



The Cincinnati Insurance Company

A Stock Insurance Company

Headquarters: 6200 S. Gilmore Road, Fairfield, OH 45014-5141

Mailing address: P.O. Box 145496, Cincinnati, OH 45250-5496

www.cinfin.com ■ 513-870-2000

COMMON POLICY DECLARATIONS

Billing Method: DIRECT BILL

POLICY NUMBER EPP 007 18 97 / EBA 007 18 97

NAMED INSURED MONTERAY SHORES PUD HOMEOWNERS ASSOCIATION INC

PO BOX 206

ADDRESS

COROLLA, NC 27927-0206

(Number & Street,
Town, County,
State & Zip Code)

Previous Policy Number:

EPP0071897

Policy Period: At 12:01 A.M., STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

All coverages except Automobile and / or Garage

Policy number: EPP 007 18 97 FROM: 03-17-2020 TO: 03-17-2023

Automobile and / or Garage

Policy number: EBA 007 18 97 FROM: 03-17-2020 TO: 03-17-2021

Agency TOWNE INSURANCE AGENCY, LLC 32-132

City KITTY HAWK, NC

Legal Entity / Business Description

ORGANIZATION (ANY OTHER)

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

FORMS APPLICABLE TO ALL COVERAGE PARTS:

IA4298NC 01/07 NORTH CAROLINA NOTICE TO POLICYHOLDERS OF PROPERTY EXCLUSIONS
 IA4418NC 12/12 NORTH CAROLINA NOTICE TO POLICYHOLDERS OF PROPERTY EXCLUSIONS
 IA461 06/10 COINSURANCE CONTRACT
 IL0017 11/98 COMMON POLICY CONDITIONS
 IA102A 09/08 SUMMARY OF PREMIUMS CHARGED
 IA904 04/04 SCHEDULE OF LOCATIONS
 IA4236 01/15 POLICYHOLDER NOTICE TERRORISM INSURANCE COVERAGE
 IP446 08/01 NOTICE TO POLICYHOLDERS
 IA4006 07/10 SPECIAL PER OCCURRENCE DEDUCTIBLE ENDORSEMENT
 IA4086 05/09 EARLIER NOTICE OF CANCELLATION PROVIDED BY US
 IA4117NC 08/16 NORTH CAROLINA CHANGES - CANCELLATION AND NONRENEWAL
 IA4154NC 12/97 WINDSTORM OR HAIL REJECTION FORM
 IA4226 03/02 NOTICE TO POLICY HOLDERS FUNGI OR BACTERIA EXCLUSION ENDORSEMENTS
 IA4238 01/15 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
 IA4338 05/11 SIGNATURE ENDORSEMENT
 IL0022 05/87 EFFECTIVE TIME CHANGES - REPLACEMENT OF 12 NOON
 FM502 07/08 COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS
 GA532 07/08 COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS
 CA519XCP 03/09 CINCIPLUS® CRIME XC+® (EXPANDED COVERAGE PLUS) COVERAGE PART
 DECLARATIONS
 AA505 03/06 BUSINESS AUTO COVERAGE PART DECLARATIONS

FORMS APPLICABLE TO ALL COVERAGE PARTS:

USC513 05/10 COMMERCIAL UMBRELLA LIABILITY COVERAGE PART DECLARATIONS

HC502 01/18 CINCINNATI DATA DEFENDER™ COVERAGE PART DECLARATIONS

03-16-2020 09:21

Countersigned _____ (Date) By _____ (Authorized Representative)

COINSURANCE CONTRACT

The rate charged in this policy is based upon use of a coinsurance clause attached hereto, with the consent of the insured.

IA-461 (6/10)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF LOCATIONS

<u>LOC.</u>	<u>STREET ADDRESS</u>	<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE</u>
1	925 S HARBOR VW COROLLA, NC 27927-9622			

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: **EPP 007 18 97**

Named Insured is the same as it appears on the Common Policy Declarations unless otherwise stated here.

