



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/03/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>Professional Insurance Associates/Barnes &amp; Co 11622 El Camino Real, Suite 100 San Diego, CA 92130 License #: OD60705</b>	CONTACT NAME: <b>Julie Graesse</b>	FAX (A/C, No): <b>(858)658-9982</b>
	PHONE (A/C, No, Ext): <b>(858)658-9900</b>	E-MAIL ADDRESS: <b>Teri@barnescoins.com</b>
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED <b>Baywood Villas Condominium Association Management Solutions 6200 Buena Vista Drive Newark, CA 94560</b>	INSURER A : <b>Amco/Nationwide Insurance Company</b>	
	INSURER B : <b>Great American Alliance Insurance Company</b>	
	INSURER C :	
	INSURER D :	
	INSURER E :	
INSURER F :		

**COVERAGES**

CERTIFICATE NUMBER: 00000000-11733131

REVISION NUMBER: 188

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ACP BPH 3017541932	03/03/2017	03/03/2018	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b> Director & Officer \$ <b>1,000,000</b>
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/>			ACP BPH 3017541932	03/03/2017	03/03/2018	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UM4959365	03/03/2017	03/03/2018	EACH OCCURRENCE \$ <b>5,000,000</b> AGGREGATE \$ <b>5,000,000</b> Prod/Comp Ops \$ <b>5,000,000</b>
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N <input checked="" type="checkbox"/> N / A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Buildings- Rep Cost			ACP BPH 3017541932	03/03/2017	03/03/2018	Special Form \$ <b>39,355,509</b>
A	Bus Prsnl Property			ACP BPH 3017541932	03/03/2017	03/03/2018	Blanket Limit RC \$ <b>162,800</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is Named as Additional Insured.

30 day notice of cancellation, 10 day notice for non-pay

**CERTIFICATE HOLDER****CANCELLATION**

<b>Management Solutions 6200 Buena Vista Drive Newark, CA 94560</b>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  (JPG)

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# PREMIER BUSINESSOWNERS POLICY

## PREMIER HABITATIONAL STATEMENT OF VALUES

Policy Number: **ACP BPH 3017541932**

Policy Period:  
From **03-03-17** To **03-03-18**

The values shown on this Statement of Values reflect the values you have requested or agreed to for each individual item that was included in the Blanket Limit of Insurance shown in the Declarations of your policy.

By your acceptance of this policy in the payment of the premium due, you are acknowledging that the values shown below are correct to the best of your knowledge and belief.

### BLANKET BUILDINGS/BLANKET PERSONAL PROPERTY

Loc. Bldg.	Description/Coverage Type	Value	Valuation of Property
01 01	BUILDING	554,500	Replacement cost
	PERSONAL PROPERTY	162,800	Replacement cost
01 02	BUILDING	1,346,102	Replacement cost
01 03	BUILDING	2,376,607	Replacement cost
01 04	BUILDING	1,188,304	Replacement cost
01 05	BUILDING	1,188,304	Replacement cost
01 06	BUILDING	2,376,607	Replacement cost
01 07	BUILDING	2,376,607	Replacement cost
01 08	BUILDING	2,376,607	Replacement cost
01 09	BUILDING	2,376,607	Replacement cost
01 10	BUILDING	2,376,607	Replacement cost
01 11	BUILDING	1,346,102	Replacement cost
01 12	BUILDING	2,376,607	Replacement cost
01 13	BUILDING	1,188,304	Replacement cost
01 14	BUILDING	2,376,607	Replacement cost
01 15	BUILDING	1,188,304	Replacement cost
01 16	BUILDING	2,376,607	Replacement cost
01 17	BUILDING	2,376,607	Replacement cost
01 18	BUILDING	1,188,304	Replacement cost
01 19	BUILDING	2,376,607	Replacement cost
01 20	BUILDING	1,188,304	Replacement cost
01 21	BUILDING	1,188,304	Replacement cost
01 22	BUILDING	1,648,000	Replacement cost

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:  
 Description of Premises Number: **001** Building Number: **001** Construction: **FRAME**  
 Premises Address **3190 RED CEDAR TER** **FREMONT** **CA** **94536-3759**  
 Premises ID  
 Occupancy **OO** Classification: **CLUBHOUSES (HABITATIONAL)**

Described as: **POOL/FITNESS/CLUBHOUSE**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanket Limit - Replacement cost	\$39,355,509
Business Personal Property - Blanket Limit - Replacement cost	\$162,800

