



**540 West Madison St, 9th Floor
Chicago, IL 60661
Ph: 312-651-6000
www.rtspecialty.com**

24943940B

QUOTATION SUMMARY

October 22, 2024

Willis Towers Watson Northeast, Inc.

200 North Warner Road Suite 300
King of Prussia, PA 19406

FROM: DJ Zimmerman for Ryan Scott

Outlined below is a summary of the attached quotation obtained for the above noted Insured. The full quote terms, conditions, limitations and exclusions can be found on the attached quote. Please pay special attention to those items found on the quote, and note that in the event of any discrepancies between the information found on this summary and the quote itself, the quote supersedes our summary. As the broker with the direct relationship with the Insured, it is your responsibility to carefully review with the Insured all of the terms, conditions, limitations and exclusions in the quote, and to specifically reconcile with the Insured any differences between those quoted and those you requested. RT Specialty expressly disclaims any responsibility for any failure on your part to review or reconcile any such differences with the Insured.

NAMED INSURED:	Dempsey Housing Limited Partnership 9711 Washingtonian Boulevard Gaithersburg, MD 20878	
PRIMARY RISK ZIP CODE:	41267	
COVERAGE:	All Risk	
INSURER:	Falls Lake Fire and Casualty Company - Non-Admitted	
POLICY TERM:	11/1/2024 - 11/1/2025	
ESTIMATED POLICY PREMIUM:	\$151,964.00	
OPTIONAL TRIA:	\$4,170.00 + Taxes (Optional and in addition to the below premium)	
FEES:	Policy Fee - Carrier	\$986.00
	Service Fee	\$150.00
TOTAL FEES:	\$1,136.00	
ESTIMATED SURPLUS LINES TAX:		
	Municipality tax	\$13,735.35
	Surplus Lines State	\$2,747.07
	Surcharge	
	Surplus Lines Tax	\$4,578.45
	TOTAL TAXES:	\$21,060.87
TOTAL:	\$174,160.87	
AGENT COMMISSION:	11%	



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SPECIAL CONDITIONS / OTHER COVERAGES:

NO FLAT CANCELLATIONS

ALL FEES ARE FULLY EARNED AT INCEPTION

For RT Specialty to file the surplus lines taxes on your behalf, please complete the surplus lines tax document (per the applicable state requirements) and return with your request to bind. Due to state regulations, RT Specialty requires tax documents to be completed within 24 to 48 hours of binding. Please be diligent in returning tax forms.

HOME STATE FOR NON-ADMITTED RISKS

Taxes and governmental fees are estimates and subject to change based upon current rates of the Home State and risk information available at the date of binding. The Home State of the Insured for a non-admitted risk shall be determined in accordance with the Nonadmitted and Reinsurance Act of 2010, 15. U.S.C §8201, etc. ("NRRA").

Some states require the producing broker to submit a written verification of the insured's Home State for our records. The applicable law (if any) of the Home State governing cancellation or non-renewal of non-admitted insurance, including whether any such laws apply to non-admitted risks, shall apply to this Policy.

BINDING INSTRUCTIONS

We will only bind coverage in writing after we receive a written request from you to bind coverage. If coverage is requested, the following items must be submitted:

There are subjectivities that:

- must be complied with or resolved before the contract becomes binding
- apply both before or after inception, compliance with which is a condition of all or part of the coverage; and
- apply after the formation of the contract as conditions of continued coverage.

Failure to provide or comply with these subjectivities might result in a refusal to bind or cancellation of coverage, at the insurer's option. Please note that this is a quote only, and the Insurer reserves the right to amend or withdraw the quote if new, corrected or updated information is received. You must notify us of any material change in the risk exposure occurring after submission of the application. If the Insurer binds the risk following your written request, the terms of the policy currently in use by the Insurer will supersede the quote.

Any amendments to coverage must be specifically requested in writing or by submitting a policy change request form and then approved by the Insurer. Coverage cannot be affected, amended, extended or altered through the issuance of certificates of insurance. Underlying Insurers must be rated A- VII or better by A.M. Best.

This quote summary, the quote, the fees quoted and our advice, is confidential. This quote summary and the quote constitutes the entire understanding and supersedes any and all agreements and communications respecting the insurance offered. If you need further information about the quote, our fee or the Insurer that is proposing to provide your insurance, please contact us.



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PREMIUM FINANCE (If not included in the quote document)

If the insured and the insurer agree to bind coverage and the premium will be financed, upon binding, please instruct the premium finance company to send documents to our attention. Premium Finance funds should always be paid to RT Specialty.

PRODUCER COMPENSATION:

RT Specialty is typically compensated through commission from the insurer for the placement of policies in most transactions. The amount of the commission varies by insurance line and by carrier. RT Specialty might also receive additional compensation. In order to place the insurance requested we may charge a reasonable fee for additional services such as performing a risk analysis, comparing policies, processing submissions, communication expenses, inspections, working with underwriters on the coverage proposal, issuing policies, or servicing the policy after issuance. Any fees charged are fully earned at inception of the policy. Third-party inspection or other fees may be separately itemized upon request. Our fees are applied to new policies, renewal policies, and endorsements. Fees applicable to each renewal and endorsement will be set forth in the quotes. It is the insurance carrier's decision whether to offer the insurance quoted, and your client's decision whether to accept the quote. Our fee is not imposed by state law or the Insurer.

Depending upon the Insurer involved with your placement, we might also have an agreement with the Insurer that we are proposing for this placement that might pay us future additional compensation. This compensation could be based on formulas that consider the volume of business placed with the Insurer, the profitability of that business, how much of the business is retained for the Insurer's account each year, and potentially other factors. The agreements frequently consider total eligible premium from all clients placed during a calendar year and any incentive or contingent compensation is often received at a future date. Because of variables in these agreements, we often do not have an accurate means at the time of placement to determine the amount of any additional compensation that might be attributable to any single placement.

You, as the retail broker with the direct relationship with the Insured, must comply with all applicable laws and regulations related to disclosure of and consent and agreement to, compensation, and informing the Insured that it may request more information about producer or broker compensation that might be paid in connection with the Insured's placement. If we request a copy of any legally required insured consent or agreement, you will provide us with a copy. If you need additional information about the compensation arrangements for services provided by RT Specialty affiliates, please contact your RT Specialty representative.

RT Specialty is a division of RSG Specialty, LLC. RSG Specialty, LLC is a Delaware limited liability company and a subsidiary of Ryan Specialty, LLC. In California: RSG Specialty Insurance Services, LLC (License # 0G97516).

Unless this quote is amended or withdrawn it is valid for 30 days from the date shown above, or the proposed effective date, whichever is earlier. This quote can be amended or withdrawn at any time prior to acceptance by the insured. If the quote included with this letter provides otherwise, or in any way conflicts with this letter, the terms of the quote shall govern and control.



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NOTICE

Occurrence Limit of Liability (OLLE) Scheduled Limits

Blanket coverage for first-party property insurance risks has become increasingly difficult to secure and often is not available regardless of price.

Please note that your quote may not provide coverage on a blanket basis and, based on current market conditions, a blanket coverage option might not be available. Any reference(s) to an Occurrence Limit of Liability Endorsement (OLLE), margin clause, maximum amount payable, and/or scheduled limits indicate that blanket coverage is not provided. Instead, the amount of recovery afforded by the policy is limited in some respect to the amount(s) set forth on the Statement of Values (SOV) provided to the insurer. This potentially can materially reduce the insured's recovery in the event of a loss as compared to blanket coverage. Additionally, the policy language for these clauses may vary by insurer and some insurers limit the amount recoverable for extensions of coverage, additional coverages, and additional covered property to the values as shown on the SOV.

Please review this quote very carefully to determine if coverage is being offered or provided on a blanket, or some other more limited, basis.

As such, we strongly recommend that you confirm that the insured is in agreement that they have provided full and accurate amounts for the values set forth on the SOV. RT Specialty expressly disclaims any responsibility for the accuracy or adequacy of the values provided on an SOV. We also note that all decisions concerning coverage and the application of the terms, provisions, conditions, limitations or exclusions of the policy to any claim are made exclusively by the insurers.



