



Peachtree Special Risk Brokers, LLC

Peachtree Special Risk Brokers, LLC
970 Lake Carillon Drive, Suite 106
St. Petersburg, FL 33716
(727)299-1140 Fax: (727)299-1141
Wholesale Insurance Brokers

DATE: 04/13/2026

TO: Dave Turgeon
King Risk Partners LLC - Gainesville
643 SW 4th Ave
Ste 210
Gainesville, FL 32601

Agency Code: 91252

FROM: Trina Millsap for Don Yuhasz
TMillsap@bridgespecialty.com

RE: Village at Haile Condominium Association Inc, The
Renewal of Policy #: CAT1000640-00

Renewal Date: 05/03/26

TIV xs \$5M WIND ONLY QUOTE

We are pleased to offer the following quotation. Please review this quotation carefully, as the terms and conditions offered may be different than requested. **PROPERTY DISCLAIMER: Client ultimately selects insured values.** You must contact us in writing to bind coverage, as your office holds no binding authority.

Policy Term: 05/03/2026 - 05/03/2027

Quotation Premium

Excluding TRIA Premium:	\$19,545.00	Including TRIA Premium:	\$19,545.00
FL SL Tax(4.94%)	\$965.52	TRIA:	\$602.00
Stamping Fee(0.06%)	\$11.73	FL SL Tax(4.94%)	\$995.26
Total:	\$20,522.25	Stamping Fee(0.06%)	\$12.09
		Total:	\$21,154.35

Peachtree Special Risk Brokers, LLC is responsible for collecting and filing the Surplus Lines taxes.

Commission: 12 %

Minimum Earned Percentage: 25.00 %; ***Subject to the Carrier(s) Minimum Earned Premium Clause/Endorsement.**

Note: Fees are fully earned

Policy Type: Occurrence

Carrier(s):

Fortegra Specialty Insurance Company Non-Admitted

Please be sure to check the Carrier's current A.M. Best rating to satisfy you and your client's interests.

Locations: Per Schedule on file with the Company.

Endorsements/Exclusions: (Standard Company or ISO Exclusions are applicable including, but not limited to the following terms, conditions and exclusions. The state specific forms vary per state and may not be listed on this proposal. It is your responsibility as agent of the insured to check coverage and terms.)

- Please see attached Company Quotation for Endorsements and Exclusions.

Terms and Conditions:

- Standard Company or ISO Exclusions are applicable including, but not limited to the attached terms, conditions and exclusions as noted on the Carrier quote attached. The state specific forms vary per state and may not be listed. Carrier, State, and/or ISO forms are available upon request.
- If there are terms/conditions that are inconsistent with the coverage bound, please note that your binder/policy prevails and any changes to terms/conditions, etc. must be made by endorsement request and are subject to carrier approval.
- The company(ies) reserves the right to inspect the locations to develop information necessary to adequately underwrite your business. When conducting these surveys recommendations may be delivered to the insured. Compliance with the recommendations is mandatory and must be completed within the time period stated. Notice of Cancellation will be issued if compliance is not met within the allotted time frame.
- NOC: Thirty (30) Days, Except Ten (10) Days Notice for Non-Payment of Premium. Subject to State Requirements.

Binding Subjectivities: (As Applicable)

Signed Applications (due at binding):

- ACORD Apps (Signed by both Insured & Producer) – As Applicable
- TRIA Form (as applicable)
- Supp App(s) (as applicable)
- SOV - Terms are based on the attached SOV. It is your responsibility to review this SOV for accuracy and notify us immediately if there are any discrepancies. Any changes may affect the terms and pricing offered. PROPERTY DISCLAIMER: Client ultimately selects insured values.

State Tax documents (as applicable)

Carrier Subjectivities – as noted on the Carrier Quote attached

Please Send The Above Items To: Trina Millsap - tmillsap@bridgespecialty.com

If PSR has not received a response from you by the expiration date of this quote, we will consider this quotation closed. All requests to bind coverage must be received in our office in writing. Coverage cannot be backdated or presumed to be bound without confirmation from an authorized representative of PSR. Please advise your client that the policy dictates the actual terms of coverage and in the event of differences, the policy prevails.

Thank you for this opportunity!

Best Regards,

Don Yuhasz



Quote: **FLWX3116435**

Presenting your very own ICAT quote

A policy from ICAT is more than a piece of paper - it's a promise backed by some of the world's highest-rated insurers.

Wind Only as defined in the primary policy

Excluded Perils: All perils not listed above

Named Insured

The Village at Haile Condominium Association, Inc

Mailing address is required at time of bind request

Policy Limits of Insurance

**\$15,577,833 excess of \$5,000,000
underlying limit of insurance.**

Coverage provided by one or more of the following carriers. All of which maintain a AM Best Rating of at least A- (VII).

