

THE CONCORD GROUP INSURANCE COMPANIES

Concord General Mutual Insurance Company, 4 Bouton Street, Concord, NH 03301-5006

Businessowners Policy Declaration

Transaction: RENEWAL

Marie Street Condeminium HO Association Inn. Neula IV Jahranan Industria	
Maple Street Condominium HO Association Inc., Noyle W. Johnson Insurance Agency, Inc.	
c/o Robert Falker 71 Orchard Terrace PO Box 279	
Hyde Park, VT 05655 Montpelier, VT 05601	
(802) 223-7735 44-944	

This Renewal Declaration reflects your renewal coverages, rating information and premiums. If new or revised forms or endorsements apply, they are attached. Please review this information and contact your agent with any questions or changes.

Porm of Business. Corporation
Business Description 4 Unit Condo Association

Policy Number	Policy Type	Policy Period	Transaction Effective Date	Payment Plan
20016684	Businessowners	12/31/2017 to 12/31/2018	12/31/2017	9-Pay

in return for the payment of premium, and subject to all the te insurance as stated in this policy. This premium may be subj	
Liability Coverages	Limicotinsurance:
Liability and Medical Expenses	\$2,000,000 Per Occurrence
Medical Expenses Damage To Premises Rented To You	\$5,000 Per Person \$50,000 Per Location
Aggregate Limits	
Other Than Products-Completed Operations Products/Completed Operations	\$4,000,000 Per Policy Period \$4,000,000 Per Policy Period
Each paid claim reduces the amount of insurance we provide Section II - Liability in the Businessowners Coverage Form	le during the applicable annual period. Please refer to and any attached endorsements

Location	Intermation 7		
Location#	Address		Premiume
1	250 Maple St, Stowe, VT 05672-4275		\$3,004.00
	Policy Level Additional Coverages and Endorsen	ients	\$425.00
	THIS IS NOT A BILL Your Bill Will Be Sent Separately	Total Premium	\$3,429.00

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Counters	signed: Dat	.e	Authorized Representative	

Additional Coverages and Coverage Extensions
Summary of the Additional Coverages and Coverage Extension included in the Businessowners Coverage Form. BI DUIUS. Refer to the coverage form for specific policy coverage information

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Tebris Removal	225,000	
Preservation of Property	While it is being moved or while temporarily stored at another location within 30 days of loss.	
Fire Department Service Charge	\$2,500	
Business Income And Extra Expense	Actual Loss Sustained - Not Exceeding 12 Consecutive Months	
Extended Business Income	Time period 60 Days	
Pollutant Clean-up And Removal	\$10,000	
Civil Authority	Certain actions of a civil authority	
Money Orders And "Counterfeit Money"	\$1,000	
Forgery Or Alteration	52,500	
Increased Cost of Construction	\$10,000	
Business Income From Dependent Properties	\$5,000	
Glass Expense	Rélimbursament cost of témporary repairs	
Fire Extinguisher Systems Recharge Expense	\$5,000	
Electronic Data	\$10,000	
Interruption Of Computer Operations	\$10,000	
Limited Coverage for "Fungi", Wet Rot or Dry Rot	\$15,000	

Coverage Extensions
Extensions apply to insulted Buildings and Business Rersonal Property

Newly Acquired Or Constructed Property	\$250,000 at each building, \$100,000 Business Personal Property at each building Up to 30 days Period of Coverage
Personal Property Off-Premises	\$10,000
Outdoor Property	\$2,500 One Tree, Shrub or Plant -\$1,000
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Valuable Papers And Records	\$10,000 On Premise \$5,000 Off Premise
Accounts Receivable	\$10,000 On Premise \$5,000 Off Premise
Business Personal Property Temporarily In Portable Storage Units	\$10,000

