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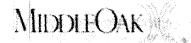
# **COUNTRY Mutual Insurance Company**

### Hardings 1900 Businessowners Policy Declarations of the server agong fraphyrologic

	Agent Name and Address
Salem Square Condominium Association 521 Zorn Ave Apt G3 Louisville, KY 40206-1466	LOGAN LAVELLE HUNT INS AGENCY LLC 11420 BLUEGRASS PKY LOUISVILLE, KY 40299-2348
<ul><li>(株分を新りがする)から、以上はおし、以外は飲みがまた。</li><li>(大利の第十分をおきて第二の一般的も必ずまた。</li></ul>	Agency Code 03769 Agency Phone 502-499-6880
Policy Period: From: 09/06/2020 To: 09/06/	2021 at 12:01 A.M., Standard Time at your mailing address shown above.
Business Description: Condominium/CAPs	ure Form of Business: Corporation private
In return for the payment of the premium, and su insurance as stated in this policy.	bject to all the terms of this policy, we agree with you to provide the
eng desergen eigen maat gebeure. Die geleiche is gebeur dem in zermanne van de zeitspelijkeliche Soewer sein de Soewer So	
Described Premises Limits of Property Insurance and Deductibles	See Location and Building Schedule See below and Location and Building Schedule
Deductibles	processors with the second section of the second se
All Peril Deductible \$10,000	details, see the Location and Building Schedule and any attached
Deductible forms.	
Deductible forms.	Soo nano 2
Deductible forms.  Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annuments.	See page 2  each paid claim for the following liability coverages reduces the amount of al period. Please refer to Paragraph D.4 Section II – Liability in the ed endorsements.
Optional Coverages  Except for Damage to Premises Rented to You, a insurance we provide during the applicable annu-	See page 2  each paid claim for the following liability coverages reduces the amount of al period. Please refer to Paragraph D.4 Section II – Liability in the ed endorsements.  Limits of Insurance
Deductible forms.  Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annual Businessowners Coverage Form and any attached Liability and Medical Expenses  Medical Expenses	See page 2  each paid claim for the following liability coverages reduces the amount of al period. Please refer to Paragraph D.4 Section II – Liability in the ed endorsements.
Deductible forms.  Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annual Businessowners Coverage Form and any attached Liability and Medical Expenses	See page 2  each paid claim for the following liability coverages reduces the amount of al period. Please refer to Paragraph D.4 Section II – Liability in the ed endorsements.  Limits of Insurance  \$1,000,000 per Occurrence \$2,000,000 General Aggregate \$5,000 per Person
Deductible forms.  Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annual Businessowners Coverage Form and any attached Liability and Medical Expenses  Medical Expenses	See page 2  each paid claim for the following liability coverages reduces the amount of al period. Please refer to Paragraph D.4 Section II – Liability in the ed endorsements.  Limits of Insurance  \$1,000,000 per Occurrence \$2,000,000 General Aggregate \$5,000 per Person \$300,000 Any one fire or explosion
Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annual Businessowners Coverage Form and any attached Liability and Medical Expenses  Medical Expenses Damage to Premises Rented to You	See page 2  each paid claim for the following liability coverages reduces the amount of all period. Please refer to Paragraph D.4 Section II – Liability in the ead endorsements.  Limits of Insurance  \$1,000,000 per Occurrence \$2,000,000 General Aggregate \$5,000 per Person \$300,000 Any one fire or explosion  Premium  Policy Premium \$28,673.00 Tax or Surcharge \$2,093.14 Total Policy Premium \$30,766.14 Payment Plan \$30,766.14
Optional Coverages  Except for Damage to Premises Rented to You, of insurance we provide during the applicable annual Businessowners Coverage Form and any attached Liability and Medical Expenses  Medical Expenses	See page 2  each paid claim for the following liability coverages reduces the amount of all period. Please refer to Paragraph D.4 Section II – Liability in the ead endorsements.  Limits of Insurance  \$1,000,000 per Occurrence \$2,000,000 General Aggregate \$5,000 per Person \$300,000 Any one fire or explosion  Premium  Policy Premium \$28,673.00 Tax or Surcharge \$2,093.14 Total Policy Premium \$30,766.14 Payment Plan \$30,766.14

