper And Records - On-Premises | | | \$5,000 | \$5,000 | |
| Windstorm Or Hail Percentage/Fixed Dollar Deductible | | | | 5% Of Limit | |
| Applies separately to: | | | | | |
| a. Each building that sustains loss or damage; | | | | | |
| b. Business Personal Property at each building that | | | | | |

PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS

The following coverages apply to the described locations and/or building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level.

Option: BV - Blanket Value (see Base Coverage & Extensions for the total limit)

Valuation: ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;

ERC - Extended RC; FRC- Functional RC; GRC - Guaranteed RC

Abbreviation: ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

| Premises Number | Bldg. No. | Covered Premises Address | Mortgagee Name And Address |
|--------------------|--------------|--|----------------------------|
| 001 | All | 109 Fairway Blvd Kalispell, MT 59901-2759 | |

| | 1 | | | | | |
|---------|------------------------------|-----------------------------|--------|-----------|--------------------|-------------------------------|
| | | Coverage | Option | Valuation | Limit Of Insurance | Deductible/ Waiting Period |
| | sustains loss or damage; and | | | | | |
| c. Busi | ness Pers | sonal Property in the open. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

PROPERTY, INLAND MARINE AND CRIME COVERAGE AND LIMITS OF INSURANCE

The following Coverages and Extensions apply to all covered locations (premises) and/or buildings. Please refer to the individual location (premises) section for coverages and limits specific to such location (premises).

| Base Coverage And Extensions | Limit of Insurance | Deductible/ Waiting Period |
|--|--------------------|-------------------------------|
| Accounts Receivables - Off-Premises | \$2,500 | \$5,000 |
| Association Fees And Extra Expense | \$100,000 | |
| Back Up Of Sewers Or Drains | \$10,000 | \$5,000 |
| Crime Conviction Reward | \$5,000 | None |
| Drone Aircraft - Direct Damage (per occurrence) | \$10,000 | \$5,000 |
| Drone Aircraft - Direct Damage (per item) | \$2,500 | \$5,000 |
| Employee Dishonesty | \$50,000 | \$1,000 |
| Fire Department Service Charge | \$25,000 | None |
| Fire Extinguisher Systems Recharge Expense | \$5,000 | None |
| Forgery And Alteration | \$2,500 | \$5,000 |
| Limited Biohazardous Substance Coverage - Per Occurrence | \$10,000 | \$5,000 |
| Limited Biohazardous Substance Coverage - Aggregate | \$20,000 | \$5,000 |
| Limited Cov Fungi Wet Rot Dry Rot & Bacteria - Aggregate | \$15,000 | \$5,000 |
| Master Key | \$10,000 | None |
| Master Key - Per Lock | \$100 | None |
| Money And Securities - Inside Premises | \$10,000 | \$500 |
| Money And Securities - Outside Premises | \$10,000 | \$500 |
| Money Orders And Counterfeit Paper Currency | \$1,000 | \$5,000 |
| Newly Acquired Or Constructed Property | \$250,000 | \$5,000 |
| Outdoor Signs | \$50,000 | \$500 |
| Outdoor Signs - Per Sign | \$25,000 | \$500 |
| Personal Property At Newly Acquired Premises | \$100,000 | \$5,000 |
| Personal Property Off Premises | \$5,000 | \$5,000 |
| Premises Boundary | 100 Feet | ψο,οσο |
| Preservation Of Property | 30 Days | |
| Unit Owners - Included With Building | Included | \$5,000 |
| Valuable Paper And Records - Off-Premises | \$2,500 | \$5,000 |
| Valuable rapel And Necolds - Off-Fremises | φ2,300 | φ3,000 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

LIABILITY AND MEDICAL EXPENSES COVERAGE AND LIMITS OF INSURANCE

Each paid claim for the following coverage reduces the amount of insurance we provide during the applicable policy period. Please refer to the policy.

Premium Basis: (A) Area; (C) Total Cost; (P) Payroll; (S) Sales/Receipts; (U) Each Unit

(M) Public Area Square Feet

(O) Other:

Covered Premises And Operations

| Classification / Exposure | Class Code | Prem. Basis | Annual Exposure | Rate | Advance Premium |
|---------------------------|---------------|----------------|--------------------|---|---------------------|
| Condominiums / Townhomes | | I | Included | Included | Included |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | Code | Code Basis | Classification / Exposure Code Basis Exposure | Code Basis Exposure |