Fortegra Specialty Insurance Company

Premium

\$19,545.00

Insurer Policy Fee

\$0.00

TRIA

Available for an additional premium of \$602

Your Coverages, Limits and Deductibles as they apply

Primary Policy Deductibles				
These deductibles align with the Primary Policy's details. These deductibles are not applied again at the Excess coverage level.				
5% Named Storm Deductible by building*, minimum of \$1,000				
1% All Other Wind & Hail Deductible by building*, minimum of \$1,000				
*Additional Property Coverage Deductible is by location, by line of coverage. Deductible varies by cause of loss				
	Coverage Type	Stated Values	Named Storm Deductible	All Other Wind and Hail Deductible
Location 1:				
Location 1, Building 1: 5201 SW 91st Dr, Gainesville, FL 32608	Building	\$528,901	5% (\$26,445)	1% (\$5,289)
Location 1, Building 2: 9177 SW 52nd Ave, BLDG E, Gainesville, FL 32608	Building	\$834,591	5% (\$41,730)	1% (\$8,346)
Location 1, Building 3: 9172 SW 52nd Rd, BLDG F, Gainesville, FL 32608	Building	\$984,803	5% (\$49,240)	1% (\$9,848)
Location 1, Building 4: 5133 SW 91 Ct, BLDG G, Gainesville, FL 32608	Building	\$1,380,000	5% (\$69,000)	1% (\$13,800)
Location 1, Building 5: 5025 SW 91 Ct, BLDG H, Gainesville, FL 32608	Building	\$1,464,946	5% (\$73,247)	1% (\$14,649)
Location 1, Building 6: 5141 SW 91st Way, BLDG I, Gainesville, FL 32608	Building	\$1,464,946	5% (\$73,247)	1% (\$14,649)
Location 1, Building 7: 9158 SW 51st Rd, BLDG J, Gainesville, FL 32608	Building	\$1,026,000	5% (\$51,300)	1% (\$10,260)
Location 1, Building 8: 5040 SW 91st Terrace, BLDG K, Gainesville, FL 32608	Building	\$822,463	5% (\$41,123)	1% (\$8,225)
Location 1, Building 9: 9149 SW 49th Pl, BLDG L, Gainesville, FL 32608	Building	\$822,463	5% (\$41,123)	1% (\$8,225)
Location 1, Building 10: 5318 SW 91st Terrace, Gainesville, FL 32608	Building	\$539,464	5% (\$26,973)	1% (\$5,395)

Your Coverages, Limits and Deductibles as they apply

continued

	Coverage Type	Stated Values	Named Storm Deductible	All Other Wind and Hail Deductible
Location 1, Building 11: 5218 SW 91st Dr, Gainesville, FL 32608	Building	\$539,814	5% (\$26,991)	1% (\$5,398)
Location 1, Building 12: 5212 SW 91st Terrace, Gainesville, FL 32608	Building	\$493,437	5% (\$24,672)	1% (\$4,934)
Location 1, Building 13: 9150 SW 49th Pl, Gainesville, FL 32608	Building	\$1,083,000	5% (\$54,150)	1% (\$10,830)
Location 1, Building 14: 5213 SW 91st Dr, Gainesville, FL 32608	Building	\$457,502	5% (\$22,875)	1% (\$4,575)
Location 1, Building 15: 5206 SW 91st Terrace, Gainesville, FL 32608	Building	\$523,299	5% (\$26,165)	1% (\$5,233)
Location 1, Building 16: 5030 SW 91 Ct, Gainesville, FL 32608	Building	\$361,107	5% (\$19,142)	1% (\$3,828)
	BPP	\$21,742		
Location 1, Building 17: 5323 SW 91st Terrace, BAKERY, Gainesville, FL 32608	Building	\$742,233	5% (\$37,112)	1% (\$7,422)
Location 1, Building 18: 9127 SW 52nd Ave, BLDG D, Gainesville, FL 32608	Building	\$1,154,331	5% (\$57,717)	1% (\$11,543)
Location 1, Building 19: 9124 SW 51st Rd, BLDG B, Gainesville, FL 32608	Building	\$1,154,331	5% (\$57,717)	1% (\$11,543)
Location 1, Building 20: 9119 SW 52nd Ave, BLDG C, Gainesville, FL 32608	Building	\$1,154,331	5% (\$57,717)	1% (\$11,543)
Location 1, Building 21: 5347 SW 91st Terrace, Gainesville, FL 32608	Building	\$333,794	5% (\$16,690)	1% (\$3,338)
Location 1, Building 22: 5341 SW 91st Terrace, MEDICAL OFFICE, Gainesville, FL 32608	Building	\$597,360	5% (\$29,868)	1% (\$5,974)
Location 1, Building 23: 5330 SW 91st Terrace, PET BAKERY, Gainesville, FL 32608	Building	\$250,877	5% (\$12,544)	1% (\$2,509)

Your Coverages, Limits and Deductibles as they apply

continued

	Coverage Type	Stated Values	Named Storm Deductible	All Other Wind and Hail Deductible
Location 1, Building 24: 5300 SW 91st Terrace, Gainesville, FL 32608	Building	\$539,167	5% (\$26,958)	1% (\$5,392)
Location 1, Building 25: 9116 SW RD, BLDG A, Gainesville, FL 32608	Building	\$1,154,331	5% (\$57,717)	1% (\$11,543)
Location 1	Additional Property Coverages		5% (\$7,430)	1% (\$1,486)
	Pools and Waterfalls	\$148,600		
Total Insured Value		\$20,577,833		
Stated Values = Values submitted for each line of coverage BPP = Business Personal Property/Tenants Improvements and Betterments BI/EE = Business Income/Extra Expense/Rental Value APC = Additional Property Coverage				