ole Street Condominium HO	Policy Number 20016684	Effect:
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Endorsement#		Endersement Title	
BP 01 14	Vermont Changes - Contami	nation Or Pollution Exception	Included
	Aggregate Limit:	\$2,000,000	
BP 04 42	Principalies of Comment of C	ອວ່າສູກເລ່າວັນ ຂອງການເຂົ້າ ເຊື່ອນ ເ	17/50 17/50
BP 05 77	Fungi Or Bacteria Exclusion	(Liability)	N/A
Rb an ne	Businessowners Bundle End	iorsement	\$175.00
	Ordinance or Law Spoilage Coverage Utility Service, Direct Utility Service, Time Element Water Back-Up and Sewer Overflow Fine Arts Damage To Rented Premises Identity Fraud Expense	\$100,000 Blanket Personal Property Off Premises \$25,000 \$25,000 \$25,000 \$26,000 \$26,000 \$25,000 \$20,000 \$20,000 \$20,000 \$25,000 \$25,000 \$25,000 \$25,000 \$350,000 \$350,000 \$25,000 \$2	
DT 50 08	Equipment Braskdown		metuaea
BP 90 12	Condominiums, Co-Ops, Ass	sociations - Directors And Officers Liability Endorsement	\$250.00
	Association Name: Aggregate Limit: Retroactive Date:	Maple Street Condominium HO Assoc., Inc \$1,000,000	
	Deductible:	\$500	1
	Fending Or Prior Litigation Date:	December 31, 2016	•
	Extended Reporting Period:	No	

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Location # 1 Address 250 Maple St, S	towe, VT 05672-4275	Property \$2,500 Deductible	Optional \$500 Coverage
Building # 1 Building Description	Building #1		Windstorm 0%
	Class# Valuation Basis	# Eimits/oftlinsurance	Deductible Premium
Buildings including Appurteriant Structures	69145 Replacement Cost	\$1,820,000	\$2,025.00
The state of the s	ብዓናልና	Limit - Sec Page 1	áàiá vó
Business Income and Extra Expense	Actual Loss Sustained, Not Exceeding	12 Consecutive Months	Included

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CONSTRUCTION OF THE STATE OF TH	Önverellerinistration		- Mention
Building Automatic Increase	4%	All	Included

Coverages and	Endorsements Applicable Per Location	有主义 证证基	
Endorsement#	Endorsement Title	Building #	Premium -
5f i+76	Exclusion of Loss Due to By-Products of Production or Processing	E E1 #144	111 m
ľ	Operations (Rental Properties)		
	All Rented Units Within Building		

Total Location Premium \$3,004.00

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	2000年2000年2000年2000年2000年2000年2000年200
Loss Payee/Mortgagee Schedule	。2004年時期
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	All Forms and Endorsements Applicable to Your Policy
BP 00 03 07 13	Businessowners Coverage Form
DC 01 14 01 00	Verment Changes Contamination Or Pollution Exception
BP 01 34 06 15	Vermont Changes
BP 01 77 07 02	Vermont Changes - Civil Union
BP 04 12 04 17	Limitation Of Coverage To Designated Premises Or Project
BP 04 15 07 13	Spoilage Coverage
BP 04 17 01 10	Employment-Related Practices Exclusion
BP 04 40 07 10	Ordingnee Or Law Coverage
BP 04 56 07 13	Utility Services - Direct Damage
BP 04 57 07 13	Utility Services - Time Element
BP 05 15 01 15	Disclosure Pursuant To Terrorism Risk insurance Act
BF 05 23 01 15	Cap On Losses From Certified Acts Of Terrorism
BP 05 77 01 06	Fungi Or Bacteria Exclusion (Liability)
BP 14 78 07 13	Exclusion Of Loss Due To By-Products Of Production Or Processing Operations (Rental Properties)
BP 15 04 05 14	Exclusion-Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability With Limited Bodily Injury Exception
BP 17 01 07 13	Conglommiam Association Coverage
BP 90 06 11 14	Businessowners Bundle Endorsement
BP 90 08 11 14	Equipment Breakdown Coverage
BP 90 12 03 15	Condominiums Co-Ops Associations - Directors And Officers Liability Endorsement
RP 00 13 00 15	Coodominium Association Covered Property
CGIPRIV 04 07	Privacy Policy

Concord General Mutual Insurance Company

MUTUALS-MEMBERSHIP AND VOTING NOTICE. The insured is notified that by virtue of this policy, the policyholder is a member of the Concord General Mutual Insurance Company of Concord, New Hampshire, and is entitled to vote either in person or by proxy at any annual or special meetings of said Company. The Annual Meetings of the Company are held in the State of New Hampshire on the fourth Monday in March, in each year, at 10:00 s'clock A.M. Notice of said Annual Meeting will be given by one publication in any newspaper published in Concord, County of Merrimack, State of New Hampshire, no fewer than ten (10) nor more than sixty (60) days prior to the date of said meeting.