LIABILITY AND MEDICAL EXPENSES COVERAGE AND LIMITS OF INSURANCE CONTINUED Amount /Date Coverage General Aggregate (Other Than Products & Completed Operations) \$2,000,000 Products And Completed Operations Aggregate \$1,000,000 Personal And Advertising Injury Included Each Occurrence \$1,000,000 Tenants Liability (Each Occurrence) \$75,000 Medical Expense (Each Person) \$5,000 Pollution Exclusion - Hostile Fire Exception Included Directors & Officers Liability - Per Claim \$1,000,000 Directors & Officers Liability - Aggregate Directors & Officers Liability Retroactive Date \$1,000,000 12/01/1998 Hired Auto Liability \$1,000,000 Non-Owned Auto Liability \$1,000,000

Policy Forms And Endorsements Attached At Inception

| Number | Title |
|-------------------------|--|
| 25-2110 | Notice - No Workers' Compensation Covg |
| 25 - 6626ED1 | PHN - Montana Defense Costs |
| 25-6628ED1 | Important Information About Your Renewal |
| 25-8293ED1 | MT Notice - Condo Policy Provisions |
| 25-9200ED3 | Farmers Privacy Notice |
| 56-5166ED5 | Addl Conditions - Reciprocal Provisions |
| E0104-ED1 | Business Liab Covg - Tenants Liability |
| E0119-ED5 | Back Up Of Sewers And Overflow Of Drains |
| E0125-ED1 | Lead Poisoning And Contamination Excl |
| E0147-ED1 | War Liability Exclusion |
| E0224-ED3 | Wind/Hail Percentage Ded |
| E2038-ED3 | Conditional Exclusion Of Terrorism |
| E3015-ED2 | Calculation Of Premium |
| E3024-ED3 | Condominium Common Policy Conditions |
| E3037-ED1 | No Covg-Certain Computer Related Losses |
| E3314-ED3 | Condominium Liability Coverage Form |
| E3336-ED2 | Hired Auto And Non-Owned Auto Liability |
| E3418-ED2 | Condo Assoc Unit Covg End |
| E3422 - ED3 | Condominium Property Coverage Form |
| E4009-ED4 | Mold And Microorganism Exclusion |
| E6288-ED3 | Exclusion - Conversion Projects |
| E9122-ED6 | D & O Liability Covg - Condos & Co-Ops |
| J6300-ED3 | Disclosure - Terrorism Risk Ins Act |
| J6316-ED2 | Excl Of Loss Due To Virus Or Bacteria |
| J6350-ED1 | Employee Dishonesty - Property Manager |
| J6351-ED2 | Limited Terrorism Exclusion |
| J6353-ED1 | Change To Limits Of Insurance |
| J6612-ED2 | Equipment Breakdown Coverage Endorsement |
| J6739-ED1 | Two Or More Coverage Forms |
| J6829-ED1 | Limited Coverage For Fungi And Bacteria |
| J6833-ED2 | Condominium Premier Package End |
| J6849-ED2 | Deductible Provisions |
| J7110-ED2 | Exclusion Confidential Info |
| J7114-ED1 | Removal Of Asbestos Exclusion |
| J7122-ED2 | Loss Payment - Profit, Overhead & Fees |
| J7131-ED1 | Dishonesty Excl-Tenant Vandal Excp |
| J7133-ED1 | Limited Biohazardous Substance Cov |
| J7136-ED1 | Pollution Exclusion - Expanded Exception |
| J7139-ED1 | Bus Inc & Extra Exp - Partial Slowdown |
| J7144-ED1 | Amendment Of Pers & Advertising Inj Covg |
| J7158-ED1 | Damage To Property Exclusion Revised |

Policy Forms And Endorsements Attached At Inception

| Number | Title |
|-----------|--|
| J7183-ED1 | Limitation - Designated Premises/Project |
| J7222-ED1 | Marijuana Exclusion |
| J7228-ED1 | Drone Aircraft Coverage |
| J7230-ED1 | Supplementary Payments |
| J7234-ED1 | Addl Insd-Mortg, Assignee Or Receiver |
| J7240-ED1 | Owners, lessees, cont-Construction |
| J7493-ED1 | Windstorm & Hail Loss Cond Endorsement |
| J7507-ED1 | Cyber Incident Exclusion |
| J7541-ED1 | Broad Abuse Or Molestation Exclusion |
| J7544-ED1 | Cyber Incident Liability Exclusion |
| J7545-ED1 | Exclusion - Violation Of Laws |
| J7546-ED1 | Exclusion PFAS |
| S7025-ED4 | Montana Chgs-D & O Liab |
| S7028-ED4 | Montana Changes |
| S7044-ED1 | MT Cosmetic Damage Exclusion Endorsement |
| S7045-ED1 | MT Changes - Defense Costs |
| S7051-ED1 | Amending Membership Or Fee Provisions |
| | |
| | |