AGENCY

BEEHIVE INSURANCE AGENCY INC

43-0043-00

INSURED COUNTRY CLUB RIDGE CONDOMINIUM

MKT TERR 076

Company Bill

POLICY NUMBER 244643-57732288-24

12-18-2024

57-46-UT-2412

Term 12-12-2024 to 12-12-2025

Issued

54104 (07-87)

COMMERCIAL PROPERTY COVERAGE

55198 (12-10)

PREMIER PROPERTY PLUS COVERAGE PACKAGE DECLARATION

The coverages and limits below apply separately to each location or sublocation that sustains a loss to covered property and is designated in the Commercial Property Coverage Declarations. No deductible applies to the below Property Plus Coverages.

COVERAGE	LIMIT
ACCOUNTS RECEIVABLE	\$200,000
BAILEES	\$15,000
NONE	\$10,000 PER ITEM
BUSINESS INCOME & EXTRA EXPENSE W/RENTAL	\$150,000
VALUE, INCLUDING NEWLY ACQUIRED LOC'S	
0 HOUR WAITING PERIOD	
DEBRIS REMOVAL	\$100,000
ELECTRONIC DATA PROCESSING EQUIPMENT	\$100,000
EMPLOYEE DISHONESTY	\$50,000
FINE ARTS, COLLECTIBLES AND MEMORABILIA	\$50,000
	\$10,000 PER ITEM
FIRE DEPARTMENT SERVICE CHARGE	\$25,000
FORGERY AND ALTERATION	\$50,000
MONEY AND SECURITIES INSIDE PREMISES	\$50,000
MONEY AND SECURITIES OUTSIDE PREMISES	\$50,000
NEWLY ACQUIRED BUSINESS PERSONAL PROPERTY	\$500,000 FOR 90 DAYS
NEWLY ACQUIRED OR CONSTRUCTED PROPERTY	\$1,000,000 FOR 90 DAYS
ORDINANCE OR LAW	SEE COMMERCIAL PROPERTY
	DECLARATIONS
OUTDOOR PROPERTY	\$25,000
TREES, SHRUBS OR PLANTS	\$1,000 PER ITEM
RADIO OR TELEVISION ANTENNAS	\$20,000
PERSONAL EFFECTS AND PROPERTY OF OTHERS	\$50,000
POLLUTANT CLEAN UP AND REMOVAL	\$100,000
PROPERTY IN TRANSIT	\$100,000
PROPERTY OFF PREMISES	\$100,000
REFRIGERATED PRODUCTS	\$25,000
SALESPERSON'S SAMPLES	\$25,000

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		PR	EMIER PROP	ERTY PLUS	COVERAGE	PACKAGE	DECLARAIN			
COVERAGE									LIMIT	
LITILITY	SERVICES F	AILURE								\$150,000
			RDS ON PRFI	MISES						\$150,000
VALUABLE PAPERS AND RECORDS ON PREMISES VALUABLE PAPERS AND RECORDS OFF PREMISES									\$25,000	
			S OR DRAINS							\$50,000
	at apply to this			54334	(12-10)	64020	(12-10)	54189	(12-10)	
64004	(12-10)	54198 54218	(12-10) (03-13)	54217	(07-17)	54216	(03-13)	54214	(03-13)	
54186 54221	(12-10) (12-10)	54210	(06-00)	54219	(12-10)	54338	(03-13)	54339	(03-13)	
64010	(12-10)	64352	(12-20)	64000	(12-10)					

Coverages Provided

Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

LOCATION 0001 - BUILDING 0001

Location: 2665 E Parleys Way, Salt Lake City, UT 84109-1612

Occupied As: Association

Secured Interested Parties: None

Rating Information

Territory: 181 Program: Service Protection Class: 01 County: Salt Lake Construction: Frame Class Code: 0702

Class Rate - Building: 0.170 Rated As Sprinklered

Class Rate - Pers Prop: 0.139

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
BUILDING			\$14,600,000		
Causes of Loss Basic Group I	80%	\$50,000		0.019	\$2,774.00
Basic Group II	80%	\$50,000		0.007	\$1,022.00
Special	80%	\$50,000		0.014	\$2,044.00
Theft	80%	\$50,000			Included
OPTIONAL COVERAGE					
Inflation Guard Factor Building 1.002					
Replacement Cost					
Equipment Breakdown		\$50,000	See Form 54843	!!!	\$187.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$991.00
Tier: Premier					