THE CONCORD GROUP INSURANCE COMPANIES

Concord General Mutual Insurance Company Green Mountain Insurance Company, Inc.

IMPORTANT CHANGE TO YOUR BUSINESSOWNERS POLICY

LIMITATION OF COVERAGE TO DESIGNATED PREMISES, PROJECT OR OPERATION ENDORSEMENT

ADVISORY NOTICE TO POLICYHOLDERS

This Notice does not form part of your policy. No coverage is provided by this Notice nor can it be construed to replace any provision of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided. If there is any conflict between the Policy and this Notice, THE PROVISIONS OF THE POLICY SHALL PREVAIL.

Carefully read your policy, including the endorsements attached to your policy.

This Notice provides information concerning the following revised endorsement, which applies to your renewal policy. The revision is in response to recent judicial interpretations and reinforces the intent of the endorsement to provide liability coverage only for the premises or operations described within the policy. In the context of similar judicial interpretations, this revision could be considered a reduction in coverage. Contact your agent with any question.

BP 04 12 04 17 - Limitation Of Coverage To Designated Premises, Project Or Operation

When this endorsement is attached to your policy, coverage is limited to specific premises and/or projects or operations designated in the Schedule of the endorsement. This endorsement has been revised to explicitly address, in the context of a scheduled premises, the location wherein:

- Under Paragraph A., bodily injury or property damage must occur;
- Under Paragraph B., the following location-based offenses must be committed:
 - 1. False arrest, detention or imprisonment; or
 - The wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of a room, dwelling or premises that a person occupies, committed by or on behalf of its owner, landlord or lessor, and
- Under Paragraph C., bodily injury must occur.

If your policy includes Umbrella Coverage then the following also applies;

CU 21 11 04 17 - Limitation Of Coverage To Designated Premises, Project Or Operation

When this endorsement is attached to your policy, coverage is limited to specific premises and/or projects or operations designated in the Schedule of the endorsement. This endorsement has been revised to explicitly address, in the context of a scheduled premises, the location wherein:

- Under Coverage A, bodily injury or property damage must occur; and
- Under Coverage B, the following location-based offenses must be committed:
 - 1. False arrest, detention or imprisonment; or
 - The wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of a room, dwelling or premises that a person occupies, committed by or on behalf of its owner, landlord or lessor.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITATION OF COVERAGE TO DESIGNATED PREMISES, PROJECT OR OPERATION

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE

A.	Premises:
В.	Project Or Operation:
Infe	ormation required to complete this Schedule. If not shown above, will be shown in the Declarations.

Section II - Liability is amended as follows:

- A. Paragraph A.1.b.(1) is replaced by the following:
 - (1) To "bodily injury" and "property damage" caused by an "occurrence" that takes place in the "coverage territory" only if:
 - (a) The "bodily injury" or "property damage":
 - (i) Occurs on the premises shown in the Schedule or the grounds and structures appurtenant to those premises; or
 - (ii) Arises out of the project or operation shown in the Schedule;
 - (b) The "bodlly injury" or "property damage" occurs during the policy period; and
- (c) Prior to the policy period, no insured listed under Paragraph C.1. Who is An Insured and no "employee" authorized by you to give or receive notice of an "occurrence" or claim, knew that the "bodily Injury" or "property damage" had occurred, in whole or in part. If such a listed insured or authorized "employee" knew, prior to the policy period, that the "bodily injury" or "property damage" occurred, then any continuation, change or resumption of such "bodily injury" or "property damage" during or after the policy period will be deemed to have been known before the policy period.
- B. Paragraph A.1.b.(2) is replaced by the following:
 - (2) To "personal and advertising Injury" caused by an offense committed in the "coverage territory" but only if:
 - (a) The offense arises out of your business:
 - (i) Performed on the premises shown in the Schedule; or

