



The Cincinnati Insurance Company

A Stock Insurance Company

Headquarters: 6200 S. Gilmore Road, Fairfield, OH 45014-5141

Mailing address: P.O. Box 145496, Cincinnati, OH 45250-5496

www.cinfin.com ■ 513-870-2000

COMMON POLICY DECLARATIONS

Billing Method: DIRECT BILL

POLICY NUMBER EPP 031 43 20 / EBA 031 43 20

NAMED INSURED LAKEVIEW CONDO ASSOCIATION

C/O: LIBBY & RICK LEWALLEN

ADDRESS

PO BOX 5158

(Number & Street, PINEHURST, NC 28374

Town, County,

State & Zip Code)

Previous Policy Number:

EPP0314320

Policy Period: At 12:01 A.M., STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

All coverages except Automobile and / or Garage

Policy number: EPP 031 43 20

FROM: 03-15-2022

TO: 03-15-2023

Automobile and / or Garage

Policy number: EBA 031 43 20

FROM: 03-15-2022

TO: 03-15-2023

Agency LEE-MOORE INSURANCE AGENCY, INC. 32-067

City WEST END, NC

Legal Entity / Business Description

ORGANIZATION (ANY OTHER)

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

FORMS APPLICABLE TO ALL COVERAGE PARTS:

IA4298NC 01/07 NORTH CAROLINA NOTICE TO POLICYHOLDERS OF PROPERTY EXCLUSIONS

IA461 06/10 COINSURANCE CONTRACT

IL0017 11/98 COMMON POLICY CONDITIONS

IA102A 09/08 SUMMARY OF PREMIUMS CHARGED

IA904 04/04 SCHEDULE OF LOCATIONS

IA4236 06/20 POLICYHOLDER NOTICE TERRORISM INSURANCE COVERAGE

IA4486 03/17 NOTICE OF LOSS CONTROL SERVICES- COMMUNITY ASSOCIATIONS

IA4521 03/20 NOTICE OF PRIVACY PRACTICES

IP446 08/01 NOTICE TO POLICYHOLDERS

IA4006 07/10 SPECIAL PER OCCURRENCE DEDUCTIBLE ENDORSEMENT

IA4117NC 08/16 NORTH CAROLINA CHANGES - CANCELLATION AND NONRENEWAL

IA4238 01/15 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

IA4338 05/11 SIGNATURE ENDORSEMENT

IA4525 03/21 NOTICE TO POLICYHOLDERS EXCLUSION - COMMUNICABLE DISEASE

IL0022 05/87 EFFECTIVE TIME CHANGES - REPLACEMENT OF 12 NOON

FM502 07/08 COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

GA532 07/08 COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

CA516 03/09 CRIME AND FIDELITY COVERAGE PART DECLARATIONS (COMMERCIAL ENTITIES)

PA541 12/10 CONDOMINIUM OR HOMEOWNERS ASSOCIATIONS WRONGFUL ACTS COVERAGE PART DECLARATIONS

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF LOCATIONS

<u>LOC.</u>	<u>STREET ADDRESS</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE</u>
1	250-280 SUGAR GUM LN PINEHURST, NC			28374-9701

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: **EPP 031 43 20**

Named Insured is the same as it appears on the Common Policy Declarations unless otherwise stated here.

Loc. (address)
 PER STATEMENT OF VALUES ON FILE
 REFER TO IA904

COVERAGE PROVIDED			OPTIONAL COVERAGES Applicable only when an entry is made											
Item	Coverage	Limits	Coin- surance	Covered Cause Of Loss	Business Income Indemnity									
					Monthly Limit (fraction)	Maximum Period (X)	Extended Period (Days)	Inflation Guard (%)	Replace- ment Cost (x)	Agreed Value (x)	Replace- ment Cost Ind. Stock (x)			
BLANKET BUILDING		13,723,628	90%	SPECIAL				X	X					

