



Dear Farmers® Customer,

Thank you for choosing Farmers for your Business Insurance needs.

In today's business environment, we understand that your business needs may change during the year. For example, you may acquire new equipment, adjust your staffing, add a new location, create electronic ordering and/or billing for your customers or begin offering new services.

**These changes may require updated insurance coverage for your business.**

Farmers and its agents want to help make you smarter about your insurance. To do that, we offer special services at no additional cost to you to help you ensure your business has the coverage it needs.

For example:

- Your agent will be happy to schedule a Farmers Friendly Review® with you. During this review, your agent can talk to you about available insurance discounts, potential coverage gaps, and new products that may be available to you. In addition, if there have been changes in your business since your last policy review, your premium may be eligible for additional pricing consideration.
- MysafetyPoint.com makes safety and loss control information available that may help you avoid workplace injuries and other losses.

To access this information, log onto [www.mysafetypoint.com](http://www.mysafetypoint.com), then register with your policy number and email address to find safety and loss control information that is specific to your type of business.

**ENCLOSED YOU WILL FIND YOUR POLICY DOCUMENTS. PLEASE REVIEW YOUR COVERAGES TO ENSURE THEY MEET YOUR NEEDS.**

If you have any questions, please contact your Farmers agent.

**Matthew Cooper**

**Email: [mcooper2@farmersagent.com](mailto:mcooper2@farmersagent.com)**

**540-686-7883**







**FARMERS**  
INSURANCE

# STATEMENT

## TRUCK INSURANCE EXCHANGE

◦ OPEQUON CENTER CONDO ASSOCIAT

3052 VALLEY AVENUE  
SUITE 100  
WINCHESTER VA 22601-6478

**FEBRUARY 05, 2021**

Date

**68-03-37E**

Agent's Number

**60627-00-51**

Policy Number

**47469**

Loan Number

**Renewal Statement - The Company will renew your policy for an additional 12 months term only if payment of the premium indicated is made on or before the renewal date of this notice.**

### This Statement Reflects:

Effective Date: 04/01/21

New Business       Reinstatement       Change Of Coverage       Added Coverage

\$ Previous Balance Owing

\$ Premium

\$ Membership, Policy, Reinstatement, Reissue or Service Fees

\$ Pro Rata Premium Due

\$ **18,533.00** Premium For Renewing Entire Present Coverage From 04/01/21 To 04/01/22

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

**18,533.00** Total Charges

\$ Payments

\$ Other Credits \_\_\_\_\_

\$ Total Credits \_\_\_\_\_

\$ **- NONE -** **BALANCE DUE UPON RECEIPT**

\$ Optional Amount

\$ Refund

**WE WANT TO BE YOUR FIRST CHOICE FOR BUSINESS AND PERSONAL LINES INSURANCE. IF YOU PLACE A PERSONAL LINES POLICY WITH FARMERS YOU MAY BE ELIGIBLE TO RECEIVE A DISCOUNT, CONTACT YOUR AGENT TODAY.**



**IMPORTANT- D-O-N-O-T P-A-Y T-H-I-S N-O-T-I-C-E  
PREMIUM WILL BE BILLED. ACCT # F006246620-001-00001.**

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**State Required Notification:**

FARMERS  
INSURANCE



STATEMENT

TRUCK INSURANCE POLICY

PROPERTY OR LOSS

TRUCK COVERED PERIOD

DATE VALUE ADDED

DATE OF LOSS

REGISTERED AT 1:22:47

AGENCY

PHONE

NAME

ADDRESS

CITY

STATE

ZIP

The Statement is for

Policy No. 123456789

Item	Description	Amount	Code
1	New Business		
2	Previous Policy		
3	Program		
4	Membership Policy		
5	For Loss		
6	Program for Loss		
7	Total Charge	\$1,234.56	
8	Balance Due	\$1,234.56	

WE WANT TO BE SURE YOU UNDERSTAND THE POLICY AND  
TERMS AND CONDITIONS. IF YOU HAVE ANY QUESTIONS,  
PLEASE CONTACT YOUR AGENT TODAY.

REPORTING - 24 HOURS - 1-800-555-1234  
PHONE WILL BE WITH YOU - 1-800-555-1234



## Important Notice

### Subscription Agreement Notice

(Please keep for your records)

*By payment of the policy premium, you acknowledge that you have received and read the Truck Insurance Exchange Subscription Agreement (the terms of which are provided below) and that you agree to be bound to all of the terms and conditions of the Subscription Agreement.*

*Under the Subscription Agreement, you appoint Truck Underwriters Association (the "Association") to act as the attorney-in-fact. The Association has acted in this capacity since 1935. The Subscription Agreement provides for payment of compensation to the Association for its becoming and acting as attorney-in-fact. This compensation consists of a membership fee and a percentage of premiums on all policies of insurance or reinsurance issued or effected by the Exchange. These fees are included in your policy payment and are not an additional fee.*

*We reserve the right to request that you provide us with a signed Subscription Agreement and if you fail to do so, your coverage may be terminated.*