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SURPLUS LINES FILING DECLINATIONS DETAIL

NAME OF INDIVIDUAL LICENSEE THAT MADE DILIGENT EFFORT TO PLACE WITH ADMITTED CARRIER:		PHYSICAL ADDRESS OF RISK:
INDIVIDUAL LICENSE NUMBER:		

NAME OF INSURED:	Dempsey Housing Limited Partnership
POLICY NUMBER:	

Document the efforts made to place coverage with an admitted carrier by identifying three admitted carriers marketing the class of business that declined the risk. Please complete this section in its entirety.

FULL NAME AND ADDRESS OF ADMITTED CARRIER	CARRIER NAIC CODE	NAME OF REPRESENTATIVE	PHONE NUMBER	REASON FOR DECLINATION

I have made a diligent effort to place this insurance with the above admitted carriers which are authorized to transact the kind and class of insurance involved and which are writing insurance on risks of the same kind and class..

OR

This coverage has been verified to be on the applicable state export list.

Signature of Producer

Date

Print Name



CIBA RENEWAL QUOTE PACKET

ACCOUNT NAME: Dempsey Housing Limited Partnership

ACCOUNT NAME:

**Dempsey Housing Limited Partnership
9711 Washingtonian Blvd, Suite 200
Gaithersburg, MD 20878**

On behalf of the entire team here at CIBA, I would like to extend our deepest gratitude for considering us in your quoting process.

We strive to embody our core values of integrity, reliability, and excellence in all that we do. With over three decades of experience in the industry, we have honed our expertise to provide tailored solutions that meet the unique needs of each of our clients. To better serve you and your insureds, we have also included quotes for additional solutions for which they are eligible (ex: Cyber Suite, Equipment Breakdown, etc). These are available on an optional basis but are highly recommended.

We also understand the importance of your role as a broker, and we are committed to supporting you through the process. Whether it's providing competitive quotes, offering top-notch customer service, or delivering solutions, we are here to ensure your success with us.

As you go through the quote we've prepared for you, please review all information carefully and contact us if you would like any adjustments or have any questions. Our goal is not only to meet your expectations but to exceed them, providing you and your clients with peace of mind and security.

Once again, thank you for considering CIBA for your insurance needs. We look forward to the opportunity to work together and build a successful partnership for years to come.

If you have any questions, please do not hesitate to contact your CIBA Underwriter.

This packet includes...

- Quote Summary with annual premiums and fees
- Broker Location Summary (SOV) with premiums, deductibles and limits
- Surplus Lines filing information
- Terrorism offer
- Applicable endorsements that change the standard CIBA coverages
- Schedules of participating insurance companies
- State surplus lines notifications
- CIBA coverage comparison
- CIBA Payment Plan Program

Terms, Conditions and Subjectivities:

- For multilocation submissions, the premiums and terms are based on CIBA binding all locations. If you want to bind only some of the locations, then contact your underwriter for a revised quote before submitting your bind request.
- This quote is good through 11/01/2024. If not bound within this period it will expire and you must resubmit for requote.
- Coverage is not bound until confirmed in writing by CIBA.
- If signed applications are not received by CIBA within 30 days from date of binding, then this insurance may be cancelled by CIBA.
- Named Windstorm is excluded for locations that fall under Tier 1 and 2, per the definition of Tiers 1 and 2 located in the master property policy.
- Refer to the Master Policy located on the Broker Portal for an outline of coverages and exclusions.
- A complete sanctions review is required before final binding.

How to Request CIBA to Bind Coverage: *To request CIBA to bind coverage, please send an email message to the CIBA underwriter who sent the quote and include the following:*

1. Requested effective date.
2. Coverages you are requesting CIBA to bind, including any optional coverages that were quoted and the Insured wants to bind.
3. Confirmation of quoted premiums and commission rate (you can attach the CIBA quote that you want to bind and circle the premiums).



QUOTE SUMMARY

ACCOUNT NAME: Dempsey Housing Limited Partnership

PROGRAM	CIBA 2024-2026
POLICY EFFECTIVE	11/01/2024 - 11/01/2025
QUOTE DATE	10/22/2024
QUOTE VALID UNTIL	11/01/2024
HOME STATE (PROP)	KY
HOME STATE (LIAB)	KY
ACCOUNT NAME	Dempsey Housing Limited Partnership

ACCOUNT SUMMARY (ALL LOCS)

TIV	\$18,285,628
UNITS	160
BUILDINGS	29

PREMIUM SUMMARY:

Coverage may only apply to specific properties. Please see Quote Breakdown for individual location breakdown.

✓ Requested Coverages <i>included in quote</i>						
	Coverages, Fees, Other	Premium		Additional Premium for TRIA		
		Gross	Taxable	Gross	Taxable	
✓	Loss Control Services Fee	\$150.00	\$0.00	\$0.00	\$0.00	\$0.00
✓	Policy Fee	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTAL GROSS ANNUAL PREMIUM:	\$150.00	\$0.00	\$0.00	\$0.00	\$0.00



QUOTE BREAKDOWN

ACCOUNT NAME: **Dempsey Housing Limited Partnership**

Date: **10/22/2024**
 Quote: **2024-2026_A604163.2**

SCHEDULE OF LOCATIONS COVERAGES & PREMIUMS

LOC #	<input checked="" type="checkbox"/> Requested Coverages (included in quote) <input type="checkbox"/> Optional Coverages (not currently included, but available to add)	Premium		Addtl Gross Premium for TRIA		Policy Fee	
		Gross	Taxable	Gross	Taxable	Gross	Taxable
100691	Dempsey Housing Limited Partnership: 53-506 DEMPSEY HOUSING STREET, WARFIELD, KY 41267 Occupancy: Residential; Buildings 029; Parking 000; YrBlt 1982; Const ISO 1 - Frame; Sprk None; SqFt 86,399; Units 160 Values: RPV: \$16,935,942; LOI: \$1,319,700; BPP: \$29,986; RPP: \$0; TIV: \$18,285,628 Property Endorsements: 01 MEP-025 OT 0324, 01 RAC-015 LI 0324, 01 SCH-001 LI 0324, 01 TCP-050 DE 0324, 01 WAH-L3%-50K DE 0324, 01 WHC-001 EX 0324, 01 WLD-025 DE 0324, ECP 10 544 09 17, 03 EBC-001 CO 0324, 03 EBC-ST1 LI 0324, 01 TER-001 CO 0324, 01 BHR-001 LI 0324, 01 WEP-001 CO 0324, 01 ALU-001 EX 0324, 01 BPP-001 LI 0624, 01 BRC-100 LI 0624, 01 DCI-020-1.0 LI 0324 Liability Endorsements: IL 09 85 01 15, CG 21 70 01 15 Other: WAH Deductible: 3% TIV - Min \$50K Per Occ Per Loc						
	Totals Line						
	<input checked="" type="checkbox"/> Residential Property: Deductible \$25,000	\$151,622.00	\$151,137.00	\$4,170.00	\$4,170.00	\$986.00	\$986.00
	<input checked="" type="checkbox"/> Equipment Breakdown: Deductible \$25,000	\$342.00	\$342.00	\$0.00	\$0.00	\$0.00	\$0.00
	<input checked="" type="checkbox"/> Loss Control Services Fee	\$150.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

NOTES:

Key: RPV-Real Property Value, LOI-Loss-of Income Value, BPP-Business Personal Property Value, RPP-Real Property Parking Value, TIV-Total Insurable Value.

Gross Premium is inclusive of commission

1. All locations are assessed Loss Control Services fees.

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 ALU-001 EX 0324

ALUMINUM WIRING EXCLUSION

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

This endorsement modifies insurance provided under the following:

ALL RISK PROPERTY COVERAGE FORM

We will not pay for loss or damage caused directly or indirectly in any way or to any extent, which arises out of or is related to the presence of aluminum wiring in or upon any premises shown in the Declarations page. Such loss or damage is excluded from this policy regardless of any other cause or event that contributes concurrently or in any sequence to the loss or damage.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 BHR-001 LI 0324

BUILDING HEAT REQUIREMENT

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

Paragraph **8. PERILS EXCLUDED**, b. (11), (a) is replaced with the following:

8. PERILS EXCLUDED

b. This policy does not insure against loss or damage caused by the following:

- (11) Water, other liquids, powder or molten material that leaks or flows from plumbing, heating, air conditioning or other equipment (except fire protective systems) caused by or resulting from freezing, unless:
- (a) A diligent effort is made to regularly maintain heat throughout the "building," or structure at or above 55 degrees Fahrenheit; or,
 - (b) The equipment is drained and the supply shut off;

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 BPP-001 LI 0624

BUSINESS PERSONAL PROPERTY (BPP) LIMIT

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

COVERAGE FOR BUSINESS PERSONAL PROPERTY IS LIMITED TO THE AMOUNT SHOWN ON THE DECLARATIONS PAGE.

