



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 #: 09-7561188750-S-00

Renewal Date: 05/03/26

RENEWAL \$5M PRIMARY 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		Including TRIA	
Premium:	\$30,657.00	Premium:	\$30,657.00
Policy Fee	\$1,300.00	Policy Fee	\$1,300.00
Provider Fee	\$1,000.00	Provider Fee	\$1,000.00
Surplus Contribution Fee	\$2,299.28	Surplus Contribution Fee	\$2,299.28
FL SL Tax(4.94%)	\$1,741.66	TRIA:	\$1,085.00
Stamping Fee(0.06%)	\$21.15	FL SL Tax(4.94%)	\$1,795.26
Total:	\$37,019.09	Stamping Fee(0.06%)	\$21.80
		Total:	\$38,158.34

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

Non-Admitted Carrier(s):

Lloyd's of London

Victor Insurance Exchange

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: **FLWP3116434**

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

Named Insured

The Village at Haile Condominium Association, Inc

Mailing address is required at time of bind request

Policy Limits of Insurance

\$5,000,000

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

Underwriters at Lloyd's

Victor Insurance Exchange

Premium

\$30,657.00

Insurer Policy Fee

\$1,000.00

VIE Surplus Contribution*

\$2,299.28

TRIA

Available for an additional premium of \$1,085

*The Surplus Contribution goes toward the policyholder surplus of Victor Insurance Exchange (VIE). ICAT does not make any money off of or take a percentage of this contribution. Additional details are available in your Subscription Agreement.

Your Coverages, Limits and Deductibles as they apply

Your Deductibles				
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)
Location 1, Building 11: 5218 SW 91st Dr, Gainesville, FL 32608	Building	\$539,814	5% (\$26,991)	1% (\$5,398)

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 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)
Location 1, Building 24: 5300 SW 91st Terrace, Gainesville, FL 32608	Building	\$539,167	5% (\$26,958)	1% (\$5,392)

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 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
Additional Coverages & Coverage Extensions	Sublimit
Debris Removal	25% of loss within limit, up to an additional \$10,000 per location in addition to limit
Pollutant Clean Up and Removal	\$10,000
Unscheduled Additional Property	\$10,000, subject to \$2,500 Deductible
Wind-Driven Rain	\$10,000

Coverage Sublimits & Extensions Package

Selected Package	Base - Included ✓	Package B - \$300	Package A - \$400
The following coverages apply only if a Limit for BPP is shown. The coverage provided is the lesser the BPP Limit or the listed sublimit.			
Accounts Receivable	\$25,000	\$50,000	\$100,000
Electronic Data	\$5,000	\$25,000	\$50,000
Fine Arts	\$10,000	\$15,000	\$25,000
Valuable Papers	\$25,000	\$50,000	\$100,000
The following coverages apply only if a Limit for BPP or BI Limit is shown. These coverages are limited to the lesser of the sublimit listed below or the Limit shown for BPP or BI:			
Food Spoilage	\$10,000	\$50,000	\$100,000
Utility Interruption	\$10,000	\$15,000	\$25,000
The following coverages apply only if a BI Limit is shown.			
Extended Period of Indemnity	60 days	90 days	180 days

Additional Coverages Available for Purchase Ø

Green Upgrades	Not selected
Mold Clean Up & Removal	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.
- Coverage will be written on a Non-Admitted Named Peril form.

Conditions

- Fees are fully earned
- Minimum earned premium is 25%

- 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
- Cancellation by Named Insured may result in a material wind-season cancellation penalty if coverage was provided for any portion of wind season (June 1st through November 30th). See NPNA 600(a).

Exclusions

- Risks located on the National Historic Registry are not eligible for coverage.

Subject To

- Signed Victor Insurance Exchange Subscription Agreement.

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 **FLWP3116434** 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.
-

Surplus Lines Disclosure and Acknowledgement

At my direction, _____ has placed my coverage in the surplus lines market.

name of insurance agency

As required by Florida Statute 626.916, I have agreed to this placement. I understand that coverage may be available in the admitted market and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer. Additionally, I understand surplus lines insurers' policy rates and forms are not approved by any Florida regulatory agency.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Named Insured

By: _____
Signature of Named Insured Date

Printed Name and Title of Person Signing

Name of Excess and Surplus Lines Carrier

Type of Insurance

Effective Date of Coverage

**SUMMARY
OF THE SUBSCRIPTION AGREEMENT
AND POWER OF ATTORNEY OF
VICTOR INSURANCE EXCHANGE**

Victor Insurance Exchange (the “Exchange”) is a Domestic Surplus Lines Reciprocal Insurance Exchange existing for the benefit of its insureds (the “Subscribers”). The Exchange is an unincorporated association of those insureds, who become “subscribers” to the Exchange and gain additional rights and duties as explained below.