<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	3%
Automatic Increase in Insurance - Business Personal Property	2.9%
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	
<b>\$5,000</b>	<b>INCLUDED</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>	
Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$140,325</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PB 81 01 (04-11)** **AMCO INSURANCE COMPANY** Page 1 of 2  
 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03496

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION Policy Period:  
 Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03497

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **002** Construction: **FRAME**  
 Premises Address **37301-37315 SEQUOIA RD** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

#### OPTIONAL INCREASED LIMITS

	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

#### OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$247,750</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03498

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **003** Construction: **FRAME**  
Premises Address **3220-3252 RED CEDAR TERRACE** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		NOT PROVIDED
2 - Demolition Cost and Broadened Increased Cost of Construction		\$123,875
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		\$100,000

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03500

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03501

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **004** Construction: **FRAME**  
Premises Address **3300-3314 RED CEDAR TERRACE** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

**OPTIONAL COVERAGES - Other frequently purchased coverage options.**

Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$123,875</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03502

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03503

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **005** Construction: **FRAME**  
 Premises Address **3320-3334 RED CEDAR TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		\$5,000
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction		\$247,750
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		\$100,000

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03504

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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Additional Interest: Interest Number: Loan Number:  
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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03505

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **006** Construction: **FRAME**  
Premises Address **3380-3394 RED CEDAR TERR** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction		\$247,750
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		\$100,000

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03506

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03507



## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **007** Construction: **FRAME**  
Premises Address **37200-37270 SPRUCE TERR** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		<b>INCLUDED</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>\$247,750</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit		<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03509

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **008** Construction: **FRAME**  
 Premises Address **37324-37356 SPRUCE TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$247,750</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **009** Construction: **FRAME**  
 Premises Address **3425-3455 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

#### OPTIONAL INCREASED LIMITS

	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

#### OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$247,750</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03512

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03513

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **010** Construction: **FRAME**  
 Premises Address **3351-3381 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

#### OPTIONAL INCREASED LIMITS

	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

#### OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$140,325</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03514

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03515

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:  
 Description of Premises Number: **001** Building Number: **011** Construction: **FRAME**  
 Premises Address **3261-3275 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
 AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

OPTIONAL COVERAGES - Other frequently purchased coverage options.	LIMITS OF INSURANCE
Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$247,750</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

#### MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:

Additional Interest: Interest Number: Loan Number:  
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**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**  
Description of Premises Number: **001** Building Number: **012** Construction: **FRAME**  
Premises Address **37371-37405 SEQUOIA RD** **FREMONT CA 94536-0000**  
Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	INCLUDED
Business Personal Property -	NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	INCLUDED
Equipment Breakdown	INCLUDED
Automatic Increase in Insurance - Building	3%
Automatic Increase in Insurance - Business Personal Property	NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	INCLUDED

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion	INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction	\$123,875
Ordinance or Law Broadened	NOT PROVIDED
ADVANTAGE - Blanket Additional Limit	\$100,000

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION** Policy Period:  
From **03-03-17** To **03-03-18**  
Policy Number: **ACP BPH 3017541932**

Additional Interest: Interest Number: Loan Number:  
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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **013** Construction: **FRAME**  
Premises Address **37353-37367 SEQUOIA RD** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		<b>INCLUDED</b>
Business Personal Property -		<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		<b>INCLUDED</b>
Equipment Breakdown		<b>INCLUDED</b>
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		<b>INCLUDED</b>
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion		<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction		<b>\$247,750</b>
Ordinance or Law Broadened		<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit		<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03520

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03521

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **014** Construction: **FRAME**  
 Premises Address **37319-37349 SEQUOIA RD** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	INCLUDED
Business Personal Property -	NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	INCLUDED
Equipment Breakdown	INCLUDED
Automatic Increase in Insurance - Building	3%
Automatic Increase in Insurance - Business Personal Property	NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	INCLUDED

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion	INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction	\$123,875
Ordinance or Law Broadened	NOT PROVIDED
ADVANTAGE - Blanket Additional Limit	\$100,000

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Description of Premises Number: **001** Building Number: **015** Construction: **FRAME**  
Premises Address **3260-3274 RED CEDAR TERR** **FREMONT CA 94536-0000**

Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

#### OPTIONAL INCREASED LIMITS

	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

#### OPTIONAL COVERAGES - Other frequently purchased coverage options.

Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$247,750</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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Page 1 of 2

DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03524

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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**PB 81 01 (04-11)**

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DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03525

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:  
 Description of Premises Number: **001** Building Number: **016** Construction: **FRAME**  
 Premises Address **3281-3311 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
 AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction		\$247,750
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		\$100,000

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PB 81 01 (04-11) AMCO INSURANCE COMPANY Page 1 of 2**  
 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03526

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03527

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:  
 Description of Premises Number: **001** Building Number: **017** Construction: **FRAME**  
 Premises Address **3315-3355 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	INCLUDED
Business Personal Property -	NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	INCLUDED
Equipment Breakdown	INCLUDED
Automatic Increase in Insurance - Building	3%
Automatic Increase in Insurance - Business Personal Property	NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	INCLUDED

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion	INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction	\$123,875
Ordinance or Law Broadened	NOT PROVIDED
ADVANTAGE - Blanket Additional Limit	\$100,000

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION**

Policy Number: **ACP BPH 3017541932** From **03-03-17** To **03-03-18** Policy Period:

Additional Interest: Interest Number: Loan Number:  
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**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**  
Description of Premises Number: **001** Building Number: **018** Construction: **FRAME**  
Premises Address **3282-3294 RED CEDAR TERR** **FREMONT CA 94536-0000**  
Premises ID  
Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS  
AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

**COVERAGES** **LIMITS OF INSURANCE**  
Building - Blanketed - Replacement cost **INCLUDED**  
Business Personal Property - **NOT PROVIDED**  
**ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.**  
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit **INCLUDED**  
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period **INCLUDED**  
Equipment Breakdown **INCLUDED**  
Automatic Increase in Insurance - Building **3%**  
Automatic Increase in Insurance - Business Personal Property **NOT PROVIDED**  
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate) **\$5,000**  
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure **INCLUDED**

**OPTIONAL INCREASED LIMITS**

	Included Limit	Additional Limit
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>

**OPTIONAL COVERAGES - Other frequently purchased coverage options.**  
Employee Dishonesty \$250,000 Policy Occurrence **INCLUDED**  
Ordinance or Law - 1 - Loss to Undamaged Portion **INCLUDED**  
2 - Demolition Cost and Broadened Increased Cost of Construction **\$247,750**  
Ordinance or Law Broadened **NOT PROVIDED**  
ADVANTAGE - Blanket Additional Limit **\$100,000**

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

Policy Number: **ACP BPH 3017541932** Policy Period:  
From **03-03-17** To **03-03-18**  
**MORTGAGEE ASSIGNMENT INFORMATION**

Additional Interest: Interest Number: Loan Number:  
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**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **019** Construction: **FRAME**  
 Premises Address **3340-3370 RED CEDAR TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	<b>INCLUDED</b>
Business Personal Property -	<b>NOT PROVIDED</b>
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	<b>INCLUDED</b>
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	<b>INCLUDED</b>
Equipment Breakdown	<b>INCLUDED</b>
Automatic Increase in Insurance - Building	<b>3%</b>
Automatic Increase in Insurance - Business Personal Property	<b>NOT PROVIDED</b>
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	<b>INCLUDED</b>

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	<b>INCLUDED</b>
Ordinance or Law - 1 - Loss to Undamaged Portion	<b>INCLUDED</b>
2 - Demolition Cost and Broadened Increased Cost of Construction	<b>\$123,875</b>
Ordinance or Law Broadened	<b>NOT PROVIDED</b>
ADVANTAGE - Blanket Additional Limit	<b>\$100,000</b>

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL  
PROPERTY DECLARATIONS**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **020** Construction: **FRAME**  
 Premises Address **3383-3397 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **OL** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE
Building - Blanketed - Replacement cost	INCLUDED
Business Personal Property -	NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>	
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit	INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period	INCLUDED
Equipment Breakdown	INCLUDED
Automatic Increase in Insurance - Building	3%
Automatic Increase in Insurance - Business Personal Property	NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)	<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure	INCLUDED

OPTIONAL INCREASED LIMITS	Included Limit	Additional Limit
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000

OPTIONAL COVERAGES - Other frequently purchased coverage options.	
Employee Dishonesty \$250,000 Policy Occurrence	INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion	INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction	\$123,875
Ordinance or Law Broadened	NOT PROVIDED
ADVANTAGE - Blanket Additional Limit	\$100,000