COMMERCIAL PROPERTY COVERAGE FORM CIBA

With respect to Paragraph 2. LIMITS OF COVERAGE, Extension of Coverage Sublimits for **valuable papers and records** and **arson reward** are deleted in their entirety.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 BRC-100 LI 0624

REAL PROPERTY REPLACEMENT COST LIMITATION (100% of Scheduled Value)

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

The following limitations apply to Real Property at the location described in the Declarations Page or Evidence of Commercial Property Insurance to which this endorsement is attached:

1. The Limit of Insurance for Real Property is 100% of the Real Property Limit (RPL) and Real Property Parking Limit (RPL), if applicable, for the location that is stated in the Property Program Schedule of Locations in the Declarations Page or Evidence of Commercial Property Insurance to which this endorsement is attached.

2. Any amount payable under the applicable sub-limit for Demolition Cost and Increased Cost of Construction is part of and not addition to the Limit of Insurance for Real Property.

3. Section 10. VALUATION, paragraph d.1. (b) in the All Risk Property Coverage Form is amended to read:

(b) The Company will not pay more on a replacement cost basis than the least of

(i.) The cost to replace, on the same site, the lost or damaged real property with other property of comparable material and quality which is used for the same purpose; or

(ii.) The amount actually spent by the Insured that is necessary to repair or replace the lost or damaged property.

(iii.) 100% of the Real Property Limit (RPL) and Real Property Parking Limit (RPL), if applicable, for the location that is stated in the

Property Program Schedule of Locations in the Declarations Page or Evidence of Commercial Property Insurance to which this endorsement is attached.

IMPORTANT NOTICE:

This policy may not provide full replacement cost coverage in the event of damage to or destruction of covered property. The Building Replacement Cost Limitation endorsement caps the policy Real Property limit at 100% of the Real Property Value (RPV) and Real Property Parking Value (RPP), if applicable, for the location that is stated in the Property Program Schedule of Locations in the Declarations Page or Evidence of Commercial Property Insurance. The Real Property Value *declared by you* is an estimated replacement cost figure based on general information about the insured property. This is *not* a guarantee that this figure will represent the actual cost to replace the property if it is significantly damaged or destroyed. The actual replacement cost can be impacted by multiple factors including inflation, improvements to the property, and the increased cost of building materials and supplies after a wide-spread disaster. It is your responsibility to select the appropriate Real Property Value. If you have questions or concerns regarding the Real Property Value, you should consider obtaining a real estate appraisal or contractor estimate of the Real Property's replacement cost.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 DCI-020-1.0 LI 0324

**DEMOLITION, ICC, INCREASED DUE TO BUILDING ORDINANCE COMBINED SINGLE
SUB-LIMIT**

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

It is hereby agreed that all coverage for building ordinance coverages:

B. Demolition

C. Increased Cost of Construction

are subject to a single, combined sublimit of 20% of insured building value not to exceed \$1,000,000 for the property to which this endorsement applies.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

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Quote #: 2024-2026_A604163.2

01 MEP-025 OT 0324

MINIMUM EARNED PREMIUM

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

A minimum earned premium equal to twenty five per cent (25%) of the annual premium applies to the Declarations Page or Evidence of Commercial Property Insurance to which this endorsement is attached, once coverage becomes effective.

No flat cancellation is allowed.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 RAC-015 LI 0324

ROOF - ACTUAL CASH VALUE LIMITATION (Older Than 15 Years)

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

If the roof coverings at the insured premises are older than 15 years at the time of loss or damage, the following limitation will apply.

In respects to the perils of wind or hail, coverage for roof coverings is hereby amended as follows:

Actual cash valuation

With respects to valuation of the roof covering, the replacement cost value is deleted and replaced with actual cash value.

Definitions:

Roof covering means:

1. The roof material exposed to the weather
2. The underlayments applied for moisture protection;
3. All flashings required in the replacement of a roof covering

Actual cash value means:

The cost to repair or replace the damaged property with material of like kind and quality with proper deduction for depreciation; at the time of loss, consideration will be given to the age, condition and maintenance of the damaged property.

In the event that the Insured cannot produce documentary proof that roofs at an insured location were 15 years old or less at the time of loss or damage, the insurer will engage a qualified, independent roofing expert who will estimate the age of the roofs at the insured premises. If the expert estimates that any of the roofs at the insured premises are older than 15 years, the above limitation will apply.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 SCH-001 LI 0324

APPLICATION OF LOCATION ADDRESS LIMITS

In consideration of a premium charged, it is agreed that the following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

It is agreed that **blanket coverage does not apply** and coverage under the policy is limited to the location address RPV, LOI and BPP limits as stated in the Schedule of Values contained in the Schedule of Locations in the Declarations Page or Evidence of Commercial Property Insurance.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Quote #: 2024-2026_A604163.2

01 TCP-050 DE 0324

TENANT CAUSED PROPERTY DAMAGE DEDUCTIBLE

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by property identification numbers where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured states that this endorsement applies.

It is agreed that a \$50,000 per occurrence deductible applies to loss or damage resulting from "Property Damage" caused by a "Tenant".

DEFINITIONS

Certain words and phrases are defined as follows:

1. "Property Damage" means physical injury to, destruction of, or loss of use of tangible property occurring at the insured location.
2. "Tenant" means the tenant and residents of the tenant's household, guests of the tenant, and other persons under the age of 21 and in the care of the tenant.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
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Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 TER-001 CO 0324

CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

This endorsement modifies insurance provided under the following:

- COMMERCIAL PROPERTY COVERAGE FORM

A. If aggregate insured losses attributable to terrorist acts certified under the federal Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

"Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in accordance with the provisions of the federal Terrorism Risk Insurance Act, to be an act of terrorism pursuant to such Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:

1. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
 2. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is 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.
- B. The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for injury or damage that is otherwise excluded under this Coverage Part.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 WAH-L3%-50K DE 0324

WIND AND/OR HAIL DEDUCTIBLE (Percentage of values at location)

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

"Wind and/or Hail" Deductible: THREE PER CENT (3%) of the total insurable values at the location, subject to a minimum deductible of \$50,000 per location per occurrence.

It is agreed that the above deductible shall apply to loss or damage caused directly or indirectly by or resulting from the perils of wind, wind driven rain, hail, and any resultant water damage regardless of any other cause or event that contributes concurrently or in any sequence to such loss or damage for the property referenced in the attached Declarations Page or Evidence of Commercial Property Insurance.

Any exclusion or deductible for "Named Windstorm" that applies to location(s) where this endorsement also applies will supersede this endorsement as respect loss or damage from "Named Windstorm".

Definitions:

1. "Named Windstorm"

"Named Windstorm" is a storm that has been designated and named by the National Weather Service, including Hurricane and/or Tropical Storm.

2. "Wind and /or Hail"

"Wind and/or Hail" means the direct and/or indirect action of wind and/or hail and all loss or damage resulting there from whether caused by wind, by hail or by any other peril, other than fire or explosion, including, but not limited to, loss or damage caused when water, in any state, or rain, or sleet, or snow, or sand, dust or any other substance, material or object is carried, blown, driven or otherwise transported by wind and/or hail onto or into the property insured.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 WEP-001 CO 0324

WARRANTY ENDORSEMENT - ELECTRICAL PANELS

This endorsement modifies insurance provided under the following:

ALL COVERAGE PARTS

A. WARRANTY

As a condition of this insurance, it is agreed that there are none of the following brands of electrical panels, circuit breakers, or ground-fault circuit interrupters (GFCIs) present in any buildings covered under this policy:

1. Federal Pacific Electric, Federal Pioneer, FPE, or Stab-Lok;
2. Zinsco, also known as GTE Sylvania-Zinsco;
3. Challenger (manufactured by Challenger Electrical Equipment Corporation or Eaton/Cutler Hammer); or
4. Pushmatic.