Loc. (address)
REFER TO IA904

COVERAGE PROVIDED					OPTIONAL COVERAGES Applicable only when an entry is made				
Item	Coverage	Limits	Coin- surance	Covered Cause Of Loss	Business Income Indemnity				
					Inflation Guard (%)	Replace- ment Cost (x)	Replac- ment Cost Ind. Stock (x)	Agreed Value (x)	Monthly Limit (fraction)
1-1	BUILDING	992,065	90%	SPECIAL		X			
1-1	BUSINESS PERSONAL PROPERTY	40,780	90%	SPECIAL		X			
1-2	WATER OR SEWAGE LIFT PUMPS, ENCLOSED OR OPEN: METAL OR MASONRY	34,609	90%	SPECIAL		X			
1-3	SWIMMING POOLS IN THE OPEN: IN GROUND: CONCRETE OR METAL	75,000	90%	SPECIAL		X			
1-4	SWIMMING POOLS IN THE OPEN: IN GROUND: CONCRETE OR METAL	20,000	90%	SPECIAL		X			

DEDUCTIBLE: \$500.00 unless otherwise stated \$ **2,500**

MORTGAGE HOLDER

Item	Name and Address

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

FM101	05/16	BUILDING AND PERSONAL PROPERTY COVERAGE FORM (INCLUDING SPECIAL CAUSES OF LOSS)
FA4168	05/16	NOTICE TO POLICYHOLDERS COMMERCIAL PROPERTY COVERAGE PART DESCRIPTION OF REVISIONS EDITION 05 16
FA305NC	04/04	WINDSTORM OR HAIL EXCLUSION - NORTH CAROLINA
FA4053	04/06	CINCIPLUS™ COMMERCIAL PROPERTY EXPANDED COVERAGE (XC™) PLUS ENDORSEMENT SUMMARY OF COVERAGE LIMITS
FA450	05/16	COMMERCIAL PROPERTY CONDITIONS
FA490NC	05/16	NORTH CAROLINA CHANGES
FA250	05/16	CINCIPLUS® COMMERCIAL PROPERTY XC+® (EXPANDED COVERAGE PLUS) ENDORSEMENT

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

FA244 05/10 EQUIPMENT BREAKDOWN COVERAGE (EXCLUDING PRODUCTION MACHINERY)

COMMERCIAL PROPERTY EXPANDED COVERAGE (XCTM) PLUS ENDORSEMENT SUMMARY OF COVERAGE LIMITS

This is a summary of the Coverages and the Limits of Insurance provided by the Commercial Property Expanded Coverage (XCTM) Plus Endorsement, **FA 250**, in combination with the Commercial Property Coverage Form, **FM101**, which is included in this policy. **No coverage is provided by this summary.** Refer to endorsement **FA 250** and the Commercial Property Coverage Form, **FM 101**, to determine the scope of your insurance protection.

<u>Blanket Coverages:</u>	<u>Blanket Coverage Limit:</u>	Page No. (FA 250):	
	\$ 150,000 in total for all loss arising from all Blanket Coverages arising from a single occurrence, except as noted otherwise in the form.		
Accounts Receivable		1	
Debris Removal		8	
Electronic Data Processing Property (EDP):		3	
Duplicate and Backup Electronic Data		\$2,000 Outside of the Blanket Coverage Limit	3
Newly Acquired EDP		\$10,000 Outside of the Blanket Coverage Limit	4
In Transit or Away From Premises		\$10,000 Outside of the Blanket Coverage Limit	4
Worldwide Laptop Coverage			4
Ordinance or Law (Increased Construction Costs and Demolition)			6
Peak Season			8
Personal Property of Others			8
Tenant Move Back Expenses		7	
Valuable Papers and Records		6	

<u>Other Coverages</u> (not subject to Blanket Coverage Limit):	<u>Limit of Insurance:</u>	Page No. (FA 250):
Brands and Labels	\$25,000	11
Business Income and Extra Expense:	\$100,000	1
Business Income From Dependent Properties	\$5,000 (sub-limit, subject to a 24 hour deductible)	1
Interruption of Computer Operations	\$25,000 (sub-limit, subject to a 24 hour deductible)	2