### Subscription Agreement

For and in consideration of the benefits to be derived therefrom the subscriber covenants and agrees with Truck Insurance Exchange and other subscribers thereto through their and each of their attorney-in-fact, Truck Underwriters Association, to exchange with all other subscribers' policies of insurance or reinsurance containing such terms and conditions therein as may be specified by said attorney-in-fact and approved by the Board of Governors or its Executive Committee for any loss insured against, and subscriber hereby designates, constitutes and appoints Truck Underwriters Association to be attorney-in-fact for subscriber, granting to it power to substitute another in its place, and in subscriber's name, place and stead to do all things which the subscriber or subscribers might or could do severally or jointly with reference to all policies issued, including cancellation thereof, collection and receipt of all monies due the Exchange from whatever source and disbursement of all loss and expense payments, effect reinsurance and all other acts incidental to the management of the Exchange and the business of interinsurance; subscriber further agrees that there shall be paid to said Association, as compensation for its becoming and acting as attorney-in-fact, the membership fees and twenty per centum of the Premium Deposit for the insurance provided and twenty per centum of the premiums required for continuance thereof.

The remaining portion of the Premium Deposit and of additional term payments made by or on behalf of the subscriber shall be applied to the payment of losses and expenses and to the establishment of reserves and general surplus. Such reserves and surplus may be invested and reinvested by a Board of Governors duly elected by and from subscribers in accordance with provisions of policies issued, which Board or its Executive Committee or an agent or agency appointed by written authority of said Executive Committee shall have full powers to negotiate purchases, sales, trades, exchanges, and transfers of investments, properties, titles and securities, together with full powers to execute all necessary instruments. The expenses above referred to shall include all taxes, license fees, attorneys' fees and adjustment expenses and charges, expenses of members' and governors' meetings, agents' commissions, and such other specified fees, dues and expenses as may be authorized by the Board of Governors. All other expenses incurred in connection with the conduct of the Exchange and such of the above expenses as shall from time to time be agreed upon by and between the Association and the Board of Governors or its Executive Committee shall be borne by the Association.

The principal office of the Exchange and its attorney-in-fact shall be maintained in the City of Los Angeles, County of Los Angeles, State of California.

This agreement can be signed upon any number of counterparts with the same effect as if the signatures of all subscribers were upon one and the same instrument, and shall be binding upon the parties thereto, severally and ratably as provided in policies issued. Wherever the word "subscriber" is used the same shall mean members of the Exchange, the subscriber hereto, and all other subscribers to this or any other like agreement. Any policy issued hereon shall be non-assessable.







# Privacy Policy

This notice describes our privacy policies and procedures in safeguarding information about customers and former customers that obtain financial products or services for personal, family or household purposes. **Please note that if state law is more protective of an individual's privacy than federal privacy law, we will protect information in accordance with state law while also meeting federal requirements.**

## Information We Collect

We may collect the following categories of information for the purposes identified below. Please note that the examples are not an exhaustive list and may fall into multiple categories. Categories and specific pieces of information collected may vary depending on the nature of your relationship with us.

Category	Purpose of Use	What may be included in this category	Some examples
Internal	Authenticate your identity; create, maintain and secure your account with us; maintain your preferences.	Knowledge and Belief, Authenticating, Preference	Passwords, PIN, mothers maiden name, individual interests
Historical	Complete a transaction or provide a service for which the personal information was collected; conduct analytics and modeling.	Personal history	Past claims, prior insurance carriers, prior addresses, medical history, criminal history
Financial	Process your billing; make payments; complete a transaction or provide a service for which the personal information was collected.	Account, Ownership, Transactional, Credit	Credit card number, bank account, records of real or personal property, credit, income, loan records, taxes
External	Identify information to verify you; complete a transaction or provide a service for which the personal information was collected; deliver product offerings that may be relevant to you; conduct analytics.	Identifying, Ethnicity, Gender, Demographic, Medical and Health, Physical Characteristics	Name, username, government issued identification, social security number, gender, browsing behavior, age range, income bracket, physical and mental health, medical records
Social	Establish your communication preferences; complete a transaction or provide a service for which the personal information was collected; process your policy, account or claim.	Professional, Criminal, Public Life, Family, Social Network, Communication	Job titles, work history, school attended, convictions, charges, marital and family status, email, telephone recordings
Tracking	Contact you; provide relevant information; provide a location-based product or service requested by you; conduct analytics.	Computer or Mobile Device, Contact, Location	IP Address, geolocation, email address, physical address, telephone number, country

We collect certain information ("nonpublic personal information") about you and the members of your household ("you") from the following sources:

- Information you provide on applications or other forms, such as your social security number, assets, income, and property information;

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- Information about your transactions with us, our affiliates or others, such as your policy coverage, premiums, and payment history;
- Information from your visits to the websites we operate, use of our mobile sites and applications, use of our social media sites, and interaction with our online advertisements;
- Information we receive from consumer reporting agencies or insurance support organizations, such as motor vehicle records, credit report information and insurance claims history; and
- If you obtain a life, long-term care or disability product, information we receive from you, medical professionals who have provided care to you and insurance support organizations, regarding your health.