The attached “Subscription Agreement” governs each subscriber’s relationship with the Exchange. The Subscription Agreement also appoints a third-party, Victor Attorney-In-Fact, LLC, a Delaware limited liability company (the “AIF”), to manage and administer the day-to-day operations of the Exchange.

This Summary and Cover Letter (the “Cover Letter”) provides an overview of certain key terms of this Subscription Agreement. However, the Subscription Agreement controls your legal rights and obligations regarding the Exchange. The Subscription Agreement in its entirety is accessible at info.icat.com/subscriberagreement. For additional details regarding any matter addressed in the Cover Letter, please refer to the Subscription Agreement. You are urged to carefully read the Subscription Agreement in its entirety. By signing below, you are agreeing to be legally bound by its terms.

Surplus Contributions. Along with your insurance premium, you will pay a contribution to the Exchange known as a “surplus contribution”, which is necessary for the Exchange to operate. This contribution will be collected along with your policy premium each time you purchase a new or renewal policy from the Exchange and is set at ten percent (10%) of total annual collected premium.

Non-Assessable Policies. The policy you are currently buying is not subject to assessment under Delaware law; this means the Exchange will not ask you to pay more than the premium and the surplus contribution as a result of owning this policy. If you renew this policy in future years, the Exchange also will not ask you to pay more than the premium and applicable surplus contribution, provided the Exchange meets the requirements of assuming non-assessable policies with applicable Delaware law.

Management of the Exchange and Compensation. By signing the Cover Letter and agreeing to be bound by the Subscription Agreement, you agree to appoint the AIF to be the Attorney-in-Fact for the Exchange. The AIF will manage the day-to-day insurance operations of the Exchange. The relationship between the Exchange and the AIF is governed by the terms of the Attorney-in-Fact Agreement between the Exchange and the AIF (the “AIF Agreement”). A copy of the AIF Agreement is available via info.icat.com/Victor-Insurance-Exchange-Attorney-In-Fact

In exchange for services rendered, the Exchange will compensate the AIF in an amount equal to eighteen and one-half percent (18.5%) of the annual gross premium written by the Exchange. For additional information, please refer to the AIF compensation terms provided in the Subscription Agreement and the AIF Agreement.

Related Party Transactions. You agree that the AIF may retain affiliates to provide management services to the Exchange in support of its day-to-day insurance operations, and you agree that it is not a conflict of interest for the AIF to contract with affiliates. Please refer to Section 1.5 of the Subscription Agreement for examples of affiliated transactions.

Subscribers' Advisory Committee. The Exchange has established a Subscribers' Advisory Committee ("SAC") for the benefit of its Subscribers. The SAC is an advisory body and is not responsible for operating the Exchange. The SAC will represent the rights of the Subscribers under the Subscription Agreement.

Subscriber Savings Accounts. The Exchange may, in the sole discretion of the AIF, allocate profits or excess surplus to active Subscribers. Any such allocation will be deposited into Subscriber Savings Accounts ("SSAs"). Any distributions from SSAs will be subject to the performance of the Exchange, its ability to pay claims, and its overall financial strength. Distributions will be subject to the prior written approval of the Delaware Department of Insurance.

Arbitration. Your participation in the Exchange and agreement to be bound by the Subscription Agreement is subject to binding arbitration. The arbitration agreement is in the Subscription Agreement and governs all disputes between you, the Exchange, the AIF, and any affiliates of the AIF.

Limitation of Actions. Absent a finding of criminal or willful misconduct or recklessness, you agree that you will not sue, or name in any action or affirmative defense, the Exchange, or any affiliates of the AIF.

Impairment of Exchange. You agree that, if the assets of the Exchange are at any time insufficient to discharge the Exchange's liabilities or to maintain the surplus required under the laws of Delaware or any other jurisdiction in which the Exchange conducts business, neither the AIF, nor the affiliates of the AIF, will be liable to the Exchange or be required to make up any such deficiency or otherwise fund the Exchange.