<u>Other Coverages</u> (not subject to Blanket Coverage Limit):	<u>Limit of Insurance:</u>	Page No. (FA 250):
Fine Arts	\$25,000	5
Fire Department Service Charge	\$25,000	7
Fire Protection Equipment Recharge	\$50,000	8
Inflation Guard	4% on all Building Property referenced in the Declarations	11
Non-Owned Building Damage:		10
Loss caused by theft, burglary or robbery	Up to the Business Personal Property (BPP) Limit of Insurance	10
Loss by any other Covered Cause of Loss	\$25,000 or the BPP Limit of Insurance (whichever is less)	10
Ordinance or Law (other than Increased Construction Costs and Demolition)	Subject to the Building Limit of Insurance	6
Outdoor Property	\$25,000 (\$1,000 for any one tree, shrub or plant)	7
Paved Surfaces	\$20,000	9
Personal Effects	\$25,000 (\$1,000 for loss by theft)	7
Pollutant Clean Up and Removal	\$25,000	6
Signs	\$10,000	7
Temperature Change	\$5,000	9
Underground Property	Subject to the Building Limit of Insurance	6
Water Backup from Sewers, Drains or Sumps	\$10,000	7

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: EPP 007 18 97

Named Insured is the same as it appears in the Common Policy Dedarations

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$ 1,000,000	
GENERAL AGGREGATE LIMIT	\$ 2,000,000	
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 2,000,000	
PERSONAL & ADVERTISING INJURY LIMIT	\$ 1,000,000	ANY ONE PERSON OR ORGANIZATION
DAMAGE TO PREMISES RENTED TO YOU LIMIT		ANY ONE PREMISES
\$100,000 limit unless otherwise indicated herein:	\$ SEE GA210	
MEDICAL EXPENSE LIMIT		
\$5,000 limit unless otherwise indicated herein:	\$ SEE GA210	ANY ONE PERSON

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
HOMEOWNERS ASSOCIATION (NC) INCL PROD AND/OR COMP OP	20300 E100	EACH		2.387		239
HOMEOWNERS ASSOCIATION (NC) INCL PROD AND/OR COMP OP	20300 E287	EACH		1.197		344
WATER RETENTION BASIN (NC) INCL PROD AND/OR COMP OP	20400 E1	EACH		38.017		38
FISHING PIERS (NC) INCL PROD AND/OR COMP OP	43754 E2	EACH		121.444		243
HEALTH OR EXERCISE CLUBS (NC) INCL PROD AND/OR COMP OP	44311 C1F	ANY		4.869		STA
PARKS OR PLAYGROUNDS (NC) INCL PROD AND/OR COMP OP	46671 E1	EACH		139.995		140
PARKS OR PLAYGROUNDS (NC) INCL PROD AND/OR COMP OP	46671 E2	EACH		37.060		74
STREETS/ROADS/HIGHWAYS	48727 E6	EACH		51.697		310

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
(NC) INCL PROD AND/OR COMP OP		A - Area B - Payroll C - Gross Sales D - Units E - Other				
SWIMMING POOLS (NC) INCL PROD AND/OR COMP OP	48925 E2	EACH		172.568		345
BROADENED COVERAGE	20291			2.5%		150 MP
BI EXCEPTIONS TO POLLUTANT EXCLUSION	20420			7%		200 MP

The General Liability Coverage Part is subject to an annual minimum premium.

TOTAL ANNUAL PREMIUM \$ 2,083

FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:

GA101	12/04	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
GA4251	01/06	NOTICE TO POLICYHOLDERS - MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS
GA4497	09/18	NOTICE TO POLICYHOLDERS COMMERCIAL GENERAL LIABILITY BROADENED ENDORSEMENTS
GA4499	09/17	NOTICE TO POLICYHOLDERS COMMERCIAL GENERAL LIABILITY COVERAGE PROFESSIONAL LIABILITY EXCLUSIONS EDITION 09 17
CG2276	04/13	PROFESSIONAL LIABILITY EXCLUSION - HEALTH OR EXERCISE CLUBS OR COMMERCIALLY OPERATED HEALTH OR EXERCISE FACILITIES
GA210	09/17	COMMERCIAL GENERAL LIABILITY BROADENED ENDORSEMENT
GA3024	05/14	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
GA323	10/01	EXCLUSION - LEAD LIABILITY
GA382	03/02	FUNGI OR BACTERIA EXCLUSION
GA4250	11/05	MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS
GA478	12/04	BODILY INJURY EXCEPTIONS TO POLLUTANT EXCLUSION
GA479	03/96	ADDITIONAL INSURED - ASSOCIATIONS