## How We Protect Your Information

Our customers are our most valued assets. Protecting your privacy is important to us. We restrict access to personal information to those individuals, such as our employees and agents, who provide you with our products and services. We require individuals with access to your information to protect it and keep it confidential. We maintain physical, electronic, and procedural safeguards that comply with applicable regulatory standards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about you except as described in this notice or as otherwise required or permitted by applicable law.

## Information We Disclose

We may disclose the nonpublic personal information we collect about you, as described above, to our affiliates, to companies that perform marketing services on our behalf or to other financial institutions with which we have joint marketing agreements, and to other third parties, all as permitted by law and for our everyday business purposes, such as to process your transactions and maintain your accounts and insurance policies. Many employers, benefit plans or plan sponsors restrict the information that can be shared about their employees or members by companies that provide them with products or services. If you have a relationship with Farmers or one of its affiliates as a result of products or services provided through an employer, benefit plan or plan sponsor, we will follow the privacy restrictions of that organization.

We are permitted to disclose personal health information:

- (1) to process your transaction with us, for instance, to determine eligibility for coverage, to process claims or to prevent fraud;
- (2) with your written authorization; and
- (3) otherwise as permitted by law.

When you are no longer our customer, we continue to share your information as described in this notice.

## Sharing Information with Affiliates

The Farmers Insurance Group<sup>®</sup> of Companies includes affiliates that offer a variety of financial products and services in addition to insurance. Sharing information enables our affiliates to offer you a more complete range of products and services.

We may disclose nonpublic personal information, as described above in Information We Collect, as permitted by law to our affiliates, which include:

- Financial service providers such as insurance companies and reciprocals, investment companies, underwriters and brokers/dealers.
- Non-financial service providers, such as data processors, billing companies and vendors that provide marketing services for us.

We are permitted by law to share with our affiliates information about our transactions and experiences with you. In addition, we may share with our affiliates consumer report information, such as information from credit reports and certain application information, received from you and from third parties, such as consumer reporting agencies and insurance support organizations.



## IMPORTANT PRIVACY CHOICES

You have choices about the sharing of some information with certain parties. These choices may differ based on the particular affiliate(s) with which you do business.

For 21 Century customers: We are offering you an Opt-Out opportunity which is included with your policy documents. If you prefer that we not share your consumer report information with Farmers you may opt-out of such disclosures that is, you may direct us not to make those disclosures other than as otherwise permitted by law. You may do so by following the procedure explained in the Opt-Out Form. You may opt-out only by returning the Opt-Out Form. We will implement your request within a reasonable time. If it is your decision not to opt-out and to allow sharing of your information with the Farmers affiliates, you do not need respond in any way.

For Bristol West customers: If you prefer that we not share consumer report information with our affiliates, except as otherwise permitted by law, you may use the Opt-Out form included with your policy documents. Please verify that your Bristol West policy number is listed. If not, please add the policy numbers on the form and mail to the return address printed on the form. We will implement your request within a reasonable time after we receive it. Any policyholder may opt-out on behalf of other joint policyholders. An opt-out by any joint policyholder will be deemed to be an opt-out by all policyholders of the policy. If it is your decision not to opt-out and to allow sharing of your information with our affiliates, you do not need to request an Opt-Out or respond to us in any way.

For Farmers customers: If you prefer that we not share consumer report information with our affiliates, except as otherwise permitted by law, you may request an Opt-Out Form by calling toll free, 1-800-327-6377, (please have all of your policy numbers available when requesting Opt-Out Forms). A form will be mailed to your attention. Please verify that all of your Farmers policy numbers are listed. If not, please add the policy numbers on the form and mail to the return address printed on the form. Any policyholder may opt-out on behalf of other joint policyholders. An opt-out by any joint policyholder will be deemed to be an opt-out by all policyholders of the policy issued by the affiliates listed on the Farmers Privacy Notice. We will implement your request within a reasonable time after we receive the form.

If you decide not to opt-out or if you have previously submitted a request to opt-out on each of your policies, no further action is required.

Additionally, under the California Consumer Privacy Act (CCPA), California residents have the right to opt out of the sale of personal information to certain third parties. Although we do not currently share personal information in a manner that would be considered a sale under CCPA, you may still submit a request to opt out by calling us at 1-855-327-6548 or submitting a request through our CCPA Web Form at <https://www.farmers.com/california-consumer-privacy/>.

## Modifications to our Privacy Policy

We reserve the right to change our privacy practices in the future, which may include sharing nonpublic personal information about you with other nonaffiliated third parties. Before we make any changes, we will provide you with a revised privacy notice and give you the opportunity to opt-out of, or, if applicable, to opt-in to that type of information sharing.