Tax Considerations. Each prospective subscriber is advised to consult their tax advisor regarding the tax effects of a contribution or investment in the Exchange.

Assignment of Benefit. You agree that you may not, without the prior written consent of the AIF, assign any rights or obligations under the Subscription Agreement, or under any policy of insurance issued by the Exchange, to a third party.

Acceptance of Subscription Agreement and Revocable Proxy. By signing below, you agree to become a Subscriber of the Exchange, to appoint the AIF as the Attorney-in-Fact of the Exchange, and to be legally bound by the terms and conditions of the Subscription Agreement and the attached Revocable Proxy. We again encourage you to read the Subscription Agreement in its entirety.

If you fail to sign this Cover Letter but remit an application for coverage and pay the corresponding premium and surplus contribution, the Exchange may, but is not required to, deem you a Subscriber of the Exchange. Under such circumstances, you will be bound by the Subscription Agreement and the Revocable Proxy attached thereto.

Signature:

By: _____

Name: [Subscriber]

Date: [Date]

**REVOCABLE PROXY
OF
SUBSCRIBER**

The undersigned ("Subscriber") appoints each of the members of the Subscribers' Advisory Committee (the "SAC") of Victor Insurance Exchange, a Delaware domestic reciprocal insurance company (the "Exchange"), as agents and attorneys with powers of substitution as Subscriber's lawful proxy to vote and act for Subscriber and in Subscriber's name at any meeting of the Subscribers of the Exchange.

This proxy is solicited on behalf of the management of the Exchange and will empower the holders to vote on Subscriber's behalf for any business that may properly come before any meeting of the Subscribers.

Subscriber understands that Subscriber may revoke this proxy by giving the Exchange written notice of Subscriber's revocation at least 10 days before the date of any meeting of the Subscribers of the Exchange at which this proxy is to be exercised. Subscriber further understands that if Subscriber attends a meeting, Subscriber may revoke this proxy by electing to vote in person. **Subject to the foregoing, Subscriber understands that this proxy shall be irrevocable.**



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 Lloyd's of London	NAIC CODE
	COMPANY POLICY OR PROGRAM NAME	PROGRAM CODE
	POLICY NUMBER 09-7561188750-S-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 TIME ☒ AM CANCEL 05/03/2026 12:01 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	\$	37,019.09		☐ 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 \$ 37,019.09
---------------------------------	---------------------------------	--	--------------	-------------------	-------	---------------	-----------------------	--------------------------------

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 %
---	--	---

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:						
☐ TRUSTEE	LIEN AMOUNT:	PHONE (A/C, No, Ext):		FAX (A/C, No):				
REASON FOR INTEREST:			E-MAIL ADDRESS:					

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 Lloyd's of London		NAIC CODE
POLICY NUMBER 09-7561188750-S-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 Lloyd's of London		NAIC CODE
POLICY NUMBER 09-7561188750-S-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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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: \$ OCCUPIED AREA: SQ FT
BLD #	CITY: Gainesville STATE: FL COUNTY: ZIP: 32608	OUTSIDE	TENANT	# PART TIME EMPL	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 Lloyd's of London		NAIC CODE
POLICY NUMBER 09-7561188750-S-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 Lloyd's of London		NAIC CODE
POLICY NUMBER 09-7561188750-S-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 #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	528,901		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 ☐ POWER OUTAGE ☐ SELLING PRICE							
		DEDUCTIBLE \$										
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	# BASM'TS	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 ☐	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	REFERENCE / LOAN #: _____				LOCATION: _____	BUILDING: _____
☐ LOSS PAYEE					ITEM CLASS: _____	ITEM: _____
☐ MORTGAGEE					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

ADDITIONAL PREMISES INFORMATION

PREMISES #: 3	STREET ADDRESS: 9172 SW 52nd Rd, Bldg F							
BUILDING #:	BLDG DESCRIPTION:							
AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
984,803		RC	Special form					NS Ded: 5% per Build/AO W/H 1% per Build

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		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
---------------------------	--------------------------	---------------------------	--------------------------

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						ITEM CLASS:	ITEM:
MORTGAGEE						ITEM DESCRIPTION	
		REFERENCE / LOAN #:					