DEDUCTIBLE: \$500.00 unless otherwise stated \$ 5,000

MORTGAGE HOLDER

Item Name and Address

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

FM101	05/16	BUILDING AND PERSONAL PROPERTY COVERAGE FORM (INCLUDING SPECIAL CAUSES OF LOSS)
FA4190	04/21	NOTICE TO POLICYHOLDERS OF REDUCTION IN COVERAGE CYBER INCIDENT
FA319	04/21	AMENDMENT OF COVERAGE - CYBER INCIDENT EXCLUSION
FA4053	04/06	CINCIPLUS™ COMMERCIAL PROPERTY EXPANDED COVERAGE (XC™) PLUS ENDORSEMENT SUMMARY OF COVERAGE LIMITS
FA4076	05/16	CONDOMINIUM ASSOCIATION PROPERTY COVERAGE ENHANCEMENT
FA4144	04/20	WINDSTORM OR HAIL DOLLAR DEDUCTIBLE
FA450	05/16	COMMERCIAL PROPERTY CONDITIONS
FA490NC	05/16	NORTH CAROLINA CHANGES
FA250	05/16	CINCIPLUS® COMMERCIAL PROPERTY XC+® (EXPANDED COVERAGE PLUS) ENDORSEMENT

THE CINCINNATI INSURANCE COMPANY

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COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: EPP 031 43 20

Named Insured is the same as it appears in the Common Policy Declarations

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$ 2,000,000	
GENERAL AGGREGATE LIMIT	\$ 4,000,000	
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 4,000,000	
PERSONAL & ADVERTISING INJURY LIMIT	\$ 2,000,000	ANY ONE PERSON OR ORGANIZATION
DAMAGE TO PREMISES RENTED TO YOU LIMIT		ANY ONE
\$100,000 limit unless otherwise indicated herein:	\$	PREMISES
MEDICAL EXPENSE LIMIT		
\$5,000 limit unless otherwise indicated herein:	\$	ANY ONE PERSON

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
LOC. 1 - NC SWIMMING POOLS INCL PROD AND/OR COMP OP	48925 E1	EACH	338.439			338
CONDOMINIUMS - RESIDENTIAL INCL PROD AND/OR COMP OP	62003 D130		9.853			1,281

The General Liability Coverage Part is subject to an annual minimum premium.

TOTAL ANNUAL PREMIUM \$ 1,619

FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:

GA101	12/04	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG2132	05/09	COMMUNICABLE DISEASE EXCLUSION
GA3024	05/14	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
GA382	03/02	FUNGI OR BACTERIA EXCLUSION
GA4250	11/05	MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS
GA4312	04/09	CONDOMINIUMS

THE CINCINNATI INSURANCE COMPANY

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CRIME AND FIDELITY COVERAGE PART DECLARATIONS (COMMERCIAL ENTITIES)

Attached to and forming part of POLICY NUMBER: EPP 031 43 20

Named Insured is the same as it appears in the Common Policy Declarations

Item Location (address)

Employee Benefit Plan(s) Included as Insureds:

Coverage is Written:

Primary

Excess

Coindemnity

Concurrent

Coverage is provided only for the Crime Coverage for which a Limit of Insurance is shown below:

Insuring Agreements Forming Part of This Coverage Part	Limit of Insurance	Deductible Amount
	Per Occurrence	Per Occurrence
1. Employee Theft	\$ 510,000	\$ 1,000
2. Forgery or Alteration	\$	\$
3. Inside the Premises - Theft of Money and Securities	\$	\$
4. Inside the Premises - Robbery or Safe Burglary of Other Property	\$ <i>Reduce</i>	\$
5. Outside the Premises	\$ <i>To 100K</i>	\$
6. Computer Fraud	\$	\$
7. Funds Transfer Fraud	\$	\$
8. Money Orders and Counterfeit Money	\$	\$
	\$	\$

Forms and endorsements applicable to this Coverage Part at policy inception.

CR0020 05/06 COMMERCIAL CRIME COVERAGE FORM (DISCOVERY FORM)
CA440 08/07 COMMERCIAL CRIME COVERAGE FORM AMENDATORY ENDORSEMENT
CR0101 08/07 NORTH CAROLINA CHANGES - LEGAL ACTION AGAINST US

The Crime and Fidelity Coverage Part (Commercial Entities) consist of this Declaration Form and the Commercial Crime Coverage Form.