## Website and Mobile Privacy Policy

Our Enterprise Privacy Statement includes our website and mobile privacy policies which provides additional information about website and mobile application use. Please review those notices if you transmit personal information to us over the Internet through our websites and/or mobile applications.

## Recipients of this Notice

While any policyholder may request a copy of this notice, we are providing this notice to the named policyholder residing at the mailing address to which we send your policy information. If there is more than one policyholder on a policy, only the named policyholder will receive this notice. You may receive more than one copy of this notice if you have more than one policy with us. You also may receive notices from affiliates, other than those listed below.

## More Information about these Laws?

This notice is required by applicable federal and state law. For more information, please contact us.



## Signed

Farmers Insurance Exchange, Fire Insurance Exchange, Truck Insurance Exchange, Mid-Century Insurance Company, Farmers Insurance Company, Inc. (A Kansas Corp.), Farmers Insurance Company of Arizona, Farmers Insurance Company of Idaho, Farmers Insurance Company of Oregon, Farmers Insurance Company of Washington, Farmers Insurance of Columbus, Inc., Farmers Insurance Hawaii, Inc., Farmers New Century Insurance Company, Farmers Services Insurance Agency, Farmers Specialty Insurance Company, Farmers Texas County Mutual Insurance Company, Farmers Financial Solutions, LLC (a member of FINRA and SIPC)\*, FFS Holding, LLC, Illinois Farmers Insurance Company, Mid-Century Insurance Company of Texas, Texas Farmers Insurance Company, Civic Property and Casualty Company, Exact Property and Casualty Company, Neighborhood Spirit Property and Casualty Company, American Federation Insurance Company, 21st Century Advantage Company, 21st Century Assurance Company, 21st Century Auto Insurance Company of New Jersey, 21st Century Casualty Company, 21st Century Centennial Insurance Company, 21st Century Indemnity Insurance Company, 21st Century Insurance & Financial Services, Inc., 21st Century Insurance Company, 21st Century Insurance Company of Southwest, 21st Century North America Insurance Company, 21st Century Pacific Insurance Company, 21st Century Premier Insurance Company, 21st Century Superior Insurance Company, Hawaii Insurance Consultants Ltd., American Pacific Insurance Company, Inc., Bristol West Casualty Insurance Company, Bristol West Holdings, Inc., Bristol West Insurance Company, Bristol West Insurance Services of California, Inc., Bristol West Insurance Services, Inc. of Florida, Bristol West Preferred Insurance Company, BWIS of Nevada, Inc., Coast National Holding Company, Coast National Insurance Company, Foremost County Mutual Insurance Company, Foremost Insurance Company Grand Rapids, Michigan, Foremost Lloyds of Texas, Foremost Property and Casualty Insurance Company, Foremost Signature Insurance Company, and Security National Insurance Company (Bristol West Specialty Insurance Company in TX).

The above is a list of the affiliates on whose behalf this privacy notice is being provided. It is not a comprehensive list of all affiliates of the companies comprising the Farmers Insurance Group of Companies.

\*For more background information on Farmers Financial Solutions, LLC (FFS) or its registered representatives/Agents, visit FINRA's BrokerCheck at [www.finrabrokercheck.com](http://www.finrabrokercheck.com) or call the BrokerCheck toll free hotline at (800) 289-9999. You may obtain information about the Securities Investor Protection Program (SIPC) including the SIPC brochure by contacting SIPC at (202) 371-8300 or via the internet at [www.sipc.org](http://www.sipc.org). FFS is registered with the US Securities and Exchange Commission and the Municipal Securities Rulemaking Board (MSRB). The MSRB website is accessible at [www.msrb.org](http://www.msrb.org) and includes an Investor Brochure that describes the protections that may be provided by the MSRB and how to file a complaint with the appropriate regulatory authority.



**Truck Insurance Exchange (A Reciprocal Insurer)**  
 Member Of The Farmers Insurance Group Of Companies®  
 Home Office: 6301 Owensmouth Ave., Woodland Hills, CA 91367

## COMMON POLICY DECLARATIONS

**Named Insured** OPEQUON CENTER CONDO ASSOCIAT

F006246620-001-00001

Account No.	Prod. Count
68-03-37E	60627-00-51
Agent No.	Policy Number

**Mailing Address** 3052 VALLEY AVENUE  
 SUITE 100  
 WINCHESTER, VA 22601-6478

**Form of Business**

<input type="checkbox"/> Individual	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Limited Liability Co.
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Other Organization

**Business Description:**  
 Real Estate

**Policy Period** From 04-01-2021 (not prior to time applied for)  
 To 04-01-2022 12:01 A.M. Standard time at your mailing address shown above.

If this policy replaces other coverage that ends at noon standard time of the same day this policy begins, this policy will not take effect until the other coverage ends. **This policy will continue for successive policy periods as follows:** If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect.

The attorney-in-fact (AIF) or management fee for your renewed policy will never exceed 20% of the policy's premiums and will be paid out of the premiums. You may wish to consider this information in deciding whether to accept or decline this offer to renew your policy.