Coverage not selected for the following APCs

- Awnings and Canopies
 - Boardwalks, Catwalks, Decks, Trestles and Bridges
 - Carports
 - Driveways, Courts, Pads and Paved Surfaces
 - Fences, Property Line Walls, Lattice Work and Trellis
 - Fountains, Statuary, Monuments or Tombstones
 - Light Poles and Unattached Signs
- Machinery and Equipment in the Open
 - Other Structures - Fully Enclosed
 - Other Structures - Open or Not Fully Enclosed
 - Playground Equipment
 - Satellite Dishes
 - Underground Utilities

Standard Coverage ✓

Coinsurance	Waived
Coverage Basis	Replacement Cost
Preservation of Property	30 Days

Selected Endorsements ✓

Wind-Driven Rain	\$10,000, as per the Primary Policy's Details
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Additional Coverages Available for Purchase Ø

Earthquake	Not selected
Ordinance or Law	Not selected
Terrorism	Not selected

Terms & Conditions

This quote has been issued by International Catastrophe Insurance Managers, LLC (ICAT) as authorized by the insurer identified herein or elsewhere. ICAT is the insurer's agent with regard to this quote and any subsequently issued policy; ICAT is not an agent or broker of any insured or prospective insured.

Warranty

- The information provided to ICAT is true, complete and correct, and no material facts have been omitted or misstated.
- There is no damage to the property identified on this Quote, and all such property is in good condition or repair.

Terms

- All insurers are non-admitted.
- Flood coverage is excluded.
- THIS QUOTE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF ANY INSOLVENT UNLICENSED INSURER.

Conditions

- Fees are fully earned

- Insurer participation may change at the time of binding.
- All bound risks will be inspected when originally bound and may be inspected upon renewal. Any bound risks which do not meet underwriting guidelines, or which differ from the information submitted to ICAT may be subject to increased premium or cancellation.
- For AOP: owner must have 1 year at current location or 3 years ownership experience; franchises are acceptable as new ventures; no bars, taverns, nightclubs; cooking equipment must be protected and up-to-code; deep fryer auto-temp shut off required
- It is a condition of this coverage that the Primary Policy be maintained in full force and effect. Excess coverage automatically terminates if the Primary Policy is cancelled or terminated for any reason.
- Coverage will be subject to all of the terms, conditions and limitations of the Primary Carrier's Policy Form, as reviewed and approved by ICAT. In the event ICAT has not received the Primary Carrier's Primary Policy Form within 30 days after the effective date or ICAT does not approve the Primary Carrier's Primary Policy, coverage will be placed on Notice of Cancellation.
- This quote is subject to the Primary Carrier's Minimum Earned Premium and Cancellation Provisions. Wind Season Cancellation Provisions may apply as defined by the Primary Carrier.
- ICAT's Underlying Quote must be accepted and bound.

Exclusions

- Subject to all exclusions within the Primary Policy.
- Risks located on the National Historic Registry are not eligible for coverage.

Subject To

- Primary Binder is required at time of bind.

Location 1, Building 1 Details

5201 SW 91st Dr, Gainesville, FL 32608

Construction Type: Joisted Masonry	Year Roof Last Replaced: 2023
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 1996	Protection Class: 3
Total Square Footage: 3,356	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Steel or Metal	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 2 Details

9177 SW 52nd Ave, BLDG E, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 2,415	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 3 Details

9172 SW 52nd Rd, BLDG F, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 2,415	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 4 Details

5133 SW 91 Ct, BLDG G, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2006	Protection Class: 3
Total Square Footage: 2,469	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 5 Details

5025 SW 91 Ct, BLDG H, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 2,469	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 6 Details

5141 SW 91st Way, BLDG I, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 7,872	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 7 Details

9158 SW 51st Rd, BLDG J, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 10,260	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 8 Details

5040 SW 91st Terrace, BLDG K, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 7,872	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 9 Details

9149 SW 49th Pl, BLDG L, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 7,872	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 10 Details

5318 SW 91st Terrace, Gainesville, FL 32608

Construction Type: Joisted Masonry	Year Roof Last Replaced: 2019
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 4,022	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 11 Details

5218 SW 91st Dr, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 2	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 4,022	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 12 Details

5212 SW 91st Terrace, Gainesville, FL 32608

Construction Type: Joisted Masonry	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,312	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: A
Roof Shape: Gable	

Location 1, Building 13 Details

9150 SW 49th Pl, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2020
Exterior Cladding: Other	Security: Poor
Number of Stories: 2	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 10,830	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 14 Details

5213 SW 91st Dr, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 2,900	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 15 Details

5206 SW 91st Terrace, Gainesville, FL 32608

Construction Type: Joisted Masonry	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,744	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 16 Details

5030 SW 91 Ct, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 2,660	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 17 Details

5323 SW 91st Terrace, BAKERY, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2014
Exterior Cladding: Wood or Vinyl Cladding	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,120	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Steel or Metal	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 18 Details

9127 SW 52nd Ave, BLDG D, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,279	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 19 Details