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

Page 2 of 3

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 5		STREET ADDRESS: 5025 SW 91 Ct, Bldg H							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	1,464,946		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER: YR:	☐ RESISTIVE								
PRIMARY HEAT			SECONDARY HEAT						
☐ BOILER ☐ SOLID FUEL ☐			☐ BOILER ☐ SOLID FUEL ☐						
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N			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	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	REFERENCE / LOAN #:				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 6		STREET ADDRESS: 5141 SW 91st Way, Bldg I							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	1,464,946		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER: YR:	☐ RESISTIVE								
PRIMARY HEAT			SECONDARY HEAT						
☐ BOILER ☐ SOLID FUEL ☐			☐ BOILER ☐ SOLID FUEL ☐						
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N			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	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	REFERENCE / LOAN #:				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

Page 2 of 3

ADDITIONAL PREMISES INFORMATION

PREMISES #: 8	STREET ADDRESS: 5040 SW 91st Terrace, Bldg K							
BUILDING #:	BLDG DESCRIPTION:							
AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
822,463		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	☐
		\$				

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: _____

[illegible]

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:					
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
			☐ 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					ITEM CLASS: _____	ITEM: _____
	MORTGAGEE					ITEM DESCRIPTION	
		REFERENCE / LOAN #:					

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

ADDITIONAL PREMISES INFORMATION

PREMISES #: 9	STREET ADDRESS: 9149 SW 49th Pl, Bldg L							
BUILDING #:	BLDG DESCRIPTION:							
AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
822,463		RC	Special form					NS Ded: 5% per Build/AO W/H 1% per Build

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N) ☐	DESCRIPTION OF PROPERTY COVERED	LIMIT \$	REFRIG MAINT AGREEMENT (Y / N) ☐	OPTIONS	
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION	☐ SELLING PRICE
				☐ 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 FIRE STAT		FIRE DISTRICT	CODE NUMBER	PROT CL	# STORIES	# BASM'TS	YR BUILT	TOTAL AREA
	HYDRANT	MI							
	FT								

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:					
OTHER: _____	YR: _____					

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
---------------------------	--------------------------	---------------------------	--------------------------

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						ITEM CLASS:	ITEM:
MORTGAGEE						ITEM DESCRIPTION	
		REFERENCE / LOAN #:					

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

ADDITIONAL PREMISES INFORMATION

PREMISES #: 10	STREET ADDRESS: 5318 SW 91st Terrace							
BUILDING #:	BLDG DESCRIPTION:							
AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
539,464		RC	Special form					NS Ded: 5% per Build/AO W/H 1% per Build

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		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
---------------------------	--------------------------	---------------------------	--------------------------

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					ITEM CLASS:	ITEM:
	MORTGAGEE					ITEM DESCRIPTION	
		REFERENCE / LOAN #:					

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

ADDITIONAL		PREMISES #: 11		STREET ADDRESS: 5218 SW 91st Dr											
PREMISES INFORMATION		BUILDING #:		BLDG DESCRIPTION:											
SUBJECT OF INSURANCE		AMOUNT		COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY				
Building		539,814			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		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		SEMI- RESISTIVE		☐		HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT		DATE INSTALLED: _____			
☐	OTHER: YR:			RESISTIVE				☐		MANUFACTURER:					
PRIMARY HEAT						SECONDARY HEAT									
☐	BOILER	☐	SOLID FUEL	☐				☐	BOILER	☐	SOLID FUEL	☐			
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N						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
												☐	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											ITEM CLASS: _____		ITEM: _____	
☐	MORTGAGEE											ITEM DESCRIPTION			
☐															
REFERENCE / LOAN #:															

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 12		STREET ADDRESS: 5212 SW 91st Terrace							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	493,437		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER: _____					
OTHER: YR:		RESISTIVE							
PRIMARY HEAT				SECONDARY HEAT					
☐ BOILER ☐ SOLID FUEL ☐				☐ BOILER ☐ SOLID FUEL ☐					
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N				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	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	REFERENCE / LOAN #: _____				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 13		STREET ADDRESS: 9150 SW 49th Pl							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	1,083,000		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER: _____					
OTHER: YR:		RESISTIVE							
PRIMARY HEAT				SECONDARY HEAT					
☐ BOILER ☐ SOLID FUEL ☐				☐ BOILER ☐ SOLID FUEL ☐					
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N				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	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	REFERENCE / LOAN #: _____				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