This policy consists of the following coverage parts listed below and for which a premium is indicated. This premium may be subject to change.

Coverage Parts	Premium After Discount And Modification
Businessowners	\$18,498.00
Cyber Liability And Data Breach Expense Coverage	\$35.00
Certified Acts Of Terrorism - See Disclosure Endorsement	Included
Total (See Additional Fee Information Below)	\$18,533.00

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Policy Number: 60627-00-51

Effective Date: 04-01-2021

Forms Applicable To 25-9230ED3  
All Coverage Parts: 56-5430ED1  
IL00030498  
IL00171198

Reminder-Review Your Coverages  
Additional Conditions - Virginia  
Calculation Of Premium  
Common Policy Conditions

**Your Agent**

Matthew Cooper  
133 W Boscawen St#6  
Winchester, VA 22601  
(540) 686-7883

Countersigned (Date)

By Authorized Representative

**Additional Fee Information**

The following additional fees apply on an account, not a per-policy, basis.

- A **service fee** will be assessed on every installment invoice and will be included in the minimum amount due. However, if you choose to pay the entire account balance in full upon receipt of the first installment, the fee will be waived. In addition, for accounts fully enrolled in online billing and scheduled for recurring Electronic Funds Transfer (EFT) payments the fee will be waived.

State	Installment Fee
All states except Alaska, Florida, Maryland, New Jersey And West Virginia	\$6.00
Alaska and Maryland	Not applicable
Florida	\$3.00
New Jersey	\$7.00
West Virginia	\$5.00

- A **returned payment fee** applies per check, electronic transaction or other remittance which is not honored by your financial institution for any reason including but not limited to insufficient funds or a closed account. **NOTE: If the returned payment is in response to a Notice of Cancellation, coverage still cancels on the cancellation effective date set forth in the notice.**

State	NSF Fee
All States Except Alaska, Florida, Indiana, Maine, Nebraska, New Jersey, North Dakota, Oklahoma, Virginia And West Virginia	\$30.00
North Dakota And Oklahoma	\$25.00
Nebraska And Indiana	\$20.00
Florida And West Virginia	\$15.00
Maine	\$10.00
Alaska, New Jersey And Virginia	Not applicable

- A **late fee** will be assessed on each Notice of Cancellation that is issued and will be included in the minimum amount due.

State	Late Fee
All States Except Alaska, Florida, Maryland, Missouri, Nebraska, New Jersey, Rhode Island, Virginia, South Carolina And West Virginia	\$20.00
Nebraska, Rhode Island And South Carolina	\$10.00
Alaska, Florida, Maryland, Missouri, New Jersey, Virginia And West Virginia	Not applicable

The following applies on a per-policy basis.

- A **reinstatement fee** of \$25.00 will be assessed if the policy is reinstated over 30 days but under 6 months from the cancellation date. *This fee does not apply to Florida, Indiana & Maryland or to Workers Compensation policies.*

One or more of the fees or charges described above may be deemed a part of premium under applicable state law.



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## Important Information To Policyholders

If for any reason you would like to contact someone about this policy, please contact your agent. If you have additional questions you may contact us, your insurance company, at the following address and telephone number:

Farmers Insurance Group of Companies

If you have been unable to contact or obtain satisfaction from us or your agent, you may contact the Virginia Bureau of Insurance at:

Bureau of Insurance  
Box 1157  
Richmond, Virginia 23218  
From Virginia (800) 552-7945, Out-of-State (804) 371-9741

Written correspondence is preferable so that record of your inquiry is maintained. When contacting your agent, company or the Bureau of Insurance, have your policy number available.

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**THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.**



**J6300**  
3rd Edition

**DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT**

**SCHEDULE**

<b>SCHEDULE - PART I</b>	
<b>Terrorism Premium (Certified Acts) \$</b>	<b>183.00</b>
<b>Additional information, if any, concerning the terrorism premium:</b>	
<b>SCHEDULE - PART II</b>	
<b>Federal share of terrorism losses</b>	<b>80 % Year: 2021</b>
(Refer to Paragraph B. in this endorsement)	
<b>Federal share of terrorism losses</b>	<b>80 % Year: 2022</b>
(Refer to Paragraph B. in this endorsement)	
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

**A. Disclosure Of Premium**

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

**B. Disclosure Of Federal Participation In Payment Of Terrorism Losses**

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals a percentage (as shown in Part II of the Schedule of this endorsement or in the policy Declarations) of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

**C. Cap On Insurer Participation In Payment Of Terrorism Losses**

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

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# POLICY DECLARATIONS - COMMERCIAL REAL ESTATE PREMIER POLICY

**Named Insured** OPEQUON CENTER CONDO ASSOCIAT

**Mailing Address** 3052 VALLEY AVENUE  
SUITE 100  
WINCHESTER, VA 22601-6478

**Policy Number** 60627-00-51

**Auditable**

**Policy Period** From 04-01-2021  
To 04-01-2022 12:01 A.M. Standard time at your mailing address shown above.

In return for the payment of premium and subject to all the terms of this policy, we agree with you to provide insurance as stated in this policy. We provide insurance only for those Coverages described and for which a specific limit of insurance is shown.