THE CINCINNATI INSURANCE COMPANY

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CinciPlus[®]

CRIME XC+[®] (EXPANDED COVERAGE PLUS) COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: EPP 007 18 97

Named Insured is the same as it appears in the Common Policy Declarations

Insuring Agreements Forming Part of This Coverage Part	Limit of Insurance	Deductible Amount
	Per Occurrence/ Coverage Term	Per Occurrence
1. Employee Theft	\$25,000	\$500
2. Forgery or Alteration	\$25,000	\$500
3. Inside the Premises - Theft of Money and Securities	\$25,000	\$500
4. Outside the Premises - Theft of Money and Securities	\$5,000	\$500
5. Money Orders And Counterfeit Money	\$25,000	\$500

Forms and endorsements applicable to this Coverage Part at policy inception:

CA102 08/07 CRIME EXPANDED COVERAGE (XC[®]) COVERAGE FORM (DISCOVERY FORM)

The Crime XC+[®] (Expanded Coverage Plus) Coverage Part consists of this Declaration form and the Crime Coverage Expanded Coverage (XC[®]) Coverage Form.

THE CINCINNATI INSURANCE COMPANY

CINCINNATI, OHIO

BUSINESS AUTO COVERAGE PART DECLARATIONS

ITEM ONE

Attached to and forming part of POLICY NUMBER: EBA 007 18 97

Named Insured is the same as it appears in the Common Policy Declarations.

ITEM TWO

SCHEDULE OF COVERAGES AND COVERED AUTOS

This coverage part provides only those coverages where a premium or "incl" is shown in the premium column below. The limit of Insurance for each coverage listed is subject to all applicable policy provisions. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTO Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS (Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos)	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY	8, 9	\$ 1,000,000	INCL
PERSONAL INJURY PROTECTION (or equivalent No-fault coverage)		Separately stated in each P.I.P. endorsement minus \$	Ded.
ADDED PERSONAL INJURY PROTECTION (or equivalent added No-fault coverage)		Separately stated in each added P.I.P. endorsement	
PROPERTY PROTECTION INSURANCE (Michigan only)		Separately stated in each P. P.I. endorsement minus \$	Ded
AUTO. MEDICAL PAYMENTS		\$	
UNINSURED MOTORISTS		\$	
UNDERINSURED MOTORISTS (When not included in Uninsured Motorists Coverage)		\$	
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded. For each covered auto. But no Deductible applies to loss caused by Fire or lightning. See Item Three for hired or borrowed "autos"	
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded. For Each covered auto. For loss caused by mischief or vandalism. See Item Three for hired or borrowed "autos"	
PHYSICAL DAMAGE COLLISION COVERAGE		Actual cash value or cost of repair, Whichever is less minus \$ Ded for each covered auto. See Item Three for hired or borrowed "autos".	
PHYSICAL DAMAGE INSURANCE TOWING AND LABOR		\$ for each disablement of a private passenger auto	
PREMIUM FOR ENDORSEMENTS			INCL
*ESTIMATED TOTAL PREMIUM			

FORMS AND ENDORSEMENTS CONTAINED IN THIS COVERAGE PART AT ITS INCEPTION:

AA4183 02/06 AUTOMOBILE SCHEDULE
 AA101 03/06 BUSINESS AUTO COVERAGE FORM
 AA2009 01/17 CHANGES - TOWING AND LABOR
 AA296 07/12 CHANGES - AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT COVERAGE

FORMS AND ENDORSEMENTS CONTAINED IN THIS COVERAGE PART AT ITS INCEPTION:

AA4210 03/06 NOTICE TO POLICYHOLDERS 2006 BUSINESS AUTOMOBILE REWRITE
AA4263 04/10 OFFICE OF FOREIGN ASSETS CONTROL (OFAC) COMPLIANCE ENDORSEMENT
CA0126 07/10 NORTH CAROLINA CHANGES

* This policy may be subject to final audit

AUTOMOBILE SCHEDULE

ITEM THREE

Attached to and forming a part of Policy Number EBA 007 18 97 , effective 03-17-2020

The insurance afforded for any automobile is only with respects to such and so many of the coverages as are indicated by specific premium charge or charges indicated.

POLICY LIMITS

State: NC

Bodily Injury: 1,000,000 CSL

Property Damage: INCLUDED

Veh.
No. Vehicle Information

HIRED AND NON-OWNED						Class:	Territory
OTC-COMP DED: N/A						Coll Ded: N/A	
BI	PD	MP	OTC	COLL	UM	TOTAL	
145	INCL	N/A				145	

SYMBOLS:

- | | |
|--|-----------------------------------|
| BI -- Bodily Injury | SPEC -- Specified Perils |
| PD -- Property Damage | COLL -- Collision |
| MP -- Medical Payments | UM -- Uninsured Motorists |
| OTC -- Other Than Collision (ACV Coverage applies unless Stated Amount Value is indicated) | UIM -- Underinsured Motorists |
| CAC -- Combined Additional Coverage | PIP -- Personal Injury Protection |
| FT&S -- Fire, Theft, and Supplemental | T&L -- Towing and Labor Costs |
| | RR -- Rental Reimbursement |

THE CINCINNATI INSURANCE COMPANY

COMMERCIAL UMBRELLA LIABILITY COVERAGE PART DECLARATIONS

Previous Policy Number **EPP0071897**

Attached to and forming part of POLICY NUMBER **EPP 007 18 97** Effective Date: **03-17-2020**

NAMED INSURED is the same as it appears in the Common Policy Declarations unless another entry is made here.

LIMITS OF INSURANCE

\$ **3,000,000** Each Occurrence Limit \$ **3,000,000** Aggregate Limit

ADVANCE PREMIUM \$ 2,250

Applicable to Premium, if box is checked:

- Subject to Annual Adjustment
 Subject to Audit (see Premium Computation Endorsement for Rating Basis)

SCHEDULE OF UNDERLYING INSURANCE

Insurer, Policy Number & Period:	Underlying Insurance:	Underlying Limits:
(a)	Employer's Liability	Bodily Injury by Accident: \$ Each Accident Bodily Injury by Disease: \$ Each Employee Bodily Injury by Disease: \$ Policy Limit
(b) CINCINNATI INS. CO. EPP 007 18 97 03-17-2020 TO 03-17-2023	<input checked="" type="checkbox"/> Commercial General Liability Including: <input checked="" type="checkbox"/> Products-Completed Operations Coverage <input type="checkbox"/> Cemetery Professional <input type="checkbox"/> Druggist Professional <input type="checkbox"/> Funeral Service Provider <input type="checkbox"/> Pedorthists Professional or <input type="checkbox"/> Business Liability Including: <input type="checkbox"/> Funeral Service Provider <input type="checkbox"/> Druggist Professional	Bodily Injury and Property Damage Liability: \$ 1,000,000 Each Occurrence Limit \$ 2,000,000 General Aggregate Limit \$ 2,000,000 Products-Completed Operations Aggregate Limit Personal and Advertising Injury Limit: \$ 1,000,000 Any One Person or Organization
(c) CINCINNATI INS. CO. EBA 007 18 97 03-17-2020 TO 03-17-2023	Automobile Liability Including: <input type="checkbox"/> Owned Autos <input checked="" type="checkbox"/> Non-Owned Autos <input checked="" type="checkbox"/> Hired Autos <input type="checkbox"/> Any Auto	Bodily Injury Liability Limit: \$ Each Person \$ Each Occurrence Property Damage Liability Limit: \$ Each Occurrence or Bodily Injury Liability and / or Property Damage Liability or Both Combined Limit: \$ 1,000,000 Each Occurrence