B. FIRE COVERAGE is VOID as respects any loss or damage to buildings caused or contributed to by any of the above listed brands of electrical panels, circuit breakers, or ground-fault circuit interrupters (GFCIs).

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 WHC-001 EX 0324

EXCLUSION - COSMETIC LOSS TO ROOF COVERINGS OR SIDING

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

A. In Section 7. PERILS EXCLUDED, under paragraph a. the following is added:

"Cosmetic loss" to "roof covering" or "siding" caused directly or indirectly by Windstorm or Hail.

B. ADDITIONAL DEFINITIONS

As used throughout this endorsement:

1. "Cosmetic Loss" means loss or damage that alters the physical appearance but does not result in the failure to perform the intended function of keeping out elements over an extended period of time.

2. "Roof Covering" means:

- a. The roof material exposed to the weather;
- b. The underlays applied for moisture protection;
- c. All flashings required in the replacement of the roof covering.

3. "Siding" means the materials exposed to the weather providing exterior protection to the walls of a building or structure.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

01 WLD-025 DE 0324

WATER DAMAGE DEDUCTIBLE \$25,000 - PER BUILDING

In consideration of the premium charged, it is agreed that the following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

If loss or damage caused by or resulting from covered water damage occurs, we will not pay for such loss or damage in any one occurrence until the amount of loss or damage exceeds \$25,000 Per Building at each location scheduled in the Commercial Lines Declarations Page and Schedule of Locations. We will then pay the amount of loss or damage in excess of the deductible, up to the applicable limit of insurance.

This deductible does not apply to loss or damage:

1. caused by water discharged by a fire protective system in response to a fire.

If the Deductible contained in the Commercial Lines Declarations Page and Schedule of Locations is greater than the sum of the Water Damage Deductibles applicable to the loss or damage at all buildings, we will apply the Deductible contained in the Commercial Lines Declarations Page and Schedule of Locations instead of the Water Damage Deductible.

Example 1:

Building Limit of Insurance: \$2,000,000; Deductible: \$5,000; Water Damage Deductible – Per Building: \$5,000.

Three buildings suffer water damage of \$150,000 total divided equally between three buildings at \$50,000 each building.

The applicable deductible is \$15,000 (per building deductible of \$5,000 times three) because the Water Damage Deductible is greater than the Standard Deductible of \$5,000. The loss payment is \$135,000 (\$150,000 less \$15,000).

Example 2:

Building Limit of Insurance: \$2,000,000; Deductible: \$10,000; Water Damage Deductible – Per Building: \$5,000.

One building suffers water damage of \$50,000.

The applicable deductible is \$10,000 because the Standard Deductible is greater than the Water Damage Deductible of \$5,000. The loss payment is \$40,000 (\$50,000 less \$10,000).

Example 3:

Building Limit of Insurance: \$2,000,000; Deductible \$5,000; Water Damage Deductible- Per Building: \$20,000.

Two buildings suffer water damage of \$10,000 and \$30,000 each.

Damage to the first building is within the Water Damage deductible. The applicable deductible for the second building is \$20,000.

The Loss Payment is \$10,000 (\$10,000 not paid at Building 1 due to being less than the Per Building deductible of \$20,000 and \$30,000 less \$20,000 at building 2).

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

03 EBC-001 CO 0324

EQUIPMENT BREAKDOWN COVERAGE ENDORSEMENT

In consideration of the premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

These coverages apply to the location of the property identified by the property identification number in the Evidence of Commercial Property Insurance to which these Declarations are attached.

Deductibles: Refer to Evidence of Commercial Property Insurance to which these Declarations are attached.

Coverages	Limits
Equipment Breakdown Limit	\$7,500,000
Property Damage	Included in Equipment Breakdown Limit
Off Premises Property Damage	\$100,000
Business Income	Included in Equipment Breakdown Limit
Extra Expense	Included in Equipment Breakdown Limit
Service Interruption	\$100,000
Contingent Business Income	Excluded
Perishable Goods	\$500,000
Data Restoration	\$50,000
Demolition	\$100,000
Ordinance or Law	\$100,000
Expediting Expenses	\$250,000
Hazardous Substances	\$100,000

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

CG 21 70 01 15

CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

This endorsement modifies insurance provided under the following:

- COMMERCIAL GENERAL LIABILITY COVERAGE PART
- LIQUOR LIABILITY COVERAGE PART
- OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE PART
- PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART
- RAILROAD PROTECTIVE LIABILITY COVERAGE PART
- UNDERGROUND STORAGE TANK POLICY

A. If aggregate insured losses attributable to terrorist acts certified under the federal Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

"Certified act of terrorism" means an act that is certified by the Secretary of the Treasury, in accordance with the provisions of the Terrorism Risk Insurance Act, to be an act of terrorism pursuant to such Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:

1. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
 2. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is 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.
- B. The terms and limitations of any terrorism exclusion, or the inapplicability or omission of a terrorism exclusion, do not serve to create coverage for injury or damage that is otherwise excluded under this Coverage Part.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

ECP 10 544 09 17

EXCLUSION - EXISTING DAMAGE

This endorsement modifies insurance provided under the following:

COMMERCIAL PROPERTY MANUSCRIPT POLICY

The following Exclusion is added to the policy

Existing Damage

We will not pay for loss or damage caused directly or indirectly by **Existing Damage**. Such loss or damage is excluded regardless of any other cause or event contributing concurrently or in any sequence, to **Existing Damage**. This exclusion applies whether or not the loss or damage results in widespread damage or affects a substantial portion of the property.

For the purpose of this endorsement, **Existing Damage** means:

- a. Any damage which occurred prior to the effective date of this policy regardless of whether such damage was apparent on the effective date of this policy or at a later date;
- b. Any claims or damage arising out of workmanship, repairs and/or lack of repairs resulting from damage which occurred prior to the effective date of this policy; and
- c. Any claims or damage unless all buildings insured under your previous policy have been fully and completely repaired. Prior to such completion of repairs, coverage will be limited to the actual cash value of the property at the time of a covered loss or damage occurring during this policy period.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163.2

IL 09 85 01 15

DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

SCHEDULE – PART I

Terrorism Premium (Certified Acts)

This premium is the total Certified Acts premium attributable to the following Coverage Part(s), Coverage Form(s) and/or Policy(ies):

Additional information, if any, concerning the terrorism premium:

SCHEDULE – PART II

Federal share of terrorism losses ____ % Year: 20 (Refer to Paragraph B. in this endorsement.)

Federal share of terrorism losses ____ % Year: 20 (Refer to Paragraph B. in this endorsement.)

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Disclosure Of Premium

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals a percentage (as shown in Part II of the Schedule of this endorsement or in the policy Declarations) of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

**THE FOLLOWING ENDORSEMENT(S) WILL BE ATTACHED TO AND FORM PART OF THE
EVIDENCE OF INSURANCE ISSUED TO:**

Dempsey Housing Limited Partnership
Location: Per attached schedule.

Quote #: 2024-2026_A604163. 2

03 EBC-ST1 LI 0324

EQUIPMENT BREAKDOWN COVERAGE LIMIT

In consideration of a premium charged, it is agreed that following coverage change applies, but only to coverage provided at insured locations identified by "Property Identification Numbers" where the Declarations Page or Evidence of Commercial Property Insurance issued to the Named Insured by CIBA Insurance Services states that this endorsement applies.

The Equipment Breakdown Limit shown in the Equipment Breakdown Coverage Form Declarations, form number 03 EBC-100 DC 0313 is amended to read:
\$18,285,628

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

APPENDIX BPAL-E
BASIC PROPERTY - E

COMMERCIAL INDUSTRIAL BUILDING OWNER'S ALLIANCE, INC.
March 31, 2024 - March 31, 2026

SCHEDULE OF PARTICIPATING INSURANCE COMPANIES

The CIBA program provides each Insured individual limits as specified in the Commercial Lines Declarations page issued by CIBA.