ADDITIONAL		PREMISES #: 14		STREET ADDRESS: 5213 SW 91st Dr											
PREMISES INFORMATION		BUILDING #:		BLDG DESCRIPTION:											
SUBJECT OF INSURANCE		AMOUNT		COINS %	VALU- ATION	CAUSES OF LOSS		INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY			
Building		457,502			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 ☐ POWER OUTAGE ☐ SELLING PRICE					
					DEDUCTIBLE \$										
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				SEMI- RESISTIVE		☐ HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT		DATE INSTALLED: _____			
☐ OTHER: YR:				RESISTIVE						MANUFACTURER:					
PRIMARY HEAT					SECONDARY HEAT										
☐ BOILER ☐ SOLID FUEL ☐					☐ BOILER ☐ SOLID FUEL ☐										
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N					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		
												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												ITEM CLASS: _____		ITEM: _____	
☐ MORTGAGEE												ITEM DESCRIPTION			
☐															
		REFERENCE / LOAN #:													

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 15		STREET ADDRESS: 5206 SW 91st Terrace							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	523,299		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER: YR:	☐ RESISTIVE								
PRIMARY HEAT			SECONDARY HEAT						
☐ BOILER ☐ SOLID FUEL ☐			☐ BOILER ☐ SOLID FUEL ☐						
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N			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	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	REFERENCE / LOAN #: _____				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 16		STREET ADDRESS: 5030 SW 91 Ct							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	361,107		RC	Special form					NS Ded: 5% per Build/AO W/H 1% per Build
Business Personal Property	21,742		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
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:				
☐ OTHER: YR:				
	RESISTIVE		MANUFACTURER:	

PRIMARY HEAT	SECONDARY HEAT
☐ BOILER ☐ SOLID FUEL ☐	☐ BOILER ☐ SOLID FUEL ☐
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N	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 ☐
			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: _____
☐ LOSS PAYEE					BUILDING: _____
☐ MORTGAGEE					ITEM CLASS: _____
☐					ITEM: _____
	REFERENCE / LOAN #:	ITEM DESCRIPTION			

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

--

Page 2 of 3

Page 2 of 3

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 19		STREET ADDRESS: 9124 SW 51st Rd, Bldg B							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	1,154,331		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER:	YR:	RESISTIVE							
PRIMARY HEAT				SECONDARY HEAT					
☐ BOILER ☐ SOLID FUEL ☐				☐ BOILER ☐ SOLID FUEL ☐					
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N				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	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	REFERENCE / LOAN #: _____				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

Page 2 of 3

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 21		STREET ADDRESS: 5347 SW 91st Terrace							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	333,794		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER:	YR:	RESISTIVE							
PRIMARY HEAT			SECONDARY HEAT						
☐ BOILER ☐ SOLID FUEL ☐			☐ BOILER ☐ SOLID FUEL ☐						
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N			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	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	REFERENCE / LOAN #: _____				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 23		STREET ADDRESS: 5330 SW 91st Terrace, Pet Bakery							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	250,877		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER: YR:	☐ RESISTIVE								
PRIMARY HEAT			SECONDARY HEAT						
☐ BOILER ☐ SOLID FUEL ☐			☐ BOILER ☐ SOLID FUEL ☐						
IF BOILER, IS INSURANCE PLACED ELSEWHERE? ☐ Y / N			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	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					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						
REFERENCE / LOAN #: _____						

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

**ADDITIONAL
PREMISES INFORMATION**

PREMISES #: 24		STREET ADDRESS: 5300 SW 91st Terrace							
BUILDING #:		BLDG DESCRIPTION:							
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALUATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	539,167		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					
		DEDUCTIBLE \$		☐ BREAKDOWN OR CONTAMINATION ☐ 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	# BASM'TS	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:			MANUFACTURER:					
☐ OTHER:	YR:	RESISTIVE							
PRIMARY HEAT				SECONDARY HEAT					
☐ BOILER	☐ SOLID FUEL	☐ Y / N	☐ BOILER ☐ SOLID FUEL ☐ Y / N						
RIGHT EXPOSURE & DISTANCE		LEFT EXPOSURE & DISTANCE		FRONT EXPOSURE & DISTANCE		REAR EXPOSURE & DISTANCE			
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	REFERENCE / LOAN #:				LOCATION:	BUILDING:
☐ LOSS PAYEE					ITEM CLASS:	ITEM:
☐ MORTGAGEE					ITEM DESCRIPTION	
☐						

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

Page 2 of 3