9124 SW 51st Rd, BLDG B, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,279	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 20 Details

9119 SW 52nd Ave, BLDG C, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2022
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,279	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 82.02 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 21 Details

5347 SW 91st Terrace, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2019
Exterior Cladding: Other	Security: Poor
Number of Stories: 2	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 1,650	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 22 Details

5341 SW 91st Terrace, MEDICAL OFFICE, Gainesville, FL 32608

Construction Type: Joisted Masonry	Year Roof Last Replaced: 2016
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,190	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Health Care Services	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 23 Details

5330 SW 91st Terrace, PET BAKERY, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 1	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 936	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Restaurant	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

Location 1, Building 24 Details

5300 SW 91st Terrace, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2014
Exterior Cladding: Other	Security: Poor
Number of Stories: 1	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,120	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 39.39 Miles
Secondary Occupancy: None	Elevation: 86.94 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Gable	

Location 1, Building 25 Details

9116 SW RD, BLDG A, Gainesville, FL 32608

Construction Type: Wood Frame	Year Roof Last Replaced: 2024
Exterior Cladding: Other	Security: Poor
Number of Stories: 3	Fire Protection: Poor
Year of Construction: 2003	Protection Class: 3
Total Square Footage: 3,495	Wind Resistive: No
Soft Story Characteristics: No	Soil Type: Soft Rock to Stiff Soil
More than 31% Occupied?: Yes	Liquefaction Value: Very Low
Primary Occupancy: Condominium/Townhouse Association - Condominium/Townhouse	Distance to Coast: 41.24 Miles
Secondary Occupancy: None	Elevation: 98.42 Feet
Roof Cladding: Asphalt Shingles	Flood Zone: X
Roof Shape: Hip	

FOR QUOTE **FLWX3116435** THE APPLICANT REPRESENTS THAT THE STATEMENTS AND FACTS ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

Applicant Signature:

Date:

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act as amended, you have a right to purchase insurance coverage for losses resulting from acts of terrorism. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are 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 an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; 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 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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 80% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS STATED ABOVE AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU ALSO SHOULD KNOW THAT THE TERRORISM RISK INSURANCE ACT AS AMENDED CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

Finally, the Terrorism Risk Insurance Act as amended (TRIA) is scheduled to expire on December 31, 2027. Accordingly, if you choose to accept the coverage offered herein for losses resulting from certified acts of terrorism, please note the following:

- **In the event that legislation IS NOT** passed into law extending TRIA beyond December 31, 2027, such coverage shall expire at midnight December 31, 2027, or on the termination date of the policy, whichever occurs first, and the policy shall not cover any losses or events which arise after the earlier of these dates.
 - **In the event that legislation IS** passed into law extending TRIA beyond December 31, 2027, such coverage shall expire when coverage under the policy terminates, but any coverage provided under the policy after December 31, 2027, shall be subject to all of the terms and limitations of the law extending TRIA.
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COMMERCIAL INSURANCE APPLICATION

APPLICANT INFORMATION SECTION

DATE (MM/DD/YYYY)
04/17/2026

AGENCY King Risk Partners, LLC 643 SW 4th Suite 210 Gainesville FL 32601		CARRIER Fortegra Specialty Insurance Company		NAIC CODE
		COMPANY POLICY OR PROGRAM NAME		PROGRAM CODE
		POLICY NUMBER CAT1000640-00		
CONTACT NAME: Melinda Robertson PHONE (A/C, No, Ext): (352) 377-0420 FAX (A/C, No): E-MAIL ADDRESS: melinda.robertson@king-insurance.com CODE: SUBCODE: AGENCY CUSTOMER ID: 00293126		UNDERWRITER		UNDERWRITER OFFICE
		STATUS OF TRANSACTION	☐ QUOTE	☐ ISSUE POLICY ☒ RENEW
			BOUND (Give Date and/or Attach Copy):	
			☐ CHANGE	☐ DATE
			☐ CANCEL	05/03/2026
			☐ TIME	☒ AM
				☐ PM

Lines of Business

INDICATE LINES OF BUSINESS	PREMIUM			PREMIUM			PREMIUM
☐ BOILER & MACHINERY	\$			☐ CYBER AND PRIVACY	\$		
☐ BUSINESS AUTO	\$			☐ FIDUCIARY LIABILITY	\$		
☐ BUSINESS OWNERS	\$			☐ GARAGE AND DEALERS	\$		
☐ COMMERCIAL GENERAL LIABILITY	\$			☐ LIQUOR LIABILITY	\$		
☐ COMMERCIAL INLAND MARINE	\$			☐ MOTOR CARRIER	\$		
☒ COMMERCIAL PROPERTY	\$ 20,522.25			☐ TRUCKERS	\$		
☐ CRIME	\$			☐ UMBRELLA	\$		