**PROTECTIVE SAFEGUARDS**

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

**PREMIER BUSINESSOWNERS POLICY**

**PREMIER HABITATIONAL**

**MORTGAGEE ASSIGNMENT INFORMATION**

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

Additional Interest: Interest Number: Loan Number:  
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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **021** Construction: **FRAME**  
 Premises Address **3409-3415 & 3704-3710 FOXTAIL TERR** **FREMONT CA 94536-0000**  
 Premises ID  
 Occupancy **00** Classification: **CONDOMINIUM ASSOCIATION - RESIDENTIAL - MULTIPLE BUILDINGS AT A PREMISES WITH 5 OR MORE UNITS - 5 UNIT OR MORE**  
 Described as: **CONDOMINIUM**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		<b>\$5,000</b>
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	\$25,000
Valuable Papers and Records (At the Described Premises)	\$25,000	\$25,000
Forgery and Alteration	\$10,000	\$10,000
Money and Securities - Inside the Premises	\$10,000	\$10,000
Outside the Premises (Limited)	\$10,000	\$10,000
Outdoor Signs	\$2,500	\$2,500
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	\$10,000
Business Personal Property Away From Premises	\$15,000	\$15,000
Business Personal Property Away From Premises - Transit	\$15,000	\$15,000
Electronic Data	\$10,000	\$10,000
Interruption of Computer Operations	\$10,000	\$10,000
Building Property of Others	\$10,000	\$10,000
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		INCLUDED
2 - Demolition Cost and Broadened Increased Cost of Construction		\$56,113
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		\$100,000

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

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## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL PROPERTY DECLARATIONS

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**  
 Description of Premises Number: **001** Building Number: **022** Construction: **FRAME**  
 Premises Address **3190 RED CEDAR TER** **FREMONT CA 94536-3759**  
 Premises ID  
 Occupancy **OL** Classification: **GARAGES, CARPORTS OR STORAGE BUILDINGS**

Described as: **CARPORT**

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".

The Property Coverage provided at this premises is subject to a **\$ 5,000** Deductible, unless otherwise stated.

COVERAGES	LIMITS OF INSURANCE	
Building - Blanketed - Replacement cost		INCLUDED
Business Personal Property -		NOT PROVIDED
<b>ADDITIONAL COVERAGES - the Coverage Form Includes other Additional Coverages not shown.</b>		
Business Income - ALS - 12 Months - NO Hour Waiting Period - 60 Day Ordinary Payroll Limit		INCLUDED
Extra Expense - Actual Loss Sustained (ALS) - 12 Months - NO Hour Waiting Period		INCLUDED
Equipment Breakdown		INCLUDED
Automatic Increase in Insurance - Building	3%	
Automatic Increase in Insurance - Business Personal Property		NOT PROVIDED
Back Up of Sewer and Drain Water (limit shown per Building, subject to \$100000 policy aggregate)		NOT PROVIDED
	<b>\$5,000</b>	
Appurtenant Structures - 10% of Building Limit of Insurance - maximum \$50,000 any one structure		INCLUDED
Increased Cost of Construction		<b>\$25,000</b>
<b>OPTIONAL INCREASED LIMITS</b>		
	<b>Included Limit</b>	<b>Additional Limit</b>
Account Receivable	\$25,000	<b>\$25,000</b>
Valuable Papers and Records (At the Described Premises)	\$25,000	<b>\$25,000</b>
Forgery and Alteration	\$10,000	<b>\$10,000</b>
Money and Securities - Inside the Premises	\$10,000	<b>\$10,000</b>
Outside the Premises (Limited)	\$10,000	<b>\$10,000</b>
Outdoor Signs	\$2,500	<b>\$2,500</b>
Outdoor Trees, Shrubs, Plants and Lawns	\$10,000	<b>\$10,000</b>
Business Personal Property Away From Premises	\$15,000	<b>\$15,000</b>
Business Personal Property Away From Premises - Transit	\$15,000	<b>\$15,000</b>
Electronic Data	\$10,000	<b>\$10,000</b>
Interruption of Computer Operations	\$10,000	<b>\$10,000</b>
Building Property of Others	\$10,000	<b>\$10,000</b>
<b>OPTIONAL COVERAGES - Other frequently purchased coverage options.</b>		
Employee Dishonesty \$250,000 Policy Occurrence		INCLUDED
Ordinance or Law - 1 - Loss to Undamaged Portion		NOT PROVIDED
2 - Demolition Cost and Broadened Increased Cost of Construction		NOT PROVIDED
Ordinance or Law Broadened		NOT PROVIDED
ADVANTAGE - Blanket Additional Limit		<b>\$100,000</b>

