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STATE FARM FIRE AND CASUALTT COMPANT A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

11350 Johns Creek Parkway Duluth, GA 30098-0001

Named Insured

AT2

R-27-1422-FAF4 F V

005518 3125 MOUNTAIN BROOK

CONDOMINIUM ASSN 2218 MOUNT HAVEN DR APT 29 DALTON GA 30720-3997

ոլի Առիլի իվել (ենքերին հեղինիրդ) հենի հղուրդումի հեռի

RENEWAL DECLARATIONS

Policy Number

91-14-3108-1

Policy Period

Effective Date MAY 8 2015 Expiration Date MAY 8 2016 12 Months The policy period begins and ends at 12:01 am standard time at the premises location.

Agent and Mailing Address DÂN COMBS CLŰ PO BOX 4479 DALTON GA 30719-1479

PHONE: (706) 259-7466

Residential Community Association Policy

Automatic Renewal - If the policy period is shown as 12 months, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: CONDOMINIUM

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

POLICY PREMIUM

12,938.00

Discounts Applied: Renewal Year Multiple Unit Claim Record

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530-686 a.2 05-31-2011 (o1f3231c)

Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1

SECTION I - PROPERTY BLANKET

Coverage A - Buildings Coverage B - Business Personal Property Limit of Insurance* \$ 4,314,600 No Coverage

Location Number	Location of Described Premises		
001	UNITS 1-12 2214 MOUNT HAVEN DR DALTON GA 30720-3776		
. 002	UNITS 13-20 2216 MOUNT HAVEN DR DALTON GA 30720-3732		
003	UNITS 21-28 2218 MOUNT HAVEN DR DALTON GA 30720-3860		

AUXILIARY STRUCTURES

Location Number	Description	
001 A	Recreation Building	
001B	Pool	
001C	Fence, walls, etc.	
001 D	TENNIS COURTS	

* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1



SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index:

150.3

SECTION I - DEDUCTIBLES

Basic Deductible

\$2,000

Special Deductibles:

Money and Securities Equipment Breakdown

\$250 \$2,000

Employee Dishonesty

\$250

LIMIT OF

Other deductibles may apply - refer to policy.

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

COVERAGE	INSURANCE
Collapse	Included
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit
Debris Removal	25% of covered loss
Equipment Breakdown	Included
Fire Department Service Charge	\$5,000
Fire Extinguisher Systems Recharge Expense	\$5,000
Glass Expenses	Included

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1

Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	\$100,000
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	\$250,000
Ordinance Or Law - Equipment Coverage	Included
Preservation Of Property	30 Days
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH COMPLEX

The coverages and corresponding limits shown below apply separately to each complex as described in the policy.

COVERAGE	LIMIT OF INSURANCE
Accounts Receivable On Premises Off Premises	\$50,000 \$15,000
Arson Reward	\$5,000
Forgery Or Alteration	\$10,000
Money And Securities (Off Premises)	\$5,000
Money And Securities (On Premises)	\$10,000
Money Orders And Counterfeit Money	\$1,000
Outdoor Property	\$5,000
Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Personal Property Off Premises	\$1 5,000
Pollutant Clean Up And Removal	\$10,000

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1 Policy Number



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Property Of Others (applies only to those premises provided Coverage B - Business \$2,500 Personal Property)

\$2,500 Signs

Valuable Papers And Records

On Premises \$10,000 Off Premises \$5,000

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

> **LIMIT OF COVERAGE INSURANCE**

Back-Up of Sewer or Drain Included

Employee Dishonesty \$50,000

Loss Of Income And Extra Expense Actual Loss Sustained - 12 Months

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$1,050,000
Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$300,000
Directors And Officers Liability	\$1,000,000

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1

AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$2,100,000
General Aggregate	\$2,100,000
Directors and Officers Aggregate	\$1,000,000