Attachments

☐ ACCOUNTS RECEIVABLE / VALUABLE PAPERS	☐ GLASS AND SIGN SECTION	☐ STATEMENT / SCHEDULE OF VALUES
☐ ADDITIONAL INTEREST SCHEDULE	☐ HOTEL / MOTEL SUPPLEMENT	☐ STATE SUPPLEMENT (If applicable)
☐ ADDITIONAL PREMISES INFORMATION SCHEDULE	☐ INSTALLATION / BUILDERS RISK SECTION	☐ VACANT BUILDING SUPPLEMENT
☐ APARTMENT BUILDING SUPPLEMENT	☐ INTERNATIONAL LIABILITY EXPOSURE SUPPLEMENT	☐ VEHICLE SCHEDULE
☐ CONDO ASSN BYLAWS (for D&O Coverage only)	☐ INTERNATIONAL PROPERTY EXPOSURE SUPPLEMENT	
☐ CONTRACTORS SUPPLEMENT	☐ LOSS SUMMARY	
☐ COVERAGES SCHEDULE	☐ OPEN CARGO SECTION	
☐ DEALERS SECTION	☐ PREMIUM PAYMENT SUPPLEMENT	
☐ DRIVER INFORMATION SCHEDULE	☐ PROFESSIONAL LIABILITY SUPPLEMENT	
☐ ELECTRONIC DATA PROCESSING SECTION	☐ RESTAURANT / TAVERN SUPPLEMENT	

Policy Information

PROPOSED EFF DATE 05/03/2026	PROPOSED EXP DATE 05/03/2027	BILLING PLAN ☐ DIRECT ☒ AGENCY	PAYMENT PLAN	METHOD OF PAYMENT	AUDIT	DEPOSIT \$	MINIMUM PREMIUM \$	POLICY PREMIUM \$ 20,522.25
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Applicant Information

NAME (First Named Insured) AND MAILING ADDRESS (including ZIP+4) The Village at Haile Condominium Association, Inc. 5201 SW 91st Dr Gainesville FL 32608		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #:			
		WEBSITE ADDRESS			
☐ CORPORATION	☐ JOINT VENTURE	☐ NOT FOR PROFIT ORG	☐ SUBCHAPTER "S" CORPORATION		
☐ INDIVIDUAL	☐ LLC NO. OF MEMBERS AND MANAGERS: _____	☐ PARTNERSHIP	☐ TRUST		
NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #:			
		WEBSITE ADDRESS			
☐ CORPORATION	☐ JOINT VENTURE	☐ NOT FOR PROFIT ORG	☐ SUBCHAPTER "S" CORPORATION		
☐ INDIVIDUAL	☐ LLC NO. OF MEMBERS AND MANAGERS: _____	☐ PARTNERSHIP	☐ TRUST		
NAME (Other Named Insured) AND MAILING ADDRESS (including ZIP+4)		GL CODE	SIC	NAICS	FEIN OR SOC SEC #
		BUSINESS PHONE #:			
		WEBSITE ADDRESS			
☐ CORPORATION	☐ JOINT VENTURE	☐ NOT FOR PROFIT ORG	☐ SUBCHAPTER "S" CORPORATION		
☐ INDIVIDUAL	☐ LLC NO. OF MEMBERS AND MANAGERS: _____	☐ PARTNERSHIP	☐ TRUST		

CONTACT INFORMATION

AGENCY CUSTOMER ID: 00293126

CONTACT TYPE:				CONTACT TYPE:			
CONTACT NAME:				CONTACT NAME:			
PRIMARY PHONE # ☐ HOME ☐ BUS ☐ CELL		SECONDARY PHONE # ☐ HOME ☐ BUS ☐ CELL		PRIMARY PHONE # ☐ HOME ☐ BUS ☐ CELL		SECONDARY PHONE # ☐ HOME ☐ BUS ☐ CELL	
PRIMARY E-MAIL ADDRESS:				PRIMARY E-MAIL ADDRESS:			
SECONDARY E-MAIL ADDRESS:				SECONDARY E-MAIL ADDRESS:			

PREMISES INFORMATION (Attach ACORD 823 for Additional Premises)

LOC #	STREET	5201 SW 91st Dr	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
1			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville	STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP: 32608				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET	9177 SW 52nd Ave, Bldg E	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
2			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville	STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP: 32608				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET	9172 SW 52nd Rd, Bldg F	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
3			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville	STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP: 32608				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N
LOC #	STREET	5133 SW 91 Ct, Bldg G	CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
4			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville	STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP: 32608				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N

NATURE OF BUSINESS

☐	APARTMENTS	☐	CONTRACTOR	☐	MANUFACTURING	☐	RESTAURANT	☐	SERVICE	☐	DATE BUSINESS STARTED (MM/DD/YYYY)
☐	CONDOMINIUMS	☐	INSTITUTIONAL	☐	OFFICE	☐	RETAIL	☐	WHOLESALE	☐	

DESCRIPTION OF PRIMARY OPERATIONS

Residential / Commercial Condominium Association

RETAIL STORES OR SERVICE OPERATIONS % OF TOTAL SALES:	INSTALLATION, SERVICE OR REPAIR WORK %	OFF PREMISES INSTALLATION, SERVICE OR REPAIR WORK %
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DESCRIPTION OF OPERATIONS OF OTHER NAMED INSUREDS

ADDITIONAL INTEREST (Not all fields apply to all scenarios - provide only the necessary data) Attach ACORD 45 for more Additional Interests