The Schedule below sets forth the participating insurers providing insurance coverage for the CIBA program. The Limits set forth below are a combination of 'Program Limits' where carriers provide a combined limit for all insureds involved in a single loss occurrence subject to each insureds individual limits.

For any insurer set forth below, whose participation is subject to an aggregate Limit for any specific peril, coverage, or participation, then that Limit is the maximum amount payable to all CIBA Named Insureds combined for the term for the contract identified below, for that Insurer's participation. Once that Limit has been exhausted in accordance with the Policy contract terms, then the insurer set forth below will no longer have any further Liability under this Insurance contract.

Notwithstanding the Limits set forth below, the individual limits and sublimits set forth in the Commercial Lines Declarations Page, to which this Schedule is attached and incorporated therein by reference, are the only limits available for any one Named Insured and their identified insured locations(s) identified by the property identification numbers (PID).

Layer	Market	Perils	Limit	%	Policy #	Admitted Non-Admitted
PRIMARY \$4M						
	FALLS LAKE FIRE AND CASUALTY COMPANY (Other than Homestate CA)	AR EXCL EQ FL			CIBA-000001-05	Non-Admitted
	FALLS LAKE NATIONAL INSURANCE COMPANY (Homestate CA)	AR EXCL EQ FL			CIBA-000002-05	Non-Admitted
			\$4,000,000			
			\$4,000,000			
EXCESS LIMIT \$6M x \$4M						
	ASPEN SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$100,000		PX007YH24	Non-Admitted
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$3,000,000		LHD941012	Non-Admitted
	STEADFAST INSURANCE COMPANY	AR EXCL EQ FL	\$1,200,000		XPP-0239013-07	Non-Admitted
	IRONSHORE SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$1,700,000		1000382701-05	Non-Admitted
			\$6,000,000			
EXCESS LIMIT \$25M x \$10M						
	ASPEN SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$2,500,000		PX007YQ24	Non-Admitted
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$10,000,000		LHD941015	Non-Admitted
	NATIONAL FIRE & MARINE INSURANCE COMPANY	AR EXCL EQ FL	\$2,250,000		42-XPR-333760-01	Non-Admitted
	UNITED SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$1,250,000		NQU-2024-10018	Non-Admitted
	PALMS INSURANCE COMPANY	AR EXCL EQ FL	\$1,500,000		PLM-00455-24	Non-Admitted
	UNITED SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$1,250,000		NQU-2024-10017A	Non-Admitted
	PRINCETON EXCESS & SURPLUS LINES INSURANCE COMPANY	AR EXCL EQ FL	\$6,250,000		78-A3-XP-0001096-00	Non-Admitted
			\$25,000,000			
EXCESS LIMIT \$25M x \$35M						
	STARSTONE SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$5,000,000		CSP00099390P-00	Non-Admitted
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$4,125,000		LHD941018	Non-Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$2,500,000		CENPP-22-2023003-02	Non-Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$2,500,000		CENPP-22-2023346-00	Non-Admitted
	STEADFAST INSURANCE COMPANY	AR EXCL EQ FL	\$2,000,000		XPP-0239013-07	Non-Admitted
	PRINCETON EXCESS & SURPLUS LINES INSURANCE COMPANY	AR EXCL EQ FL	\$1,875,000		78-A3-XP-0001096-00	Non-Admitted
	IRONSHORE SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$2,000,000		1000406713-05	Non-Admitted
	UNITED SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$5,000,000		NQU-2024-10017B	Non-Admitted
			\$25,000,000			
EXCESS LIMIT \$90M x \$60M						
	UNITED SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$13,500,000		NQU-2024-10017C NQU-2024-10019	Non-Admitted
	FALLS LAKE FIRE AND CASUALTY COMPANY (Other than Homestate CA)	AR EXCL EQ FL			CIBAXP-0007-03	Non-Admitted

Layer	Market	Perils	Limit	%	Policy #	Admitted Non-Admitted
	FALLS LAKE NATIONAL INSURANCE COMPANY (Homestate CA)	AR EXCL EQ FL			CIBAXP-0008-03	Non-Admitted
		AR EXCL EQ FL	\$26,450,000			
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$2,500,000		CENPP-22-2023347-00	Non-Admitted
	PARTNERRE IRELAND INSURANCE DAC	AR EXCL EQ FL	\$6,750,000		TCIBA000324	Non-Admitted
	LLOYDS OF LONDON	AR EXCL EQ FL	\$1,800,000		TCIBA000224	Non-Admitted
	HOUSTON SPECIALTY INSURANCE COMPANY	AR EXCL EQ FL	\$9,000,000		B1868HF2403759	Non-Admitted
	PALMS INSURANCE COMPANY	AR EXCL EQ FL	\$7,500,000		QUA-00007-24	Non-Admitted
	PRINCETON EXCESS & SURPLUS LINES INSURANCE COMPANY	AR EXCL EQ FL	\$22,500,000		78-A3-XP-0001096-00	Non-Admitted
					\$90,000,000	
EXCESS LIMIT \$100M x \$150M						
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$25,000,000		LHD941019	Non-Admitted
	FIDELIS UNDERWRITING LIMITED, LIRMA F0012	AR EXCL EQ FL	\$17,500,000		TCIBA001024	Non-Admitted
	FALLS LAKE FIRE AND CASUALTY COMPANY (Other than Homestate CA)	AR EXCL EQ FL			CIBAXP2-0009-01	Non-Admitted
	FALLS LAKE NATIONAL INSURANCE COMPANY (Homestate CA)	AR EXCL EQ FL			CIBAXP2-0010-01	Non-Admitted
		AR EXCL EQ FL	\$6,500,000			
	PRINCETON EXCESS AND SURPLUS LINES INSURANCE COMPANY	AR EXCL EQ FL	\$16,000,000		78-A3-XP-0001096-00	Non-Admitted
	LLOYDS OF LONDON	AR EXCL EQ FL	\$6,000,000		TCIBA000524	Non-Admitted
	MITSUI SUMITOMO INSURANCE COMPANY of AMERICA	AR EXCL EQ FL	\$10,000,000		EXP7000151	Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$15,000,000		CENPP-22-2023348-00	Non-Admitted
	LLOYDS OF LONDON	AR EXCL EQ FL	\$4,000,000		TCIBA000624	Non-Admitted
			\$100,000,000			
EXCESS LIMIT \$250M x \$250M						
	FIDELIS UNDERWRITING LIMITED, LIRMA F0012	AR EXCL EQ FL	\$40,000,000		TCIBA001024	Non-Admitted
	HOMELAND INSURANCE COMPANY OF NEW YORK	AR EXCL EQ FL	\$50,000,000		795025290	Non-Admitted
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$50,000,000		LHD941020	Non-Admitted
	LLOYDS OF LONDON	AR EXCL EQ FL	\$5,000,000		TCIBA000824	Non-Admitted
	MITSUI SUMITOMO INSURANCE COMPANY of AMERICA	AR EXCL EQ FL	\$15,000,000		EXP7000151	Admitted
	HDI GLOBAL SPECIALTY SE UK	AR EXCL EQ FL	\$20,000,000		TCIBA000724	Non-Admitted
	PARTNERRE IRELAND INSURANCE DAC	AR EXCL EQ FL	\$18,750,000		TCIBA000324	Non-Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$20,000,000		CENPP-22-2023351-00	Non-Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$11,250,000		CENPP-22-2023108-01	Non-Admitted
	FALLS LAKE FIRE AND CASUALTY COMPANY (Other than Homestate CA)	AR EXCL EQ FL			CIBAXP3-0011-01	Non-Admitted
	FALLS LAKE NATIONAL INSURANCE COMPANY (Homestate CA)	AR EXCL EQ FL			CIBAXP3-0012-01	Non-Admitted
		AR EXCL EQ FL	\$20,000,000			
			\$250,000,000			
EXCESS LIMIT \$250M x \$500M						
	MITSUI SUMITOMO INSURANCE COMPANY of AMERICA	AR EXCL EQ FL	\$53,500,000		EXP7000151	Admitted
	HOMELAND INSURANCE COMPANY OF NEW YORK	AR EXCL EQ FL	\$50,000,000		795025291	Non-Admitted
	FIDELIS UNDERWRITING LIMITED, LIRMA F0012	AR EXCL EQ FL	\$12,750,000		TCIBA001024	Non-Admitted
	PALOMAR EXCESS & SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$20,000,000		CENPP-22-2023349-00	Non-Admitted
	LLOYDS OF LONDON	AR EXCL EQ FL	\$15,000,000		TCIBA000924	Non-Admitted
	CHUBB BERMUDA INTERNATIONAL, A DIVISION OF CHUBB EUROPEAN GROUP SE	AR EXCL EQ FL	\$98,750,000		TCIBA001324	Non-Admitted
			\$250,000,000			

