Property Application and Statement of Values



Unless notified otherwise, completion of this form replaces the application, statement of values, hard copy loss runs and formally executed loss letters. This form contains the information submitted to date. The form must be completed, signed and returned for underwriter's review and acceptance within 30 days of inception. Any inaccurate information identified on the returned form is automatically deemed noted and agreed by underwriters upon receipt, so please return as soon as possible.

lamed Insured	: Mustang Pkwy	MF Prop LLC						Account II) :	1193017			
lailing Address	1605 Lyndon B	Johnson Freeway Ste	250, Dallas, TX 75	5234									
oo/Dida No	Address	City	State		7:-		Building Area (Sq. ft)	% Automatic	Sprinkiers	Original Year Built	ISO Const. (1 to 6)	No. Of Buildings	
oc/Bldg No.	Address	City	State		Zip	_		4,		<u> </u>	 =	$+\overline{-}$	
	As per schedule on file with AmRisc Specialty												
tals:		•					341,602	100%	,			11	
	If you have any questions regarding the	e type of construction or other	er information, discuss	with yo	our agent prior to s	igning this	application.	•					
Valuation:	RCV	RCV		R	RCV		А	LS		ĺ			
Coins:	N/A	N/A		N	I/A		1/12th r	monthly					
oc/Bldg No.	Building	Contents/BPP		01	ther		Re	nts			Loc T	TIV	
	As per schedule on file with AmRisc Specialty												
Totals:	\$42,700,250	\$250,000		\$50	0,000		\$7,12	25,000			\$50,125	25,250	
	These values often form the basis of the	e policy's limit of liability. Ple	ease review carefully.										
	sed by requested perils for the priced. Incomplete loss history is con			cified	threshold. Plea	se add			Thr	reshold:		\$0	
DOL	Description / COL	Incurred	Status (O/C)		DOL	De	scription /	COL		Incurred	d	Status (O/C	
	NO LOSSES 5 YE	ARS	`				<u> </u>	SSES 5 YE	ARS				
	rage been declined, cancelled or non-ren	newed during the prior 3 year	rs						_	_			
applicable in MO.) ne applicant a S-Ch	apter Corporation, partnership or any oth	er type of sole proprietor	No		Has any applica Any bankruptcie							No	
anization?			No		_		-			-		No	
es the applicant hav irs?	e any reason that they would not be awa	re of all losses for the prior 5	No		Has net income financials or tax			past 3 years?	If so,	please attac	ch	No	
abitational, is there	any aluminum distribution wiring?		No										
plain any Yes a	nswers. If necessary, add addit	ional pages, which are	e hereby made pa	art of	the application	١.							
arranties: Wa	rrant fire protection sprinklers are	provided throughout all	buildings, as note	d in P	Property Applica	tion.							
Wa	rrant no losses last 5 years on pro	pperties to be covered u	nless specified in	Prope	erty Application.								
Wa	rrant no expiring markets that are	quoted herein unless e	xception by the un	derwr	riter.								
Wa	rrant no Exterior Insulation Finish	System (EIFS) Constru	ction.										
Wa	rrant no 120 V rated aluminum dis	stribution wiring, unless	exception by unde	erwrite	er as noted on A	mRisc ap	oplication.						
	Discrepancies received by underwriters		med noted and agreed	by un	derwriters. Howev	er, addition	nal						
	ed as of the date the information is received	-											
ity of a felony of	owingly and with intent to injure, do the third degree. The Insured furth AT exposed property - Form is av	her acknowledges the f	raud statement ab	ove a	nd understands	the Polic	y will contain	a Fraud No	otice b	by state. S			
ercentage of premersions, fees and	insurance rules and regulations, the iums and fees. Fees are assessed amount to be charged and find the policy, I agree to pay the premium of	d in compliance with ap nem to be acceptable. B	plicable state law a By singing below, a	and ai and in	re due when co	verage is	bound. I, the	undersigne	ed, ha	ve reviewe	ed the ter	rms, conditions	
the best kno	wledge of the applicant and	d the producer, the	above informa	ition	is true and o	omplet	e.						
effery Ma	ırtin		Partner										
plicant Printed N			Title			roducer F	Printed Name						
	y Martin		10/1/24										
plicant Signature	7		Date			roducer S	Signature			Date			

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Binder Id: 574530

DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

INSURED: Mustang Pkwy MF Prop LLC Account ID: 1193017

LIMITS: <u>As per the attached Authorization or Indication</u>

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, as amended ("TRIA"), that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, as defined in Section 102(1) of the Act, as amended: The term "act of terrorism" means any act that is 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 an air carrier or vessel 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. Any coverage you purchase for "acts of terrorism" shall expire at 12:00 midnight December 31, 2027, the date on which the TRIA Program is scheduled to terminate, or the expiry date of the policy whichever occurs first, and shall not cover any losses or events which arise after the earlier of these dates.

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM IS PARTIALLY REIMBURSED BY THE UNITED STATES 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 THIS FORMULA, THE UNITED STATES PAYS 80% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID

BY THE INSURER(S) PROVIDING THE COVERAGE. YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A USD100 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 USD100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED USD100 BILLION, YOUR COVERAGE MAY BE REDUCED.

THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

I hereby elect to purchase coverage for acts of terrorism for a prospective premium of USD \$14,025
I hereby elect to have coverage for acts of terrorism excluded from my policy. I understand that I will have no coverage for losses arising from acts of terrorism.

Jeffery Martin
Policyfolder pplicant's Signature
Jeffery Martin
Print Name
10/1/24
Date

This notice applies to the following carriers and their respective participation quoted herein:

Indian Harbor Insurance Company

Old Republic Union Insurance Company

GeoVera Specialty Insurance Company

MS Transverse Specialty Insurance Company

National Fire & Marine Insurance Company

Spinnaker Specialty Insurance Company

Everest Indemnity Insurance Company

LMA9184 09 January 2020

If the policy issued by AmRisc Specialty excludes Flood, the following shall apply:

Flood Exclusion Acknowledgement

I understand the policy issued by AmRisc Specialty does NOT provide coverage for loss or damage caused by or resulting from Flood, including any Flood and/or storm surge associated with windstorm events.

I understand that Flood insurance can be purchased elsewhere from a private flood insurer or the National Flood Insurance Program.

It is strongly recommended that Insureds in "Special Flood Hazard Areas" or areas subject to Flood, including Flood and/or storm surge from windstorm events, obtain Flood coverage.

I also understand that execution of this form does NOT relieve me of any obligation that I may have to my mortgagees or lenders to purchase Flood insurance.

If the policy issued by AmRisc Specialty includes Flood, the following shall apply:

Flood Coverage

I understand the policy issued by AmRisc Specialty does provide coverage for loss or damage caused by or resulting from Flood, including any Flood and/or storm surge associated with windstorm events.

I understand that loss or damage caused by or resulting from Flood, including any Flood and/or storm surge associated with windstorm events, will be subject to the Flood sublimit stated elsewhere in the policy

I understand that if I do not sign this form that my application for coverage may be denied or that my policy issued by AmRisc Specialty may be cancelled or non-renewed. I have read and I understand the information above.

Named Insured: Mustang Pkwy MF Prop LLC

Account No.: 1193017

Jeff Martin		
Policyholder/Applicant's Signature		
Jeffery Martin		
Print Name		
10/1/24		
Date		