

INSURANCE COMPANY
6101 ANACAPRI BLVD., LANSING, MI 48917-3999

TAILORED PROTECTION POLICY DECLARATIONS

AGENCY THE INSURANCE CENTER OF UTAH LLC
43-0098-00 MKT TERR 096 801-374-1990

Renewal Effective 06-28-2025

INSURED SILVER BIRCH CONDOMINIUM
ASSOCIATION
C/O GAYLE BAUM

POLICY NUMBER 224643-57916377-25

Company Use 57-46-UT-2206

ADDRESS 762 E 100 N

PAYSON UT 84651-2345

Company
Bill

Policy Term

12:01 a.m. to 12:01 a.m.
06-28-2025 to 06-28-2026

In consideration of payment of the premium shown below, this policy is renewed. Please attach this Declarations and attachments to your policy. If you have any questions, please consult with your agent.

55039 (11-87)

COMMON POLICY INFORMATION

Business Description: Condo Association

Entity: Association

Program: Condominium-Residential Association

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PART(S):	PREMIUM
COMMERCIAL PROPERTY COVERAGE	\$3,768.00
COMMERCIAL GENERAL LIABILITY COVERAGE	\$324.00
MINIMUM PREMIUM ADJUSTMENT (GL)	\$178.00
COMMERCIAL INLAND MARINE COVERAGE	\$55.00
MINIMUM PREMIUM ADJUSTMENT (IM)	\$105.00
TOTAL	\$4,430.00

THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

Paid in Full Discount applies.

The Paid in Full Discount does not apply to fixed fees, statutory charges or minimum premiums.

Forms that apply to all coverage part(s) shown above (except garage liability, dealer's blanket, commercial automobile, if applicable):

IL0017 (11-85) 55003 (07-12) 59392 (11-20) 59349 (10-03)

A merit rating plan factor of 0.90 applies.

Countersigned By: _____

Owners Ins. Co.

Issued 05-22-2025

 AGENCY THE INSURANCE CENTER OF UTAH LLC
 43-0098-00 MKT TERR 096

 Company POLICY NUMBER 224643-57916377-25
 Bill 57-46-UT-2206

INSURED SILVER BIRCH CONDOMINIUM

Term 06-28-2025 to 06-28-2026

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 VALUE, INCLUDING NEWLY ACQUIRED LOC'S 0 HOUR WAITING PERIOD	\$150,000
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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55198 (12-10)

PREMIER PROPERTY PLUS COVERAGE PACKAGE DECLARATION

COVERAGE	LIMIT
UTILITY SERVICES FAILURE	\$150,000
VALUABLE PAPERS AND RECORDS ON PREMISES	\$150,000
VALUABLE PAPERS AND RECORDS OFF PREMISES	\$25,000
WATER BACK-UP FROM SEWERS OR DRAINS	\$50,000

Forms that apply to this coverage part:

64004 (12-10)	54198 (12-10)	54334 (12-10)	64020 (12-10)	54189 (12-10)
54186 (12-10)	54218 (03-13)	54217 (07-17)	54216 (03-13)	54214 (03-13)
54221 (12-10)	54220 (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:** 322 E 300 S, Payson, UT 84651-2526**Occupied As:** Condominiums**Secured Interested Parties:** None**Rating Information**

Territory: 250

County: Utah

Program: Condominium-Residential A

Construction: Frame

Protection Class: 03

Class Code: 0331

Class Rate - Building: 0.309

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
BUILDING			\$1,857,700		
Causes of Loss					
Basic Group I	80%	\$5,000		0.099	\$1,839.00
Basic Group II	80%	\$5,000		0.026	\$483.00
Special	80%	\$5,000		0.027	\$502.00
Theft	80%	\$5,000			Included
OPTIONAL COVERAGE					
Inflation Guard Factor Building 1.023					
Replacement Cost					
Equipment Breakdown		\$5,000	See Form 54843		\$86.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$475.00
Tier: Premier					

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INSURED SILVER BIRCH CONDOMINIUM

Term 06-28-2025 to 06-28-2026

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
ORDINANCE OR LAW					
Coverage A-Undamaged Portion		\$5,000	Incl in Bldg Limit		Included
Coverage B-Demolition		\$5,000	\$160,000		Included
Coverage C-Increased Cost		\$5,000	\$160,000		Included

Forms that apply to this building:

59351 (01-15)	54835 (07-08)	IL0266 (07-21)	IL0003 (07-02)	CP0127 (03-96)
64224 (01-16)	59325 (12-19)	64326 (07-19)	IL0017 (11-85)	64393 (08-22)
CP0090 (07-88)	64000 (12-10)	64013 (12-10)	64010 (12-10)	54843 (07-19)
64020 (12-10)	64004 (12-10)	64352 (12-20)	59392 (11-20)	

LOCATION 0001 - BUILDING 0002**Location:** 322 E 300 S, Payson, UT 84651-2345**Occupied As:** Street Signs/Meters**Secured Interested Parties:** None**Rating Information**

Territory: 250

Program: Condominium-Residential A

Protection Class: 03

Spcl Class Rate - Street Lights: 1.028

County: Utah

Construction: N/A

Class Code: 1190

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
STREET LIGHTS			\$58,000		
Causes of Loss					
Basic Group I	100%	\$5,000		0.338	\$196.00
Basic Group II	100%	\$5,000		0.172	\$100.00
Special	100%	\$5,000		0.039	\$23.00
Theft	100%	\$5,000			Included
OPTIONAL COVERAGE					
Replacement Cost					
Equipment Breakdown		\$5,000	See Form 54843		\$10.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$54.00
Tier: Premier					
ORDINANCE OR LAW					
Coverage A-Undamaged Portion		\$5,000	Incl in Bldg Limit		Included
Coverage B-Demolition		\$5,000	\$160,000		Included
Coverage C-Increased Cost		\$5,000	\$160,000		Included