Layer	Market	Perils	Limit	%	Policy #	Admitted Non-Admitted
EXCESS LIMIT \$250M x \$750M						
	LANDMARK AMERICAN INSURANCE COMPANY	AR EXCL EQ FL	\$57,500,000		7HD941022	Non-Admitted
	CHUBB BERMUDA INTERNATIONAL, A DIVISION OF CHUBB EUROPEAN GROUP SE	AR EXCL EQ FL	\$182,500,000		TCIBA001324	Non-Admitted
	INDIAN HARBOR INSURANCE COMPANY	AR EXCL EQ FL	\$10,000,000		US00090269PR24A	Non-Admitted
			\$250,000,000			

Several Liability:

PLEASE NOTE – This notice contains important information. PLEASE READ CAREFULLY

The liability of an insurer under this contract is several and not joint with other insurers party to this contract. An insurer is liable only for the proportion of liability it has underwritten. An insurer is not jointly liable for the proportion of liability underwritten by any other insurer. Nor is an insurer otherwise responsible for any liability of any other insurer that may underwrite this contract.

The proportion of liability under this contract underwritten by an insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown above.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is an insurer. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other insurer that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Although reference is made at various points in this clause to "this contract" in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.

DISCLAIMER: COVERAGES APPLICABLE FOR THE EFFECTIVE AND EXPIRATION DATES AS SPECIFIED IN THE MEMBER INSURANCE CONTRACT (AIN). PLEASE CHECK WWW.CIBASERVICES.COM FOR THE MOST UP-TO-DATE APPENDICES

APPENDIX BPAL-E
BASIC PROPERTY - E

COMMERCIAL INDUSTRIAL BUILDING OWNER'S ALLIANCE, INC.
August 01, 2024 - March 31, 2026

SCHEDULE OF PARTICIPATING INSURANCE COMPANIES

The CIBA program provides each Insured individual limits as specified in the Commercial Lines Declarations page issued by CIBA.

The following markets provide coverage up to a total of \$50M per occurrence for each individual insured, subject to the individual limit shown on the Declarations Page for each AIN, in the event that the combined program limit shown in the Schedule above has been exhausted. This limit is not a combined limit for all insured's involved in a single loss occurrence, but rather a separate limit for each individual insured, subject to the insured's individual limit shown on the Declarations.

Notwithstanding the Limits set forth above and below, the individual limits and sublimits set forth in the Commercial Lines Declarations Page, to which this Schedule is attached and incorporated therein by reference, are the only limits available for any one Named Insured and their identified insured location(s) identified by the property identification numbers (PID).

Layer	Market	Perils	Limit	%	Policy #	Admitted Non-Admitted
INSURED SPECIFIC LIMITS						
	AXIS SURPLUS INSURANCE COMPANY	AR EXCL EQ FL	\$17,500,000		EAF675123-24	Non-Admitted
	CERTAIN UNDERWRITERS AT LLOYD'S, LONDON	AR EXCL EQ FL	\$32,500,000		PG2406213	Non-Admitted
			\$50,000,000			

Several Liability:

PLEASE NOTE – This notice contains important information. PLEASE READ CAREFULLY

The liability of an insurer under this contract is several and not joint with other insurers party to this contract. An insurer is liable only for the proportion of liability it has underwritten. An insurer is not jointly liable for the proportion of liability underwritten by any other insurer. Nor is an insurer otherwise responsible for any liability of any other insurer that may underwrite this contract.

The proportion of liability under this contract underwritten by an insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown above.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is an insurer. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other insurer that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Although reference is made at various points in this clause to "this contract" in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.

DISCLAIMER: COVERAGES APPLICABLE FOR THE EFFECTIVE AND EXPIRATION DATES AS SPECIFIED IN THE MEMBER INSURANCE CONTRACT (AIN). PLEASE CHECK WWW.CIBASERVICES.COM FOR THE MOST UP-TO-DATE APPENDICES

APPENDIX EB
EQUIPMENT BREAKDOWN

COMMERCIAL INDUSTRIAL BUILDING OWNER'S ALLIANCE, INC.
 March 31, 2024 - March 31, 2026

SCHEDULE OF PARTICIPATING INSURANCE COMPANIES

Layer	Market	Perils	Limit	%	Policy #	Admitted Non-Admitted
\$7.5 MILLION EQUIPMENT BREAKDOWN						
	FALLS LAKE FIRE AND CASUALTY COMPANY (Other than Homestate CA)	EB			CIBAEB-0006-03	Non-Admitted
	FALLS LAKE NATIONAL INSURANCE COMPANY (Homestate CA)	EB			CIBAEB-0005-03	Non-Admitted
			\$7,500,000			
			\$7,500,000			

Several Liability:

PLEASE NOTE – This notice contains important information. PLEASE READ CAREFULLY

The liability of an insurer under this contract is several and not joint with other insurers party to this contract. An insurer is liable only for the proportion of liability it has underwritten. An insurer is not jointly liable for the proportion of liability underwritten by any other insurer. Nor is an insurer otherwise responsible for any liability of any other insurer that may underwrite this contract.

The proportion of liability under this contract underwritten by an insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown above.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is an insurer. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other insurer that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Although reference is made at various points in this clause to "this contract" in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.

DISCLAIMER: COVERAGES APPLICABLE FOR THE EFFECTIVE AND EXPIRATION DATES AS SPECIFIED IN THE MEMBER INSURANCE CONTRACT (AIN). PLEASE CHECK WWW.CIBASERVICES.COM FOR THE MOST UP-TO-DATE APPENDICES

Surplus Lines State Requirements

Below are links to state forms and information pertaining to surplus lines diligent search requirements as provided by the various individual states.

Please review those that apply to the home state of the Insured for which you are currently procuring insurance coverage.

All required forms must be completed and returned to your CIBA Underwriter in a timely manner.

If a line is highlighted in this color, a state form is required from a CIBA Broker and/or Insured