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
☐ ADDITIONAL INSURED							LOCATION:	BUILDING:
☐ BREACH OF WARRANTY							VEHICLE:	BOAT:
☐ CO-OWNER							AIRPORT:	AIRCRAFT:
☐ EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
☐ LEASEBACK OWNER							ITEM DESCRIPTION	
☐ LENDER'S LOSS PAYABLE	REFERENCE / LOAN #:	INTEREST END DATE:						
☐ LIENHOLDER	LIEN AMOUNT:	PHONE (A/C, No, Ext):				FAX (A/C, No):		
☐ LOSS PAYEE	E-MAIL ADDRESS:							
☐ MORTGAGEE	REASON FOR INTEREST:							
☐ OWNER								
☐ REGISTRANT								
☐ TRUSTEE								

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES				Y / N
1a. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY ?				N
PARENT COMPANY NAME		RELATIONSHIP DESCRIPTION	% OWNED	
1b. DOES THE APPLICANT HAVE ANY SUBSIDIARIES?				N
SUBSIDIARY COMPANY NAME		RELATIONSHIP DESCRIPTION	% OWNED	
2. IS A FORMAL SAFETY PROGRAM IN OPERATION?				N
☐ SAFETY MANUAL	☐ SAFETY POSITION	☐ MONTHLY MEETINGS	☐ OSHA	☐
3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?				N
4. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy numbers)				N
LINE OF BUSINESS	POLICY NUMBER	LINE OF BUSINESS	POLICY NUMBER	
5. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR THREE (3) YEARS FOR ANY PREMISES OR OPERATIONS? (Missouri Applicants - Do not answer this question)				N
☐ NON-PAYMENT	☐ AGENT NO LONGER REPRESENTS CARRIER		☐	
☐ NON-RENEWAL	☐ UNDERWRITING	☐ CONDITION CORRECTED (Describe):		
6. ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING?				N
7. DURING THE LAST FIVE YEARS (TEN IN RI), HAS ANY APPLICANT BEEN INDICTED FOR OR CONVICTED OF ANY DEGREE OF THE CRIME OF FRAUD, BRIBERY, ARSON OR ANY OTHER ARSON-RELATED CRIME IN CONNECTION WITH THIS OR ANY OTHER PROPERTY? (In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment).				N
8. ANY UNCORRECTED FIRE AND/OR SAFETY CODE VIOLATIONS?				N
OCCUR DATE	EXPLANATION	RESOLUTION	RESOLVE DATE	
9. HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION, BANKRUPTCY OR FILED FOR BANKRUPTCY DURING THE LAST FIVE (5) YEARS?				N
OCCUR DATE	EXPLANATION	RESOLUTION	RESOLVE DATE	
10. HAS APPLICANT HAD A JUDGEMENT OR LIEN DURING THE LAST FIVE (5) YEARS?				N
OCCUR DATE	EXPLANATION	RESOLUTION	RESOLVE DATE	
11. HAS BUSINESS BEEN PLACED IN A TRUST? NAME OF TRUST:				N
12. ANY FOREIGN OPERATIONS, FOREIGN PRODUCTS DISTRIBUTED IN USA, OR US PRODUCTS SOLD / DISTRIBUTED IN FOREIGN COUNTRIES? (If "YES", attach ACORD 815 for Liability Exposure and/or ACORD 816 for Property Exposure)				N
13. DOES APPLICANT HAVE OTHER BUSINESS VENTURES FOR WHICH COVERAGE IS NOT REQUESTED?				N
14. DOES APPLICANT OWN / LEASE / OPERATE ANY DRONES? (If "YES", describe use)				N
15. DOES APPLICANT HIRE OTHERS TO OPERATE DRONES? (If "YES", describe use)				N

REMARKS / PROCESSING INSTRUCTIONS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**PRIOR CARRIER INFORMATION**

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				

PRIOR CARRIER INFORMATION (continued)

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				

LOSS HISTORY ☐ **Check if none (Attach Loss Summary for Additional Loss Information)**

ENTER ALL CLAIMS OR LOSSES (REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCCURRENCES THAT MAY GIVE RISE TO CLAIMS FOR THE LAST ____ YEARS

TOTAL LOSSES: \$

DATE OF OCCURRENCE	LINE	TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM	DATE OF CLAIM	AMOUNT PAID	AMOUNT RESERVED	SUBROGATION Y / N	CLAIM OPEN Y / N

SIGNATURE

Copy of the Notice of Information Practices (Privacy) has been given to the applicant. (Not required in all states, contact your agent or broker for your state's requirements.)

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT OR OTHER INVESTIGATIVE REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. CREDIT SCORING INFORMATION MAY BE USED TO HELP DETERMINE EITHER YOUR ELIGIBILITY FOR INSURANCE OR THE PREMIUM YOU WILL BE CHARGED. WE MAY USE A THIRD PARTY IN CONNECTION WITH THE DEVELOPMENT OF YOUR SCORE. YOU MAY HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND REQUEST CORRECTION OF ANY INACCURACIES. YOU MAY ALSO HAVE THE RIGHT TO REQUEST IN WRITING THAT WE CONSIDER EXTRAORDINARY LIFE CIRCUMSTANCES IN CONNECTION WITH THE DEVELOPMENT OF YOUR CREDIT SCORE. THESE RIGHTS MAY BE LIMITED IN SOME STATES. PLEASE CONTACT YOUR AGENT OR BROKER TO LEARN HOW THESE RIGHTS MAY APPLY IN YOUR STATE OR FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US FOR A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING PERSONAL INFORMATION. (Not applicable in AZ, CA, DE, KS, MA, MN, ND, NY, OR, VA, or WV. Specific ACORD 38s are available for applicants in these states.)