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

CMP-4100	Businessowners Coverage Form
FE-6999.2	*Terrorism Insurance Cov Notice
CMP-4814	Directors & Officers Liability
CMP-4211	Amendatory Endorsement
CMP-4556	Residential Community Assn
CMP-4746	Hired Auto Liability
CMP-4710	Employee Dishonesty
CMP-4508	Money and Securities
CMP-4705	Loss of Income & Extra Expnse
FD-6007	Inland Marine Attach Dec
	* New Form Attached

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1 **Policy Number**



This policy is issued by the State Farm Fire and Casualty Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

Lynne M. Youkll
Secretary

President

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NOTICE TO POLICYHOLDER:

For a comprehensive description of coverages and forms, please refer to your policy.

Policy changes requested before the "Date Prepared", which appear on this notice, are effective on the Renewal Date of this policy unless otherwise indicated by a separate endorsement, binder, or amended declarations. Any coverage forms attached to this notice are also effective on the Renewal Date of this policy.

Policy changes requested after the "Date Prepared" will be sent to you as an amended declarations or as an endorsement to your policy. Billing for any additional premium for such changes will be mailed at a later date.

If, during the past year, you've acquired any valuable property items, made any improvements to insured property, or have any questions about your insurance coverage, contact your State Farm agent.

Please keep this with your policy.

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Residential Community Association Policy for MOUNTAIN BROOK Policy Number 91-14-3108-1

Your coverage amount....

It is up to you to choose the coverage and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your structure. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc. using information you provide about your structure. We can accept the type of estimate you choose as long as it provides a reasonable level of detail about your structure. State Farm does not guarantee that any estimate will be the actual future cost to rebuild your structure. Higher limits are available at higher premiums. Lower limits are also available, as long as the amount of coverage meets our underwriting requirements. We expressed that the provided in the coverage and limits with your agent and to notify us of any changes or additions to your structure.

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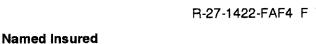
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A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

11350 Johns Creek Parkway Duluth, GA 30098-0001

R-27-1422-FAF4 F V



Policy Number 91-14-3108-1 **Policy Period** Effective Date MAY 8 2015 Expiration Date MAY 8 2016 12 Months The policy period begins and ends at 12:01 am standard time at the premises location.

INLAND MARINE ATTACHING DECLARATIONS



0506-ST--0001

MOUNTAIN BROOK **CONDOMINIUM ASSN** 2218 MOUNT HAVEN DR APT 29 DALTON GA 30720-3997

ATTACHING INLAND MARINE

Automatic Renewal - If the policy period is shown as 12 months, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Annual Policy Premium

Included

The above Premium Amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

Forms, Options, and Endorsements

FE-8739

Inland Marine Conditions

FE-6870 FE-6871

Amend of Inland Marine Condtns

Inland Marine Computer Prop

See Reverse for Schedule Page with Limits

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ATTACHING INLAND MARINE

ENDORSEMENT	COVERAGE		LIMIT OF	DEDUCTIBLE		ANNUAL	
NUMBER			INSURANCE	AMOUNT		PREMIUM	
FE-6871	Inland Marine Computer Prop Loss of Income and Extra Expense	\$ \$	10,000 10,000	\$	500	Included Included	

ATTACHING INLAND MARINE SCHEDULE PAGE

- OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY -

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State Farm 1 4 1

In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2015, this disclosure is part of your policy.

FE-6999.2 POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE



Coverage for acts of terrorism is not excluded from your current policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, the definition of act of terrorism has changed. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under this policy, any covered losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. Under the formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on

January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019; and 80% beginning on January 1, 2020 of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

There is no separate premium charged to cover insured losses caused by terrorism. Your insurance policy establishes the coverage that exists for insured losses. This notice does not expand coverage beyond that described in your policy.

THIS IS YOUR NOTIFICATION THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER YOUR POLICY MAY BE PARTIALLY REIM-BURSED BY THE UNITED STATES GOVERN-MENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COV-ERAGE.

FE-6999.2

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