The following premium credits and discounts applied to the premium associated with this coverage part:

**Favorable Loss Experience Discount**

There may be other credits and discounts you may be able to enjoy, please contact your agent for full details.

**Your Agent**

Matthew Cooper  
133 W Boscawen St#6  
Winchester, VA 22601  
(540) 686-7883



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Policy Number: 60627-00-51

Effective Date: 04-01-2021

**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS**

**BUILDING**

The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)  
**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;  
 ERC - Extended RC; FRC - Functional RC; GRC - Guaranteed RC  
**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgagee Name And Address
001	001	3052 Valley Avenue Suite 100 Winchester, VA 22601-2673	

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$1,423,800	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	

**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED**

**BUILDING**

The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)

**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;

ERC - Extended RC; FRC- Functional RC; GRC - Guaranteed RC

**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgagee Name And Address
001	002	3050 Valley Avenue Suite 100 Winchester, VA 22601-2673	FIRST BANK ISAOA/ATIMA 112 W KING STREET STRASBURG, VA 22657 LOAN NO. 47469

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$1,267,500	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	

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**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED** **BUILDING**

**The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).**

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)  
**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;  
 ERC - Extended RC; FRC- Functional RC; GRC - Guaranteed RC  
**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgage Name And Address
001	003	3042 Valley Avenue Suite 100 Winchester, VA 22601-2673	FIRST BANK ISAOA/ATIMA 112 W KING STREET STRASBURG, VA 22657 LOAN NO. 51288

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$1,267,500	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	

**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED**

**BUILDING**

The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)

**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;  
ERC - Extended RC; FRC - Functional RC; GRC - Guaranteed RC

**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgagee Name And Address
001	004	3034 Valley Avenue Suite 100 Winchester, VA 22601-2673	

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$880,400	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	

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**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED**

**BUILDING**

The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)

**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;  
ERC - Extended RC; FRC - Functional RC; GRC - Guaranteed RC

**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgagee Name And Address
001	005	3038 Valley Avenue Suite 100 Winchester, VA 22601-2673	

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$795,000	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	



**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED**

**BUILDING**

The following coverages apply to the described building. Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual location (premises) section for coverages and limits specific to the location (premises).

**Option:** BV - Blanket Value (see Base Coverage & Extensions for the total limit)

**Valuation:** ACV - Actual Cash Value; AV - Agreed Value; RC - Replacement Cost;  
ERC - Extended RC; FRC- Functional RC; GRC - Guaranteed RC

**Abbreviation:** ALS = Actual Loss Sustained; BI = Business Income; EE = Extra Expense

Premises Number	Bldg. No.	Covered Premises Address	Mortgagee Name And Address
001	006	3046 Valley Avenue Suite 100 Winchester, VA 22601-2673	

Coverage	Option	Valuation	Limit Of Insurance	Deductible/ Waiting Period
Building	BV	ERC	\$460,000	\$1,000
Back Up Of Sewers Or Drains			\$1,000	\$1,000
Building - Automatic Increase Amount			8%	
Building Ordinance (Broad) - A			Included	None
Building Ordinance (Broad) - B&C (Demo & ICC) Combined			\$298,100	None
Exterior Building Glass			Included	\$100
Glass Deductible Buyback			Included	

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**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS CONTINUED** **PREMISES**

The following coverages apply to the described location (premises). Please refer to the Base Coverages And Extensions section for other coverages and extensions applying at the policy level and to the individual building section for coverages and limits specific to the building.

Premises Number	Bldg. No.	Covered Premises Address
001	All	3052 Valley Avenue Suite 100, Winchester, VA 22601-2673

Coverage	Limit Of Insurance	Deductible / Waiting Period
Accounts Receivables - On-Premises	\$25,000	\$1,000
Debris Removal	25% Of Loss + 25,000	
Equipment Breakdown	Included	\$1,000
Equipment Breakdown - Ammonia Contamination	\$25,000	
Equipment Breakdown - Drying Out Coverage	Included	
Equipment Breakdown - Expediting Expenses	Included	
Equipment Breakdown - Hazardous Substances	\$25,000	
Equipment Breakdown - Water Damage	\$25,000	
Lock Replacement	\$10,000	None
Lock Replacement (Per Lock And Key)	\$100	None
Personal Effects	\$2,500	\$1,000
Pollutant Clean Up And Removal Aggregate	\$25,000	\$1,000
Valuable Paper And Records - On-Premises	\$25,000	\$1,000

**PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS OF INSURANCE**

The following Coverages and Extensions apply to all covered locations (premises) and/or buildings. Please refer to the individual location (premises) and/or building section for coverages and limits specific to such location (premises) and/or building.