THE CINCINNATI INSURANCE COMPANY

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CONDOMINIUM OR HOMEOWNERS ASSOCIATIONS WRONGFUL ACTS COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: EPP 031 43 20 Effective Date 03-15-2022

Named Insured is the same as it appears in the Common Policy Declarations unless another entry is made here.

LIMITS OF INSURANCE

Each Claim Limit \$ 2,000,000
Aggregate Limit \$ 2,000,000

Prior and / or Pending Date:

	CLASSIFICATION	CODE	ADVANCE PREMIUM
<input checked="" type="checkbox"/>	Condominium Associations	20150	\$ 1,176
<input type="checkbox"/>	Homeowners Associations	20155	\$

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

PA110 09/17 CONDOMINIUM OR HOMEOWNERS ASSOCIATIONS WRONGFUL ACTS COVERAGE FORM

THE CINCINNATI INSURANCE COMPANY
CINCINNATI, OHIO

BUSINESS AUTO COVERAGE PART DECLARATIONS

ITEM ONE

Attached to and forming part of POLICY NUMBER: EBA 031 43 20

Named Insured is the same as it appears in the Common Policy Declarations.

ITEM TWO

SCHEDULE OF COVERAGES AND COVERED AUTOS

This coverage part provides only those coverages where a premium or "incl" is shown in the premium column below. The limit of Insurance for each coverage listed is subject to all applicable policy provisions. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTO Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS (Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos)	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY	8, 9	\$ 1,000,000	INCL
PERSONAL INJURY PROTECTION (or equivalent No-fault coverage)		Separately stated in each P.I.P. endorsement minus \$	Ded.
ADDED PERSONAL INJURY PROTECTION (or equivalent added No-fault coverage)		Separately stated in each added P.I.P. endorsement	
PROPERTY PROTECTION INSURANCE (Michigan only)		Separately stated in each P. P.I. endorsement minus \$	Ded
AUTO. MEDICAL PAYMENTS		\$	
UNINSURED MOTORISTS		\$	
UNDERINSURED MOTORISTS (When not included in Uninsured Motorists Coverage)		\$	
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded. For each covered auto. But no Deductible applies to loss caused by Fire or lightning. See Item Three for hired or borrowed "autos"	
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded. For Each covered auto. For loss caused by mischief or vandalism. See Item Three for hired or borrowed "autos"	
PHYSICAL DAMAGE COLLISION COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded for each covered auto. See Item Three for hired or borrowed "autos".	
PHYSICAL DAMAGE INSURANCE TOWING AND LABOR		\$ for each disablement of a private passenger auto	
PREMIUM FOR ENDORSEMENTS			INCL
		*ESTIMATED TOTAL PREMIUM	

FORMS AND ENDORSEMENTS CONTAINED IN THIS COVERAGE PART AT ITS INCEPTION:

AA4183 02/06 AUTOMOBILE SCHEDULE
AA101 03/06 BUSINESS AUTO COVERAGE FORM
AA2009 01/17 CHANGES - TOWING AND LABOR
AA296 07/12 CHANGES - AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT COVERAGE

AUTOMOBILE SCHEDULE

ITEM THREE

Attached to and forming a part of Policy Number EBA 031 43 20 , effective 03-15-2022

The insurance afforded for any automobile is only with respects to such and so many of the coverages as are indicated by specific premium charge or charges indicated.

POLICY LIMITS

State: NC

Bodily Injury: 1,000,000 CSL

Property Damage: **INCLUDED**

Veh.

No. Vehicle Information

HIRED AND NON-OWNED

OTC-COMP DED: N/A

Coll Ded: N/A

Class:

Territory

BI	PD	MP	OTC	COLL	UM	TOTAL
117	INCL	N/A				117

SYMBOLS:

BI -- Bodily Injury	SPEC -- Specified Perils
PD -- Property Damage	COLL -- Collision
MP -- Medical Payments	UM -- Uninsured Motorists
OTC -- Other Than Collision (ACV Coverage applies unless Stated Amount Value is indicated)	UIM -- Underinsured Motorists
CAC -- Combined Additional Coverage	PIP -- Personal Injury Protection
FT&S -- Fire, Theft, and Supplemental	T&L -- Towing and Labor Costs
	RR -- Rental Reimbursement