(d)	Professional	\$	
		\$	Aggregate

(e)	CINCINNATI INS. CO. EPP 007 18 97 03-17-2020 TO 03-17-2023	Employee Benefit Liability	\$	1,000,000	Each Employee Limit
			\$	3,000,000	Aggregate Limit

(f)		Liquor Liability	\$		Each Common Cause Limit
			\$		Aggregate Limit

Other

FORMS AND / OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

US101UM	12/04	COMMERCIAL UMBRELLA - TABLE OF CONTENTS
US4060	12/04	NOTICE TO POLICYHOLDERS COMMERCIAL UMBRELLA POLICY PROGRAM
US4063	01/06	NOTICE TO POLICYHOLDERS - MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS - LIMITATION
US302	12/04	POLLUTANT EXCLUSION - OTHER THAN AUTO
US3048	12/04	FUNGI OR BACTERIA EXCLUSION
US3093	05/14	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
US386	09/17	PROFESSIONAL LIABILITY EXCLUSION - HEALTH OR EXERCISE CLUBS OR COMMERCIALY OPERATED HEALTH OR EXERCISE FACILITIES
US395	12/04	LEAD LIABILITY EXCLUSION
US4062	11/05	MOBILE EQUIPMENT SUBJECT TO MOTOR VEHICLE INSURANCE LAWS - LIMITATION
US407	12/04	EMPLOYEE BENEFIT LIABILITY
US4098	04/10	OFFICE OF FOREIGN ASSETS CONTROL (OFAC) COMPLIANCE ENDORSEMENT
US466NC	09/02	NORTH CAROLINA CHANGES

THE CINCINNATI INSURANCE COMPANY

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CINCINNATI DATA DEFENDER™ COVERAGE PART DECLARATIONS

THIS COVERAGE PART PROVIDES CLAIMS-MADE COVERAGE, WHICH APPLIES ONLY TO "CLAIMS" FIRST MADE DURING THE "POLICY PERIOD" OR ANY APPLICABLE EXTENDED REPORTING PERIOD. THE LIMIT OF INSURANCE TO PAY DAMAGES OR SETTLEMENTS WILL BE REDUCED AND MAY BE EXHAUSTED BY "DEFENSE COSTS", AND "DEFENSE COSTS" WILL BE APPLIED AGAINST THE DEDUCTIBLE. IN NO EVENT WILL WE BE LIABLE FOR "DEFENSE COSTS" OR THE AMOUNT OF ANY JUDGMENT OR SETTLEMENT IN EXCESS OF THE LIMIT OF INSURANCE. READ THE ENTIRE POLICY CAREFULLY.

Attached to and forming part of POLICY NUMBER: **EPP 007 18 97** Effective Date **03-17-2020**

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Retroactive Date: 03-17-2017

Limits of Insurance and Deductible

Insuring Agreement	Annual Aggregate	Sublimit	Deductible
A Response Expenses	\$50,000	Forensic IT Review	\$25,000
		Legal Review	\$25,000
		PR Services	\$25,000
B Defense and Liability	\$50,000	Regulatory Fines and Penalties	\$25,000
		PCI Fines and Penalties	\$25,000
		Identity Recovery	\$25,000
C Identity Recovery	\$25,000	Lost Wages and Child and Elder Care	\$5,000
		Mental Health Counseling	\$1,000
		Miscellaneous Unnamed Costs	\$1,000
			\$250

TOTAL ANNUAL PREMIUM

\$186

Optional Supplemental Extended Reporting Period - Term:

Optional Supplemental Extended Reporting Period - Premium:

1 YEAR	35
2 YEAR	71
3 YEAR	94
4 YEAR	118
5 YEAR	129
6 YEAR	141

FORMS AND/OR ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART:

HC102 01/18 CINCINNATI DATA DEFENDER™ COVERAGE FORM

HC479NC 01/18 NORTH CAROLINA CHANGES - CINCINNATI DATA DEFENDER™ COVERAGE PART