#### PROTECTIVE SAFEGUARDS

This premise has Protective Safeguards identified by symbols below. Insurance for Fire or Burglary and Robbery at this premise will be excluded if you do not notify us immediately if any of these safeguards are impaired. See **PB 04 30** for a description of each symbol. APPLICABLE SYMBOLS: **NOT APPLICABLE**

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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03538

## PREMIER BUSINESSOWNERS POLICY

### PREMIER HABITATIONAL

#### MORTGAGEE ASSIGNMENT INFORMATION

Policy Number: **ACP BPH 3017541932** Policy Period: From **03-03-17** To **03-03-18**

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 DIRECT BILL LN1X SKS INSURED COPY UID A3 47 03539



# PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL

## LIABILITY DECLARATIONS

Policy Number: **ACP BPH 3017541932**

Policy Period:  
From **03-03-17** To **03-03-18**

### LIMITS OF INSURANCE

Each Occurrence Limit of Insurance	Per Occurrence	<b>\$1,000,000</b>
Medical Payments Coverage Sub Limit	Per Person	<b>\$5,000</b>
Tenants Property Damage Legal Liability Sub Limit	Per Covered Loss	<b>\$300,000</b>
Personal and Advertising Injury	Per Person Or Organization	<b>\$1,000,000</b>
Products – Completed Operations Aggregate	All Occurrences	<b>\$2,000,000</b>
General Aggregate	All Occurrences	<b>\$2,000,000</b>

(Other than Products – Completed Operations)

### AUTOMATIC ADDITIONAL INSUREDS STATUS

The following persons or organizations are automatically insureds when you and they have agreed in a written contract or agreement that such person or organization be added as an additional insured on your policy.

- Co-Owners of Insured Premises
- Controlling Interest
- Grantor of Franchise or License
- Lessors of Leased Equipment
- Managers or Lessors of Leased Premises
- Mortgagee, Assignee or Receiver
- Owners or Other Interest from Whom Land has been Leased
- State or Political Subdivisions - Permits Relating to Premises

### PROPERTY DAMAGE DEDUCTIBLE

NONE

### OPTIONAL COVERAGES

Hired Auto Liability Coverage	Included in Each Occurrence Limit of Insurance
Nonowned Auto Liability Coverage	Included in Each Occurrence Limit of Insurance
Directors & Officers Liability	Per Occurrence <b>\$1,000,000</b>
Directors & Officers Liab-Retro Date 03/03/16	Aggregate <b>\$1,000,000</b>

# PREMIER BUSINESSOWNERS POLICY

PREMIER HABITATIONAL

## FORMS AND ENDORSEMENTS SUMMARY

Policy Number: **ACP BPH 3017541932**

Policy Period:  
From **03-03-17** To **03-03-18**

FORM NUMBER	TITLE
L10021	0101 NUCLEAR ENERGY LIABILITY EXCLUSION
PB0002	1114 PREMIER BUSINESSOWNERS
PB0006	1114 PREMIER BUSINESSOWNERS LIABILITY COVERAGE FORM
PB0009	1114 PREMIER BUSINESSOWNERS COMMON POLICY CONDITIONS
PB0404	0101 HIRED AUTO AND NON-OWNED AUTO LIABILITY
PB0412	0101 LIMITATION OF COVERAGE TO DESIGNATED PREMISES
PB0523	0715 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
PB1504	1114 ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION
PB1701	1114 CONDOMINIUM ASSOCIATION COVERAGE
PB2099	0411 BUSINESSOWNERS ADVANTAGE
PB2998	0908 EXCLUSION - VIOLATION OF CONSUMER PROTEC
PB2999	0215 EXCLUSION - FUNGI OR BACTERIA
PB4100	0515 DIRECTORS AND OFFICERS LIABILITY (COOPERATIVES OR CONDOMINIUM)
PB5422	0406 AMENDMENT - EMPLOYEE DISHONESTY OPTIONAL COVERAGE - CONDOMINIUM
PB9004	0411 CALIFORNIA AMENDATORY ENDORSEMENT
<b>IMPORTANT NOTICES</b>	
IN7406	0107 IMPORTANT FLOOD INSURANCE NOTICE
IN7809	1115 DATA BREACH & IDENTITY RECOVERY SERVICES
IN0001	0416 CONSUMER COMPLAINTS AND INFORMATION