THE CONCORD GROUP INSURANCE COMPANIES

Privacy Policy

Privacy Notice

The Concord Group Insurance Companies are committed to protecting the privacy of prospective, current, and former policyholders. Insurance transactions, such as providing quotes, issuing new policies or servicing existing policies, and settling claims, require that we obtain Nonpublic Personal Financial Information (NPFI) from you and possibly from third parties. We recognize the obligation to protect the confidentiality of personal information that we obtain. This notification will provide information such as what information is considered NPFI, information we may disclose to third parties, and steps we take to secure information within our business operations.

Information We Collect... Why, What and How

Why: Quite simply, to process your insurance transaction. We will collect information only as it pertains to the business of providing insurance.

What: The NPFI collected can include information such as policy limits, payment history, and claims history. Depending on the type of insurance, it could also include information such as motor vehicle records, loss information reports, property inspection reports, insurance scoring reports, and credit reports.

How: Most of the information is provided by you or your agent, within the application. We may also obtain information from third parties, such as the Department of Motor Vehicles (DMV) for motor vehicle reports or vendors providing insurance scoring, credit, or property inspection reports.

Information We Disclose

The Concord Group does not disclose any nonpublic personal information about our policyholders or former policyholders to anyone, except as permitted by law. We will disclose information to affiliates or nonaffiliated third parties only as it applies to processing insurance transactions. As an example, obtaining a motor vehicle report requires that we disclose your date of birth and perhaps license number to a third party. Should your policy include a loss payee or mortgagee, we may be required to disclose to them information regarding the status of certain insurance transactions.

Opt Out Provisions

You are entitled to Opt Out of transactions involving the sharing of information, unless the transactions are exempt from Opt Out by law or regulation. The transactions described in the preceding paragraph are examples of exempt transactions. The companies of The Concord Group do not disclose or share information in any way that is subject to Opt Out. If this should change, we will notify you and, at that time, provide an opportunity to Opt Out.

Protecting Your Information

We understand the need to safeguard sensitive information. Access to nonpublic information about you is restricted to those employees who need to know that information to provide products or services to you. We maintain physical, electronic and procedural safeguards to protect the confidentiality of your nonpublic personal information.

Additional Information and Questions

Recently enacted federal and state laws have established privacy standards and disclosure requirements for financial institutions. These standards and requirements vary depending on the type of information collected and the level of disclosure to third parties. This notice has provided you with information as to how the Concord Group Insurance Companies, based on the requirements as pertains to its operations, protects your personal information. If you have any questions or comments, please send them along to us at the address below.

The Concord Group Insurance Companies Marketing Department 4 Bouton Street, Concord, NH 03301

- (ii) In connection with the project or operation shown in the Schedule; and
- (b) The offense was committed during the policy period.

However, with respect to Paragraph A.1.b.(2)(a)(i), if the "personal and advertising injury" is caused by:

- (a) False arrest, detention or imprisonment; or
- (b) The wrongful eviction from, wrongful entry, into, or invasion of the right of private occupancy of a room, dwelling or premises that a person occupies, committed by or on behalf of its owner, landlord or lessor;

then such offense must arise out of your business performed on the premises shown in the Schedule and the offense must have been committed on the premises shown in the Schedule or the grounds and structures appurtenant to those premises.

- C. Paragraph A.2.a. Medical Expenses is replaced by the following:
 - a. We will pay medical expenses as described below for "bodily injury" caused by an accident that takes place in the "coverage territory" if the "bodily injury":
 - (1) Occurs on the premises shown in the Schedule or the grounds and structures appurtenant to those premises; or
 - (2) Arises out of the project or operation shown in the Schedule;

provided that:

- (a) The accident takes place during the policy period;
- (b) The expenses are incurred and reported to us within one year of the date of the accident; and
- (c) The injured person submits to examination, at our expense, by physicians of our choice as often as we reasonably require.