Base Coverages And Extensions	Limit Of Insurance	Deductible/ Waiting Period
Blanket Building Coverage Limit	\$6,094,200	See Bldg Section
Accounts Receivables - Off-Premises	\$2,500	\$1,000
Business Income & Extra Expense - Civil Authority	3 Weeks	72 Hours - BI
Business Income (BI) & Extra Expense (EE)	18 Months - ALS	0 Hours
BPP Seasonal Increase	25%	
Claims Expense	\$5,000	None
Condominium Association Coverage	Included	\$1,000
Crime Conviction Reward	\$10,000	None
Drone Aircraft - Direct Damage (per occurrence)	\$10,000	\$1,000
Drone Aircraft - Direct Damage (per item)	\$2,500	\$1,000
Drone Aircraft - BI & EE	\$10,000	72 Hours
Electronic Data Processing Equipment	\$25,000	\$1,000
Electronic Data Processing Media And Records	\$6,250	\$1,000
Employee Dishonesty	\$25,000	\$1,000
Extended Business Income	30 Days	
Fire Department Service Charge	\$5,000	None
Fire Extinguisher Systems Recharge Expense	\$5,000	\$1,000
Forgery And Alteration	\$2,500	\$1,000
Limited Biohazardous Substance Coverage - Per Occurrence	\$10,000	\$1,000
Limited Biohazardous Substance Coverage - Aggregate	\$20,000	\$1,000
Limited Cov. - Fungi Wet Rot Dry Rot & Bacteria - Aggregate	\$15,000	\$1,000
Money And Securities - Inside Premises	\$25,000	\$1,000
Money And Securities - Outside Premises	\$25,000	\$1,000
Money Orders And Counterfeit Paper Currency	\$1,000	\$1,000
Newly Acquired Or Constructed Building	\$1,000,000	\$1,000
Outdoor Property	\$2,500	\$1,000
Outdoor Property - Antennas And Satellite Dishes	\$2,500	\$1,000
Outdoor Property - Trees, Shrubs & Plants	\$2,500	\$1,000
Outdoor Property - Trees, Shrubs & Plants (Per Item)	\$500	\$1,000
Outdoor Signs	\$25,000	\$1,000
Personal Property At Newly Acquired Premises	\$250,000	\$1,000
Personal Property Off Premises	\$5,000	\$1,000
Premises Boundary	1,000 Feet	
Preservation Of Property	60 Days	
Tenants Move-Back Expense	\$10,000	None
Valuable Paper And Records - Off-Premises	\$2,500	\$1,000

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**LIABILITY AND MEDICAL EXPENSES  
COVERAGE AND LIMITS OF INSURANCE**

**Each paid claim for the following coverage reduces the amount of insurance we provide during the applicable policy period. Please refer to the policy.**

**Premium Basis:** (A) Area; (C) Total Cost; (P) Payroll; (S) Sales/Receipts; (U) Each Unit  
(M) Public Area Square Feet  
(O) Other:

**Covered Premises And Operations**

Address	Classification /Exposure	Class Code	Prem. Basis	Annual Exposure	Rate	Advance Premium
3052 Valley Avenue Suite 100 Winchester, VA 22601-2673	Office Buildings	65123	Incl	Included	Included	Included

<b>LIABILITY AND MEDICAL EXPENSES COVERAGE AND LIMITS OF INSURANCE CONTINUED</b>	
<b>Coverage</b>	<b>Amount / Date</b>
General Aggregate (Other Than Products & Completed Operations)	\$2,000,000
Products And Completed Operations Aggregate	\$1,000,000
Personal And Advertising Injury	Included
Each Occurrence	\$1,000,000
Tenants Liability (Each Occurrence)	\$100,000
Medical Expense (Each Person)	\$5,000
Pollution Exclusion - Hostile Fire Exception	Included
Directors & Officers Liability - Per Claim	\$1,000,000
Directors & Officers Liability - Aggregate	\$1,000,000
Directors & Officers Liability (Self Insured Retention)	\$1,000
Directors & Officers Liability Retroactive Date	04/01/2020
Per Location General Aggregate Limit	Included