AGENCY BEEHIVE INSURANCE AGENCY INC

43-0043-00

MKT TERR 076

NSURED COUNTRY CLUB RIDGE CONDOMINIUM

Issued

Company PC Bill

POLICY NUMBER 244643-57732288-24 57-46-UT-2412

Term 12-12-2024 to 12-12-2025

12-18-2024

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
ORDINANCE OR LAW		\$50,000	Incl in Bldg Limit		Included
Coverage A-Undamaged Portion			\$500,000		\$174.00
Coverage B-Demolition		\$50,000			\$174.00
Coverage C-Increased Cost		\$50,000	\$500,000	1	\$174.00
PERSONAL PROPERTY			\$25,309		
Causes of Loss	80%	\$50,000		0.050	\$13.00
Basic Group I				0.020	\$5.00
Basic Group II	80%				
Special	80%	\$50,000		0.120	\$30.00
Theft	80%	\$50,000			Included
OPTIONAL COVERAGE					
Replacement Cost					
Inflation Guard Factor Personal Property 1.028					
		\$50,000	See Form 54843		\$1.00
Equipment Breakdown		None	See 55198 (12-10)		\$8.00
Property Plus Coverage Package					
Tier: Premier					
ORDINANCE OR LAW Coverage D-Tenant's I&B		\$50,000	\$160,000		Included
Forms that apply to this building:					
59350 (01-15) 54835 (07-08)	IL0266 (07-2	(1) IL0003	(07-02) CPC		-96)
64224 (01-16) 59325 (12-19)	64326 (07-1		7 (11-85) 643	• 111 011	-22)
CP0090 (07-88) 64045 (07-13)	64000 (12-1		,		-10)
64352 (12-20) 54843 (07-19)	64020 (12-1	.0) 64004	(12-10) 593	AN (TT	-20)
COMMERCIAL PROPERTY COVERAGE - LOC	ATION 0001 SUMM	IARY			PREMIUM
THE PARTS OF FORM					\$148.0

	PKEMIOM
	\$148.00
LOCATION 0001	\$7,571.00
	LOCATION 0001

55040 (11-87)

COMMERCIAL GENERAL LIABILITY COVERAGE

COVERAGE	LIMITS OF INSURANCE
General Aggregate	\$2,000,000
(Other Than Products-Completed Operations)	
Products-Completed Operations Aggregate	\$2,000,000
Personal And Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000
Assn Directors/Officers Errors and Omissions Agg	\$1,000,000
Assn Directors/Officers Errors and Omissions Occ	\$1,000,000
Hired Auto & Non-Owned Auto	\$1,000,000 Each Occurrenc

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COVERAGE	LIMITS OF INSURANCE
COMMERCIAL GENERAL LIABILITY PLUS ENDORSEMENT	
Damage to Premises Rented to You	\$300,000 Any One Premises
(Fire, Lightning, Explosion, Smoke or Water Damage)	
Medical Payments	\$10,000 Any One Person
Hired Auto & Non-Owned Auto	\$1,000,000 Each Occurrence
Expanded Coverage Details See Form:	
Extended Watercraft	
Personal Injury Extension	
Broadened Supplementary Payments	
Broadened Knowledge Of Occurrence	
Additional Products-Completed Operations Aggregate	
Blanket Additional Insured - Lessor of Leased Equipment	
Blanket Additional Insured - Managers or Lessors of Premises	
Newly Formed or Acquired Organizations Extension	
Blanket Waiver of Subrogation	

Twice the "General Aggregate Limit", shown above, is provided at no additional charge for each 12 month period in accordance with form 55885.

AUDIT TYPE: Non-Audited

Forms that apply to this coverage:

l Ollis ul	at apply to time o			FF116	100 011	002106	(05-14)	CG2109	(06-15)
59350	(01-15)	55405	(07 - 08)	55146	(06-04)	CGZIUO	\ /		
		FF010	/OF 17\	55028	(05-17)	55084	(06-04)	IL0021	(07 - 02)
55091	(05-17)	550IU	(05-17)				,		
E022E	(12 10)	CC0001	(04-13)	CG0186	(11-94)	IL0017	(11 - 85)	55513	(05-17)
59325	(12-19)		1373		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	000120	(OF OO)	CG2147	(12 - 07)
55029	(05-17)	CG2196	(03 - 05)	IL0266	(07-21)	CG2132	(05-09)	CGZITI	(12 0 / /
	,								
55885	(05-17)	59390	(11-20)						
	A COLUMN TO SERVICE STATE OF THE PARTY OF TH								

LOCATION 0001 - BUILDING 0001

Location: 2665 E Parleys Way, Salt Lake City, UT 84109-1612

County: Salt Lake Tarritany: 002

Territory: 002	County.	Sall Lake			
CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Commercial General Liability Plus Endorsement Included At 7.5% Of The Premises Operation Premium	00501	Prem/Op	Prem/Op Prem Included	Included	Included
Assn Directors/Officers Errors And Omissions	00811	Professional	Flat Charge 5		\$169.00
Hired Auto & Non-Owned Liability	04001	Auto	Flat Charge		\$68.00
Homeowners &/Or Mobile Homeowners Association - No Buildings Or Premises Owned Or Leased Except For Office Purposes. (For-Profit)	41669	Prem/Op Prod/Comp Op	_	Each 1 1.218 .129	\$6.00 \$1.00

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COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0001 SUMMARY				
	SEE FORM: 59350, 55405, 59390		\$2.00	
		LOCATION 0001	\$246.00	

55041 (02-88)

COMMERCIAL CRIME COVERACE

THIS DECLARATIONS PAGE SHOWS THE COVERAGE FORM(S) AND SECTION(S) WHICH APPLY AND FOR WHICH YOU HAVE PAID A PREMIUM.

Plan: 01 Combination Crime-Separate Limits Option

Location: All Premises

COVERAGE	BY PERSON/ POSITION	SECTION	LIMIT	DEDUCTIBLE	PREMIUM
A-Blanket Employee Dishonesty			\$50,000	\$0	\$195.00

Cancellation of prior insurance: By acceptance of this fidelity bond you give us notice cancelling prior fidelity bond with the cancellation to be effective at the time this policy becomes effective.

Forms that apply to all premises:

(01-16)29415 (07-02)IL0003 IL0266 (07-21) (07-13)25034 IL0017 (11-85) (07-16)25053 (01 - 86)CC175 CR1000 (06-95) (10-90)CR0001 59325 (12-19)

COMMERCIAL CRIME COVERAGE - ALL PREMISES PREMIUM SUMMARY			
	ALL PREMISES PREMIUM	\$195.00	