State	Surplus Lines Required Form / Additional Information	State Requirements
Alaska	Alaska Affidavit of Due Diligence	Affidavit of Due Diligence required.
Alabama	Alabama Evidence of Compliance	Evidence of Compliance (3 Declining Insurers) required.
Arizona	Arizona Diligent Search Form	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Arkansas	SL-3 Disclosure to Surplus Line Insured	SL-3 (Disclosure to Surplus Line Insured) required.
California	D-1 (Disclosure Statement) SL-2 (Diligent Search Report)	D-1 (Disclosure Statement) required. Must be signed by the Insured. SL-2 (Diligent Search Report) required.
Colorado	Diligent Effort Affidavit	Surplus Lines Diligent Effort Affidavit required.
Connecticut	SL-8 Surplus Lines Statement	SL-8 (Surplus Lines Statement) required.
Delaware	SL-1923 Statement of Diligent Effort	SL-1923 (Statement of Diligent Effort) required.
Florida	Statement of Diligent Effort	Statement of Diligent Effort required.
Georgia	Surplus Lines Insurance Regulation Information	Affidavit forms not required from CIBA brokers or Insureds.
Hawaii	Hawaii Surplus Lines Tax Information	Affidavit forms not required from CIBA brokers or Insureds.
Idaho	Surplus Line Association of Idaho	Affidavit forms not required from CIBA brokers or Insureds.
Illinois	Surplus Line Association of Illinois	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Indiana	Indiana Department of Insurance	Affidavit forms not required from CIBA brokers or Insureds.
Iowa	Iowa Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Kansas	Statement of Insured	Statement of Insured required.
Kentucky	Kentucky Surplus Lines Information	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Louisiana	Louisiana Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Maine	Maine Bulletin 457 Surplus Lines Eligibility for Property Insurance	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Maryland	Maryland Surplus Lines Information	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Massachusetts	BR-7 Affidavit by Assured	BR-7 (Affidavit by Assured) required.
Michigan	Michigan Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Minnesota	Minnesota Surplus Lines Association	Affidavit forms not required from CIBA brokers or Insureds.
Mississippi	MID Bulletin 2017-3	Affidavit forms not required from CIBA brokers or Insureds.
Missouri	Surplus Lines Declination Detail	Surplus Lines Declination Detail required.
Montana	Surplus Lines Submission Form	Surplus Lines Submission Form required.
Nebraska	Nebraska Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Nevada	Nevada Surplus Lines Association	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
New Hampshire	New Hampshire Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
New Jersey	Certification of Effort	SLPS-6-CERT-1 (Certification of Effort to Place Risk with Authorized Insurer) required.
New Mexico	Producing Broker Affidavit	Producing Broker Affidavit required.
New York	Part C Affidavit by Producing Broker Notice of Excess Line Placement	Part C Affidavit by Producing Broker required. Notice of Excess Line Placement required.
North Carolina	North Carolina Surplus Lines Association Compliance Procedures	Affidavit forms not required from CIBA brokers or Insureds.
North Dakota	North Dakota Insurance Department Surplus Lines	Affidavit forms not required from CIBA brokers or Insureds.
Ohio	INS4024 Surplus Lines Statement	INS4024 Surplus Lines Statement required.
Oklahoma	SL-3C Surplus Lines Insurance Broker Form	SL-3C Surplus Lines Insurance Broker Form required.
Oregon	Diligent Search Statement	Diligent Search Statement required.
Pennsylvania	1609-PR	1609-PR required
Rhode Island	Affidavit by Broker and Insured Form	Affidavit by Broker and Insured Form required.
South Carolina	Statement of Diligent Effort	Diligent Effort Statement required.

State	Surplus Lines Required Form / Additional Information	State Requirements
South Dakota	South Dakota Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Tennessee	Tennessee Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Texas	Texas Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Utah	Utah Evidence of Good Faith	Evidence of Good Faith Effort to Place required
Vermont	Vermont Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Virginia	Form SLB-9	Form SLB-9 required. Please click the link, Form SLB-9, to have the form completed by CIBA surplus lines department.
Washington	Surplus Line Association Certification Form	Due diligence is required, but affidavit forms are not required from CIBA brokers or Insureds.
Washington D.C.	Washington D.C. Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
West Virginia	Form DDF	Form DDF required.
Wisconsin	Wisconsin Surplus Lines Information	Affidavit forms not required from CIBA brokers or Insureds.
Wyoming	Statement of Diligent Effort Surplus Lines Notice to Insured	Statement of Diligent Effort required. Surplus Lines Notice to Insured required.



CIBA QUOTE SUMMARY

ACCOUNT NAME: Dempsey Housing Limited
Partnership

Date: 10/22/2024
Quote #: 2024-2026_A604163

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 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 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 BY THIS POLICY 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 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO 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.

 I hereby elect to purchase federal terrorism insurance coverage for the locations and lines of business identified in quote.

I reject this offer of the federal terrorism insurance coverage and elect to have a terrorism exclusion, sublimit or other limitation included in my policy for these locations and lines of business identified in quote. I understand that I will have no, or limited, coverage for losses arising from acts of terrorism under my policy for these locations and line of business.

Applicant/Named Insured
Signature

Policy Number

Print Name

Name of Insurer

Date

Date



THE BEST IN CYBER SECURITY

CIBA Cyber Suite powered by HSB

CIBA Cyber Suite is a comprehensive insurance solution designed to help businesses respond to a full range of cyber incidents including threats of unauthorized intrusion into or interference with computer systems, damage to data and systems from a computer attack and cyber-related litigation.

Most entities like residential property owners, retail, offices, etc. hold the personal information of their customers and employees. All states have data breach laws that require companies to notify affected individuals if their personally identifying or personally sensitive information is stolen, exposed or accessed without authorization.

Limits Available

Annual Aggregate Limit	Deductible
\$50,000	\$1,000
\$100,000	\$1,000
\$250,000	\$2,500
\$500,000*	\$10,000
\$1,000,000*	\$10,000

NOTE: All qualifying accounts will receive a quote at the \$100,000 limit option, if a different limit is requested, please contact your CIBA Underwriter.

*High Limit Questionnaire Required

Coverages and Sublimits

Data Compromise Response

Public Relations Sublimit: \$10,000
Reputational Harm Sublimit: \$10,000*

Privacy Incident Liability

Data Compromise Liability

Network Security Liability

Electronic Media Liability

Identity Recovery

Lost Wages and Child or Elder Care Sublimit: \$5,000

Mental Health Counseling Sublimit: \$1,000
Miscellaneous Expense Sublimit: \$1,000

Computer Attack

Future Loss Avoidance: 10% of our eligible payment to you with respect to any one Computer Attack for hardware and software upgrades.

Public Relations Sublimit: \$10,000

Reputational Harm

Misdirected Payment Fraud

\$10,000 sublimit*

Extended Income Recovery

Computer Fraud

\$10,000 sublimit*

Cyber Extortion Expenses

\$10,000 sublimit*

Future Loss Avoidance

Reward Payments

Reward Payments is subject to a sub limit per policy period equal to \$25,000. This limit also applies to Data Compromise Response Expenses, Computer Attack, Misdirected Payment Fraud, Computer Fraud, and Cyber Extortion.

Telecommunications Fraud

\$10,000 sublimit*

*Higher sublimits applied to accounts with \$500k+ Annual Aggregate Limits

Includes Exclusive Access to eRiskHub®

An online risk management portal designed to help business owners prepare and respond effectively to data breaches

CIBA Insurance Services

655 N. Central Ave. Ste 1125, Glendale CA 91203

Loss Reporting: 1-818-645-1079 or claimsadjustgrp.com



Case Example: Apartment

What Happened

An apartment building's management company had to scramble when the webhost company that hosted and processed their rental applications suffered a cyber attack. By contacting their cyber insurance carrier, they discovered that the cyber criminal stole applicants' personally identifying information and sent emails to them demanding \$100 in exchange for deleting their information.

Cyber Insurance Response

The claims adjuster introduced the insured to legal counsel, who determined that there was a data breach and helped them quickly recover from it. The insured's cyber policy covered the cost of legal counsel, notification to affected individuals and regulators and credit monitoring as well as identity recovery case management, as shown below:

Legal Counsel	\$3,984.00
Notification Expense	\$40,892.00
Credit Monitoring	\$2,245.00
Total Paid	\$47,121.00

Without Cyber Insurance...

Without a cyber policy, the insured could have had to research and interview appropriate legal counsel themselves, which could have delayed their response time dramatically. They would have also had to pay the entire loss out of pocket, including notification and credit monitoring expenses.

Source: 2020 The Hartford Steam Boiler Inspection and Insurance Company.
www.munichre.com/hsb/en/products/commercial-lines-insurers/cybersuite.html

Did You Know...