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AGENCY THE INSURANCE CENTER OF UTAH LLC
43-0098-00 MKT TERR 096

Company POLICY NUMBER 224643-57916377-25
Bill 57-46-UT-2206

INSURED SILVER BIRCH CONDOMINIUM

Term 06-28-2025 to 06-28-2026

Forms that apply to this building:

59351 (01-15)	54835 (07-08)	IL0266 (07-21)	IL0003 (07-02)	CP0127 (03-96)
64224 (01-16)	59325 (12-19)	64326 (07-19)	IL0017 (11-85)	64393 (08-22)
CP0090 (07-88)	64045 (07-13)	64000 (12-10)	64010 (12-10)	54843 (07-19)
64020 (12-10)	64004 (12-10)	64352 (12-20)	59392 (11-20)	

COMMERCIAL PROPERTY COVERAGE - LOCATION 0001 SUMMARY**PREMIUM**

TERRORISM - CERTIFIED ACTS SEE FORM: 59351

EXCLUDED

TERRORISM COVERAGE

A PREMIUM CHARGE MAY BE MADE EFFECTIVE 01-01-28 SEE FORMS 54835, 59392

LOCATION 0001**\$3,768.00**

55040 (11-87)

COMMERCIAL GENERAL LIABILITY COVERAGE

COVERAGE	LIMITS OF INSURANCE
General Aggregate (Other Than Products-Completed Operations)	\$2,000,000
Products-Completed Operations Aggregate	\$1,000,000
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
COMMERCIAL GENERAL LIABILITY PLUS ENDORSEMENT	
Damage to Premises Rented to You (Fire, Lightning, Explosion, Smoke or Water Damage)	\$300,000 Any One Premises
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.

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INSURED SILVER BIRCH CONDOMINIUM

Term 06-28-2025 to 06-28-2026

AUDIT TYPE: Non-Audited

Forms that apply to this coverage:

59351 (01-15)	55405 (07-08)	55146 (06-04)	CG2106 (05-14)	CG2109 (06-15)
55091 (05-17)	55010 (05-17)	CG2167 (12-04)	IL0021 (07-02)	59325 (12-19)
CG0001 (04-13)	CG0186 (11-94)	IL0017 (11-85)	55513 (05-17)	55029 (05-17)
CG2196 (03-05)	IL0266 (07-21)	CG2132 (05-09)	CG2147 (12-07)	55885 (05-17)
CG0147 (11-13)	CG4032 (05-23)	59392 (11-20)		

LOCATION 0001 - BUILDING 0001**Location:** 322 E 300 S, Payson, UT 84651-2526**Territory:** 003**County:** Utah

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		\$167.00
Condominiums - Residential - (Association Risk Only)	62003	Prem/Op Prod/Comp Op	Units 5 5	Each 1 27.637 3.851	\$138.00 \$19.00

COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0001 SUMMARY

TERRORISM - CERTIFIED ACTS SEE FORM: 59351	EXCLUDED
TERRORISM COVERAGE	
A PREMIUM CHARGE MAY BE MADE EFFECTIVE 01-01-28 SEE FORMS 55405, 59392	
LOCATION 0001	\$324.00

16198 (07-87)

COMMERCIAL INLAND MARINE COVERAGE**COVERAGES PROVIDED**

Insurance applies to covered property for which a limit of insurance is shown.

Forms that apply to Inland Marine:

59351 (01-15)	16381 (07-08)	16080 (07-13)	16328 (01-97)	59325 (12-19)
16859 (07-19)	16329 (07-21)	16068 (03-89)	60233 (08-22)	59392 (11-20)

LOCATION 0001 - BUILDING 0001**Location:** 322 E 300 S, Payson, UT 84651-2526

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43-0098-00 MKT TERR 096

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Term 06-28-2025 to 06-28-2026

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
VALUABLE PAPER Unscheduled Coverages Receptacle Type: None		\$1,000	\$10,000	0.206	\$21.00
TOTAL FOR THIS COVERAGE:					\$21.00

Rating Information for COMMERCIAL COMPUTERS - REPLACEMENT COST

Territory: 250

County: Utah

Program: Condominium-Residential A

Construction: Frame

Protection Class: 003

Class Code: 0331

Class Rated

Group I: 0.2020

Group II: 0.0340

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
COMMERCIAL COMPUTERS - REPLACEMENT COST ELECTRONIC DATA PROCESSING (EDP): EQUIPMENT - SPECIAL FORM Unscheduled Equipment		\$500	\$10,000	Variable	\$34.00
Included Coverages:					
Media		\$500	\$5,000	Included	Included
Extra Expense		\$500	\$5,000	Included	Included
Transportation		\$500	\$10,000	Included	Included
TOTAL FOR THIS COVERAGE:					\$34.00

Forms that apply to this location:

16083 (02-99)

COMMERCIAL INLAND MARINE COVERAGE - LOCATION 0001 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59351	EXCLUDED
TERRORISM COVERAGE	
A PREMIUM CHARGE MAY BE MADE EFFECTIVE 01-01-28 SEE FORMS 16381, 59392	
LOCATION 0001	\$55.00

A single deductible applies per claim. If more than one item is involved in a claim, the single highest applicable deductible amount is used.