(Applicant's Initials): _____

Applicable in AL, AR, DC, LA, MD, NM, RI and WV: Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Dave Turgeon	STATE PRODUCER LICENSE NO (Required in Florida) P100362
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER



ADDITIONAL PREMISES INFORMATION SCHEDULE

AGENCY King Risk Partners, LLC		CARRIER Fortegra Specialty Insurance Company		NAIC CODE
POLICY NUMBER CAT1000640-00	EFFECTIVE DATE 05/03/2026	NAMED INSURED(S) The Village at Haile Condominium Association, Inc.		

PREMISES INFORMATION

LOC # 5	STREET 5025 SW 91 Ct, Bldg H	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 6	STREET 5141 SW 91st Way, Bldg I	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 7	STREET 9158 SW 51st Rd, Bldg J	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 8	STREET 5040 SW 91st Terrace, Bldg K	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 9	STREET 9149 SW 49th Pl, Bldg L	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 10	STREET 5318 SW 91st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 11	STREET 5218 SW 91st Dr	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 12	STREET 5212 SW 91st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 13	STREET 9150 SW 49th Pl	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 14	STREET 5213 SW 91st Dr	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:



ADDITIONAL PREMISES INFORMATION SCHEDULE

AGENCY King Risk Partners, LLC			CARRIER Fortegra Specialty Insurance Company		NAIC CODE
POLICY NUMBER CAT1000640-00		EFFECTIVE DATE 05/03/2026	NAMED INSURED(S) The Village at Haile Condominium Association, Inc.		

PREMISES INFORMATION

LOC # 15	STREET 5206 SW 91st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 16	STREET 5030 SW 91 Ct	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 17	STREET 5323 SW 91st Terrace, Bakery	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 18	STREET 9127 SW 52nd Ave, Bldg D	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 19	STREET 9124 SW 51st Rd, Bldg B	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 20	STREET 9119 SW 52nd Ave, Bldg C	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 21	STREET 5347 SW 91st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 22	STREET 5341 SW 1st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 23	STREET 5330 SW 91st Terrace, Pet Bakery	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:
LOC # 24	STREET 5300 SW 91st Terrace	CITY LIMITS INSIDE	INTEREST OWNER	# FULL TIME EMPL	ANNUAL REVENUES: \$
BLD #	CITY: Gainesville STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OCCUPIED AREA: SQ FT
	COUNTY: ZIP: 32608				OPEN TO PUBLIC AREA: SQ FT
					TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:					ANY AREA LEASED TO OTHERS? Y / N:



ADDITIONAL PREMISES INFORMATION SCHEDULE

AGENCY King Risk Partners, LLC			CARRIER Fortegra Specialty Insurance Company		NAIC CODE
POLICY NUMBER CAT1000640-00		EFFECTIVE DATE 05/03/2026	NAMED INSURED(S) The Village at Haile Condominium Association, Inc.		

PREMISES INFORMATION

LOC #	STREET 9116 SW Rd, Bldg A		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
25			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville	STATE: FL	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP: 32608				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:
LOC #	STREET		CITY LIMITS	INTEREST	# FULL TIME EMPL	ANNUAL REVENUES: \$
			INSIDE	OWNER		OCCUPIED AREA: SQ FT
BLD #	CITY:	STATE:	OUTSIDE	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA: SQ FT
	COUNTY:	ZIP:				TOTAL BUILDING AREA: SQ FT
DESCRIPTION OF OPERATIONS:						ANY AREA LEASED TO OTHERS? Y / N:



AGENCY CUSTOMER ID: 00293126

PROPERTY SECTION

DATE (MM/DD/YYYY)

04/17/2026

AGENCY NAME King Risk Partners, LLC		CARRIER Fortegra Specialty Insurance Company		NAIC CODE
POLICY NUMBER CAT1000640-00	EFFECTIVE DATE 05/03/2026	NAMED INSURED(S) The Village at Haile Condominium Association, Inc.		