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Policy Number: Prior Pol No: Billing Number:

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WA0200215994-02 WA0200215994-01 0200215994

### COUNTRY Mutual Insurance Company

#### **Businessowners Policy Declarations**

Named Insured:

Salem Square Condominium Association

Agency Name:

LOGAN LAVELLE HUNT INS AGENCY LLC

Agency Code:

03769

**Policy Period** 

From: 09/06/2020 To: 09/06/2021 12:01 A.M., Standard Time

Optional Coverages	Limits of Insurance		
	-40pg		terment our d
WORLDS APART Advantage Endorsement			
Equipment Breakdown	I State of the second of the second		$-\lambda_{i}\left( \sqrt{2}J_{i}^{2}+Y_{i}^{2}+Q_{i}^{2}+X_{i}^{2}Q_{i}^{2}\right) +N_{i}^{2}Q_{i}^{2}+N_{$
Building Limit – Automatic Increase 3%	A Section of the Control of the Cont	87.43	1/4 500
CAPsure Community Association Coverage (All In) Employee Dishonesty		\$250,000	
Property Management Agent As An Employee Covere	d For "Employee	Art III.	As As a factor
Dishonesty" Only		4,400 444	
Employee Dishonesty for Designated Community Ass	ociation Officers And	186	er er er er
	医乳球性 医骶髓 化二氯二甲基甲基磺基	81.840	E SAME
Forgery and Alteration Ordinance or Law Blanket*	Annual Control of the	\$250,000 \$500,000	
Ordinance Or Law Business Income And Extra Expen		la i mi	
Extended Business Income	TELEPHONE SWELL CONTROL AT COMMON	90 Days	
	the section of the following field being be-	\$1,000,000	<b>经</b> 基价值 的现在分词
Aggregate Limits of Insurance Per Location	Section of the sectio	1 4 1 74 1 4	W. Walter
*Coverages may not apply to all buildings, please refe	r to your schedules for details.		

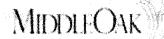
Policy Forms and Endorsements attached at issuance:

See Schedule of Forms and

Endorsements

If you wish to request a copy of your policy, contact your agent or call our Customer Service Center at 1-800-662-6243.

THIS POLICY DECLARATION TOGETHER WITH THE COVERAGE FORM(S), FORMS AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.



Policy Number: WA0200215994-02 Policy Period: From: 09/06/2020 To: 09/06/2021

# **COUNTRY Mutual Insurance Company**

Named Insured: Salem Square Condominium Association

Agency Name: LOGAN LAVELLE HUNT INS AGENCY LLC

Agency Code:

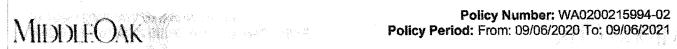
03769

#### Schedule of Forms and Endorsements

Form Number		Title
IOCTAVEODIA	06.40	Kontucky Municipal Tay Schodulo
KYTAXFORM PRIV	06-12 09-19	Kentucky Municipal Tax Schedule  Privacy Statement
PNWA 09	06-19	Kentucky Municipal Tax Notice
PNWA 17	02-20	Other Inc. worse Delice helder Notice
PNWA 01	05-20	WORLDS APART Businessowners Program Notice To Policyowners
AWA DS 03	06-12	Worlds Apart Declarations   April 19   September   Declarations   Declarat
AWA 68 51	04-19	Mutual Conditions COUNTRY Mutual Insurance Company
FORM-SCHED	06-12	Schedule of Forms and Endorsements
LOC-SUM	06-12	Common of Locations Sections
LOC-BLDG	06-12	And the second Death Bear Cohe della
TAX-FORM	06-12	Schedule Of Taxes, Surcharges Or Fees
AWA 66 14	02-17	Worlds Apart Advantage Endorsement
BP 00 03	01-10	Businessowners Coverage Form
BP IN 01	01-10	Businessowners Coverage Form Index
AWA 68 84	02-20	Other Insurance
AIL 10 01	06-06	Lead Liability Exclusion
AIL 10 08	06-06	Exclusion - Tanning Beds And Tanning Bed Operations
AIL 10 11	06-06	Punitive Damages Exclusion
AIL 10 12	06-06	Equipment Breakdown Coverage
AWA 05 15	01-16	Disclosure Pursuant To Terrorism Risk Insurance Act
AWA 66 80	01-12	Replacement Cost - Building(s)
AWA 66 81	01-12	Debris Removal Coverage and Guaranteed Replacement Cost - Building(s)
AWA 67 01		CAPsure Community Association Coverage
AWA 68 72	12-17	Exclusion - Real Estate Development and Construction Activities
AWA 67 08	06-12	Employee Dishonesty Coverage For Designated Community Association Officers And Directors
AWA 68 25	12-17	Ordinance or Law Coverage - Blanket Limit
AWA 68 27	02-16	Limitation Of Coverage To Designated Premises With Special Events Exception
BP 01 65	07-02	Kentucky Changes
BP 04 04	01-10	Hired & Nonowned Auto
BP 04 17	01-10	Employment-Related Practices Exclusion
BP 04 39	07-02	Abuse or Molestation Exclusion
AWA 68 58	02-17	Water Backup and Sump Overflow
BP 05 01	07-02	Calculation of Premium
BP 05 26	01-15	Cap On Losses From Certified Acts Of Terrorism

FORM-SCHED 06 12

Page 1 of 2



# COUNTRY Mutual Insurance Company

Named Insured:

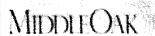
Salem Square Condominium Association

Agency Name:

LOGAN LAVELLE HUNT INS AGENCY LLC Agency Code: 03769

#### Location and Building Schedule

Bldg #1 521 Zorn Ave	Primary Residential Association	Masonry Veneer 12 Units
	etus kanusus uniterapus pari famusini pia kad nagi inapirinapirina kanus kitimba asubinjin moj inapirina histori	Limit
Building Coverage		\$1,710,475
Guaranteed Replacement Cost		
Included in Ordinance or Law Blanket		and the second appropriate appropriate of
Earthquake		er og floritern flygt er og hat er inneft måligt
Earthquake Deductible 5%		£40,000
Water Backup and Sump Overflow	Maria Cara	\$10,000 \$10,000 \$10,000
Water Backup and Sump Overflow Business Income		1978 Start British 2 101000.
Bldg #2 521 Zorn Ave	Primary Residential Association	Masonry Veneer 12 Units
	a ce friedrich eige ( go., auf jegen bei g., ann februik ( heeren vorgen nieden die meter ( gegen b. dinnes me	Limit
Building Coverage	•	\$1,977,961
Guaranteed Replacement Cost		
Included in Ordinance or Law Blanket		
Earthquake		r de entre de la companya de la com La companya de la co
Earthquake Deductible 5%		The second section is a second second section of the second section is a second section of the second section
Water Backup and Sump Overflow		\$10,000
Water Backup and Sump Overflow Business Income		\$10,000
Dida #95 89 E94 Zam Nice	Primary Residential Mesonry Vencor 8 Units	
Bldg #3 18 521 Zorn Ave	Association	Masonry Veneer 8 Units
		Limit \$1,370,339
Building Coverage		\$1,370,339
Guaranteed Replacement Cost		\$P\$1. 医14数 医多二酚基 电极解电压 2. 2011
Included in Ordinance or Law Blanket		A color for all being sound to come in constitution
Earthquake Earthquake Deductible 5%		read with extrager to be opened with
Water Backup and Sump Overflow		\$10,000
AND DEPARTS OF THE PROPERTY OF		φ ισ,σσο



Policy Number: WA0200215994-02 Policy Period: From: 09/06/2020 To: 09/06/2021

COUNTRY Mutual Insurance Company

Named Insured:

Salem Square Condominium Association

**Agency Name:** 

LOGAN LAVELLE HUNT INS AGENCY LLC

**Agency Code:** 

03769

Location and Building Schedule

Bldg #4

521 Zorn Ave

Primary Residential Association

Masonry Veneer

16 Units

Limit

**Building Coverage** 

\$2,709,761

HOMORE OF SERVICE

Guaranteed Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Water Backup and Sump Overflow

\$10,000

Water Backup and Sump Overflow Business Income

\$10,000

Bldg #5

521 Zorn Ave

Primary Residential Association

Masonry Veneer 8 Units

Limit

**Building Coverage** 

\$1,072,155

SQUEST OF BUILDING

Guaranteed Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Water Backup and Sump Overflow

Water Backup and Sump Overflow Business Income

Security was become the second

\$10,000 \$10,000

Bidg #6

521 Zorn Ave

Primary Residential Association

Masonry Veneer 12 Units

Limit

**Building Coverage** 

\$1,733,842

Guaranteed Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Water Backup and Sump Overflow

\$10,000

Water Backup and Sump Overflow Business Income

Bldg #7

521 Zorn Ave

Primary Residential Association

Masonry Veneer 8 Units



**Policy Number:** WA0200215994-02

Policy Period: From: 09/06/2020 To: 09/06/2021

# **COUNTRY Mutual Insurance Company**

Named Insured:

Salem Square Condominium Association

**Agency Name:** 

LOGAN LAVELLE HUNT INS AGENCY LLC

Agency Code:

03769

Location and Building Schedule

**Building Coverage** 

Limit \$1,060,038

Guaranteed Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Water Backup and Sump Overflow

\$10,000

Water Backup and Sump Overflow Business Income

\$10,000

Bldg #8

521 Zorn Ave

Primary Residential Association

Masonry Veneer

16 Units

Limit

**Building Coverage** 

\$2,201,121

Guaranteed Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Water Backup and Sump Overflow

\$10,000

Water Backup and Sump Overflow Business Income

\$10,000

Bldg #9

521 Zorn Ave

Outbuilding / Pool / Misc. Structure

Masonry noncombustible

0 Units

**Building Coverage** 

\$53,561

Limit

Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Windstorm or Hail Losses to Roof Surfacing - Actual Cash Value Loss

Settlement - see form BP 14 04 01 10

Bldg #10

521 Zorn Ave

Outbuilding / Pool / Misc. Structure Masonry noncombustible

0 Units

**Building Coverage** 

Limit

Replacement Cost

\$26,781

LOC-BLDG 06 12

Page 3 of 4



Policy Number: WA0200215994-02

Policy Period: From: 09/06/2020 To: 09/06/2021

### COUNTRY Mutual Insurance Company

Named Insured:

\$alem Square Condominium Association

Agency Name:

LOGAN LAVELLE HUNT INS AGENCY LLC

Agency Code:

Location and Building Schedule

Included in Ordinance or Law Blanket

Earthquake

Earthquake Deductible 5%

Windstorm or Hail Losses to Roof Surfacing - Actual Cash Value Loss

Settlement - see form BP 14 04 01 10

Bldg #11

521 Zorn Ave

Outbuilding / Pool / Misc. Structure

Clubhouse

Fire resistive 0 Units

Masonry Veneer

\*\*Citros (198,831

PART OF GROWN SERVER OF BEING BEFORE

HORELET U.S. FOO MONAPHING IN LIEU L. T.

Profesional and the common

\$535,613

0 Units Limit

BERTSHOTT DATE:

Limit

**Building Coverage** 

Replacement Cost

Included in Ordinance or Law Blanket

Earthquake

Bldg #12

Earthquake Deductible 5%

**Building Coverage Guaranteed Replacement Cost** Included in Ordinance or Law Blanket

521 Zorn Ave

Earthquake

Earthquake Deductible 5%

LOC-BLDG 06 12

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