63% of small businesses
Reported Experiencing a Data
Breach in the Previous 12 Months

COVERAGE COMPARISON

Coverage Highlights

Property Coverage

CIBA Coverage

May be amended by endorsement

Standard ISO

May be amended by endorsement

Property	Replacement Cost (100% & 110% Real Property Replacement Cost Endorsements Available)	Actual Cash Value or Replacement Cost up to specified limit depending on quote
Coinsurance Requirement	No Co-insurance	80%, 90%, 100% coinsurance or Agreed Value depending on quote
Rental Income	Actual Loss Sustained within 24 months up to Stated Limits	Actual Loss Sustained up to coverage limit with coinsurance or agreed value as specified
Extended Period of Indemnity	180 Days	30 Days
Building Ordinance or Law	Included- Minimum limits are increased in most cases	Limited- can be added by endorsement
<i>Coverage A - Undamaged Portion</i>	<i>Included to building limit</i>	<i>Excluded</i>
<i>Coverage B & C - Demolition & Increased Cost of Construction</i>	<i>20%, \$1,000,000 per building; can endorse up to a maximum of \$2,500,000 per occurrence</i>	<i>Coverage B: Excluded Coverage C: \$10,000</i>
Valuable Papers and Records	\$100,000	\$2,500
Accounts Receivable	\$250,000	Excluded
Professional Fees	\$100,000	Not Included
Trees, Shrubs, Plants, Lawns	\$250,000	\$1,000
Per Tree or Lawn	\$10,000	\$250
Per Shrub or Plant	\$500	\$250
Emergency Vacating Expense	\$100,000	Not Included
Tenant Relocation Expense	\$100,000	Not Included
Per Unit	\$5,000	Not Included
Locks & Keys	\$25,000	Not Included
Pools, Tennis Courts, Playgrounds, Recreational Equipment	\$500,000	Not Included unless scheduled
Pollution Clean Up & Removal	\$100,000	\$10,000 Aggregate Limit
Debris Removal	25% of loss up to \$5,000,000 Limit	25% Loss
Fire Fighting Materials or Expenses	\$100,000	\$1,000
Off Premises Services Interruption	\$100,000	Excluded
Increased Tax Liability for Rental Income	\$25,000	Not Included
Arson Conviction Reward	10% of claim up to \$25,000	Not Included
Mold, Fungus, Dry Rot & Bacteria	\$10,000 per occurrence	\$15,000 Aggregate Limit
Water Damage (Back up of Sewers or Drains)	\$100,000	Excluded
Outdoor Fences, Radio & Television Antennas (including Satellite Dishes), and Signs	Included in Real Property	\$1,000
Roadways, Walks, Patios, or other Paved Surfaces	Included in Real Property	Excluded
Retaining Walls that are not part of a Building	Included in Real Property	Excluded
Foundations of Buildings & Structures below Basement	Included in Real Property	Excluded
Underground Pipes, Flues or Drains	Included in Real Property	Excluded
Electronic Data Processing	Included in Business Personal Property	\$2,500
Additional Coverages Included with Property (optional)		
Equipment Breakdown	\$7,500,000	Not Included
Additional Coverages Included with Liability (if provided)		
Per Location General Aggregate Endorsement	Included Automatically	Excluded, can be added by endorsement
Hired & Non Owned Auto- Business Use	\$1,000,000 Per Accident / Subject to General Agg.	Not included, unless endorsed

Sublimits can be Increased Based on Risk Characteristics

V 1.1

Design a Payment Plan that works for **you**.

For Direct Bill accounts of \$5000 or more in gross premium, CIBA offers the insured a cost-saving option by providing installments.



Payment Plan Requirements:

- 25% down payment of the Total Gross Premium
- A one-time set up fee
- All Loss Control Fees, Program Fees, and all Taxes and State Fees are included in the initial down payment

Payment Plan Includes:

Monthly installments beginning 30 days following the coverage inception date

Additional terms may be available. Please contact Gaynor McDonald at gmcdonald@cibaservices.com

EASY 2-STEP ENROLLMENT:

Contact Us.

Once coverage is finalized and bound for each location, your broker can contact Gaynor McDonald gmcdonald@cibaservices.com to design a payment plan that works for you.

Sign Agreement & Disclosure Statement.

Payment Plan Agreement and Disclosure Statement (emailed after finalizing your payment plan) must be signed by both you and your Broker. The signed copy is to be sent to CIBA Insurance Services.

► Mail signed agreement & initial down payment to:

CIBA Insurance Services
655 N. Central Avenue, Suite 1125
Glendale, CA 91203
Attn: Gaynor McDonald



CIBA Program: Basic Property

INSURANCE COVERAGE SPECIFICATIONS

Property Coverage: (Property or Interest Insured)

Replacement Cost, Building Ordinance & Debris Removal Coverage on all Real & Personal Property; Rental Income/Value; Extra Expense; Electronic Data Processing Equipment & Media; Accounts Receivable; Fine Arts; Valuable Papers & Records.

Extended Real & Personal Property Coverage Includes

- Structures
- Completed Additions
- Permanently Installed Fixtures, Machinery & Equipment
- Utility Installations including Outbuilding Lights & Equipment
- Underground Pipes, Flues & Drains
- Foundations & Supports
- Personal Property used to maintain Property or Premises
- Glass, Signs and Outdoor Equipment & Fixtures
- Fences, Boardwalks and Monuments
- Retaining Walls, Roadways or other Paved or Concrete Surfaces
- Swimming Pools, Saunas, Tennis Courts, Playgrounds and Recreational Facilities
- Landscaping, Trees, Shrubs, Plants & Lawn
- Additions Under Construction, Temporary Structures, Alterations & Repairs to any Building Structure, Materials, Equipment & Supplies for Additions to Buildings or Structures (subject to sublimit)

Coverage Limits

Refer to Up to \$150,000,000 per occurrence maximum per Member Account Identification Number (AIN)
 Declarations with automatic reinstatement, unless limited by the policy, or a Real Property Replacement Cost
 Page Limitation (BRC) Endorsement, if attached.

Covering:
 Real Property, including Improvements & Betterments
 Building Owner/Lessor's Business Personal Property
 Rental Income / Value (24 Month Limitation)
 Extended Period of Indemnity 180 days (365 Days available by endorsement)

Sub Limits

Valuable Papers	\$100,000
Accounts Receivable	\$250,000
Professional Fees	\$100,000
Pollution Cleanup & Removal Costs	\$100,000



CIBA Program: Basic Property

Sub Limits Continued:

Landscaping, Trees, Shrubs, Plants & Lawns	\$250,000
Maximum Per Item Limit:	
Per Tree or Lawn	\$10,000
Per Shrub or Plant	\$500
Pools, Tennis Courts, Playgrounds & Recreational Equipment	\$500,000
Debris Removal Costs	25% of Adjusted Loss Amount Not to Exceed \$5,000,000
Building Ordinance, Demolition & Increased Costs of Construction. Applies Unless an Endorsement with Lower Sub Limits is Specified on the Declarations Page, in which case, the Lower Sub Limits Stated in the Endorsement Will Apply.	
Coverage A: Undamaged Portion	Included
Coverage B: Demolition	B & C are subject to a single, combined sublimit of 20% of insured building value not to exceed \$1,000,000
Coverage C: Increased Cost of Construction	
Additions Under Construction, Alterations and Repairs	\$25,000
Emergency Vacating Expense	\$100,000
Tenant Relocating Expense	\$100,000
Maximum Payment Per Unit:	\$5,000
Locks and Keys	\$25,000
Business Personal Property including Fine Arts otherwise stated in the Declarations Page	\$100,000 Higher limit available by endorsement
Business Personal Property while off Premises or in Transit	\$100,000
Off-Premises Services Interruption	\$100,000
Fire Fighting Materials or Expenses	\$100,000
Increased Tax Liability for Rental Income	\$25,000
Back Up of Sewers or Drains	\$100,000 (Up to \$1,000,000 available by endorsement)



CIBA Program: Basic Property

Insuring Terms & Coverage Features

- All Risk Coverage excluding Earthquake and Flood, with other exclusions as provided in the policy
- Replacement Cost Coverage - No same site provision
- No Co-Insurance Provision
- Rental Income Coverage includes 180 days extended period of indemnity
- Building Ordinance Coverage including increased costs of construction, demolition, and value of undamaged building sections requiring demolition

Deductible Amounts (minimums – see Declarations Page and endorsements for applicable deductibles for each location)

\$10,000	as respects Insured Member with TIV of less than \$10M
\$25,000	as respects Insured Member with TIV of \$10M or greater
\$100,000	as respects Insured Member with TIV of \$100M or greater

Higher deductibles may apply to specific causes of loss – see Declaration Page for applicable deductibles

Optional Coverages (Available)

- Equipment Breakdown - \$7,500,000 Per Location Per Occurrence
(Up to \$50,000,000 per location per occurrence available by endorsement)
- Property Terrorism Program - \$300,000,000 per occurrence shared Program Limit
- Crime – up to \$50,000 per occurrence per account, subject to \$500,000 shared Program Aggregate Limit
- Cyber – up to \$1M annual aggregate limit available (additional limits available)

These are general coverage outlines; always refer to your coverage documents for the actual coverages provided.