BLANKET SUMMARY

BLKT #	AMOUNT	TYPE	BLKT #	AMOUNT	TYPE

PREMISES INFORMATION

PREMISES #: 1 STREET ADDRESS: 5201 SW 91st Dr

BUILDING #: ALL BLDG DESCRIPTION:

SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	15,577,833		RC	Special form					NS Ded: 5% per Build/AO W/H 1% per Build

ADDITIONAL INFORMATION

BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810

VALUE REPORTING INFORMATION - Attach ACORD 811

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N) ☐	DESCRIPTION OF PROPERTY COVERED	LIMIT \$	REFRIG MAINT AGREEMENT (Y / N) ☐	OPTIONS ☐ BREAKDOWN OR CONTAMINATION
		DEDUCTIBLE \$		☐ POWER OUTAGE ☐ SELLING PRICE
SINKHOLE COVERAGE (Required in Florida)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK				# OF OPEN SIDES ON STRUCTURE: _____

CONSTRUCTION TYPE	DISTANCE TO HYDRANT FT	FIRE STAT MI	FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES	# BASMT'S	YR BUILT	TOTAL AREA	
BUILDING IMPROVEMENTS	BLDG CODE GRADE	TAX CODE	ROOF TYPE	OTHER OCCUPANCIES						
☐ WIRING, YR: ☐ PLUMBING, YR:	WIND CLASS		SEMI- RESISTIVE	HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT		DATE INSTALLED: _____				
☐ ROOFING, YR: ☐ HEATING, YR:	RESISTIVE			MANUFACTURER: _____						
OTHER: YR: _____										
PRIMARY HEAT ☐ BOILER ☐ SOLID FUEL ☐ IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N				SECONDARY HEAT ☐ BOILER ☐ SOLID FUEL ☐ IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N						
RIGHT EXPOSURE & DISTANCE		LEFT EXPOSURE & DISTANCE		FRONT EXPOSURE & DISTANCE		REAR EXPOSURE & DISTANCE				
BURGLAR ALARM TYPE		CERTIFICATE #				EXPIRATION DATE		CENTRAL STATION ☐	LOCAL GONG ☐	
BURGLAR ALARM INSTALLED AND SERVICED BY		EXTENT		GRADE		# GUARDS / WATCHMEN		CLOCK HOURLY ☐		
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)				% SPRNK	FIRE ALARM MANUFACTURER				CENTRAL STATION ☐	LOCAL GONG ☐

ADDITIONAL INTEREST

ACORD 45 attached for additional names

INTEREST	NAME AND ADDRESS	RANK: _____	EVIDENCE: _____	CERTIFICATE	INTEREST IN ITEM NUMBER	
☐ LENDER'S LOSS PAYABLE	REFERENCE / LOAN #: _____				LOCATION: _____	BUILDING: _____
☐ LOSS PAYEE					ITEM CLASS: _____	ITEM: _____
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

ADDITIONAL PREMISES INFORMATION

PREMISES #:	STREET ADDRESS:							
BUILDING #:	BLDG DESCRIPTION:							
AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N) ☐	DESCRIPTION OF PROPERTY COVERED	LIMIT	REFRIG MAINT AGREEMENT (Y / N) ☐	OPTIONS		
		\$		☐	BREAKDOWN OR CONTAMINATION	
		DEDUCTIBLE		☐	POWER OUTAGE	☐
		\$				

SINKHOLE COVERAGE (Required in Florida)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
☐	PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK			# OF OPEN SIDES ON STRUCTURE: _____

CONSTRUCTION TYPE	DISTANCE TO HYDRANT FIRE STAT		FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES	# BASM'TS	YR BUILT	TOTAL AREA
	FT	MI							

BUILDING IMPROVEMENTS		BLDG CODE GRADE	TAX CODE	ROOF TYPE	OTHER OCCUPANCIES	
☐	WIRING, YR:	☐	PLUMBING, YR:			
☐	ROOFING, YR:	☐	HEATING, YR:	WIND CLASS	☐	HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT
☐	OTHER:		YR:	☐	RESISTIVE	DATE INSTALLED: _____
				☐	SEMI- RESISTIVE	MANUFACTURER: _____

PRIMARY HEAT				SECONDARY HEAT			
☐	BOILER	☐	SOLID FUEL	☐	BOILER	☐	SOLID FUEL
IF BOILER, IS INSURANCE PLACED ELSEWHERE?			☐	IF BOILER, IS INSURANCE PLACED ELSEWHERE?			☐
			Y / N				Y / N

RIGHT EXPOSURE & DISTANCE	LEFT EXPOSURE & DISTANCE	FRONT EXPOSURE & DISTANCE	REAR EXPOSURE & DISTANCE
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BURGLAR ALARM TYPE	CERTIFICATE #	EXPIRATION DATE	CENTRAL STATION LOCAL GONG	
			WITH KEYS	

BURGLAR ALARM INSTALLED AND SERVICED BY	EXTENT	GRADE	# GUARDS / WATCHMEN	CLOCK HOURLY

PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)	% SPRNK	FIRE ALARM MANUFACTURER	CENTRAL STATION
			LOCAL GONG

ADDITIONAL INTEREST		ACORD 45 attached for additional names													
INTEREST		NAME AND ADDRESS	RANK:		EVIDENCE:		CERTIFICATE	INTEREST IN ITEM NUMBER							
☐ LENDER'S LOSS PAYABLE								LOCATION:	BUILDING:						
☐ LOSS PAYEE															
☐ MORTGAGEE															
☐															
		REFERENCE / LOAN #:						ITEM DESCRIPTION							

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Applicable in AL, AR, DC, LA, MD, NM, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties* (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Dave Turgeon	STATE PRODUCER LICENSE NO (Required in Florida) P100362
APPLICANT'S SIGNATURE	DATE	NATIONAL PRODUCER NUMBER