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Policy Number: 60627-00-51

Effective Date: 04-01-2021

Policy Forms And Endorsements Attached At Inception

Number	Title
25-2110	Notice - No Workers' Compensation Covg
25-8083	Flood Exclusion Insurance Notice - VA
25-9212	VA P/H Notice - D And O
56-6191	Cyber Liability & Data Breach Dec
91-3055	Lender's Loss Payable Endorsement
BP00021299	Businessowners Property Coverage Form
BP00060197	Businessowners Liability Coverage Form
BP00090197	Businessowners Common Policy Conditions
BP04170196	Employment-Related Practices Exclusion
BP04340197	Businessowners Computer Coverage
BP04390196	Abuse Or Molestation Exclusion
BP04550197	Tenants Liability Coverage
BP04630101	VA Ordinance Or Law Covg-Broad
BP05140103	War Liability Exclusion
BP12090101	Virginia Loss Payable
BP17010197	Condominium Association Coverage
E2010-ED3	Conditional Exclusion Of Terrorism
E2042-ED2	Multiple Or Enhanced Damages Exclusion
E3020-ED1	Outdoor Trees, Shrubs And Plants
E3027-ED1	No Covg Certain Computer Related Losses
E3342-ED2	Personal And Advertising Injury Coverage
E3432-ED5	Commercial Real Estate Premier Endsmt
E4009-ED2	Fungi Exclusion
E4297-ED1	D & O Liab Covg Form
E6036-ED1	Lead Poisoning And Contamination Excl
E6278-ED2	Blanket Limits - Building & Bus Property
ILP0510113	VA Earthquake Excl Advisory Notice
IL00210498	Nuclear Energy Liability Exclusion
IL00220587	Eff Time Change - Replacement Of 12 Noon
IL00440690	Virginia Changes - Policy Period
J6300-ED3	Disclosure - Terrorism Risk Ins Act
J6316-ED2	Excl Of Loss Due To Virus Or Bacteria
J6345-ED1	Exclusion - Violation Of Statutes
J6351-ED2	Limited Terrorism Exclusion
J6353-ED2	Change To Limits Of Insurance
J6572-ED1	Business Income & Extra Expense
J6612-ED2	Equipment Breakdown Coverage Endorsement
J6740-ED1	Two Or More Coverage Forms
J6828-ED1	Ltd Covg For Fungi, Wet/Dry Rot
J6849-ED2	Deductible Provisions
J7110-ED1	Exclusion Confidential Info

Policy Number: 60627-00-51

Effective Date: 04-01-2021

Policy Forms And Endorsements Attached At Inception

Number	Title
J7115-ED1	Excl Asbestos/Silica/Silica-Related Dust
J7122-ED1	Loss Payment - Profit, Overhead & Fees
J7131-ED1	Dishonesty Excl-Tenant Vandal Excp
J7133-ED1	Limited Biohazardous Substance Cov
J7136-ED1	Pollution Exclusion - Expanded Exception
J7138-ED1	Bus Inc & Extra Exp - Partial Slowdown
J7148-ED1	Amendment Of Emp Dishonesty Cvg
J7157-ED1	Damage To Property Exclusion Revised
J7182-ED1	Drone Aircraft Coverage
J7183-ED1	Limitation - Designated Premises/Project
J7230-ED1	Supplementary Payments
J7234-ED1	Addl Insd-Mortg, Assignee Or Receiver
W1173-ED4	Virginia Changes
W2335-ED1	VA Chgs-Volunteer Fire Dept Svc Charge

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Truck Insurance Exchange (A Reciprocal Insurer)  
Member Of The Farmers Insurance Group Of Companies®

Home Office: 6301 Owensmouth Ave., Woodland Hills, CA 91367

## DECLARATIONS CYBER LIABILITY AND DATA BREACH RESPONSE COVERAGE

**THIS COVERAGE INCLUDES CLAIMS MADE AND REPORTED COVERAGES. SUBJECT TO ITS TERMS, THIS COVERAGE FORM'S CLAIMS MADE COVERAGES APPLY ONLY TO ANY CLAIM FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD OR THE OPTIONAL EXTENDED REPORTING PERIOD, IF APPLICABLE, PROVIDED SUCH CLAIM IS REPORTED IN WRITING TO THE COMPANY AS SOON AS PRACTICABLE. WITHOUT NEGATING THE FOREGOING REQUIREMENTS, SUCH NOTICE OF CLAIM MUST ALSO BE REPORTED NO LATER THAN 30 DAYS AFTER THE END OF THE POLICY PERIOD OR, IF APPLICABLE, DURING THE OPTIONAL EXTENDED REPORTING PERIOD. AMOUNTS INCURRED AS CLAIMS EXPENSES, WHICH INCLUDES DEFENSE COSTS, SHALL REDUCE AND MAY EXHAUST THE LIMIT OF LIABILITY AND ARE SUBJECT TO THE RETENTIONS. THE COMPANY SHALL NOT BE LIABLE FOR ANY CLAIMS EXPENSES OR FOR ANY JUDGMENT OR SETTLEMENT AFTER THE LIMIT OF LIABILITY HAS BEEN EXHAUSTED. PLEASE READ THE COVERAGE FORM CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT.**

**Named Insured** OPEQUON CENTER CONDO ASSOCIAT

**Policy Number** 60627-00-51

**Mailing Address** 3052 VALLEY AVENUE  
SUITE 100  
WINCHESTER, VA 22601-6478

**Policy Period** From: 04-01-2021  
To: 04-01-2022 12:01 A.M. Standard time at your mailing address shown above.

Retroactive Date: 04/01/2016

Continuity Date: 04/01/2016

**Optional Extension Period:**

Length of optional extension period: \_\_\_\_\_

If no time period is stated, optional extension period coverage is not provided.

**Cyber Extortion Hot Line:** 1-800-435-7764



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Coverage	Limit Of Insurance	Retention/Waiting Period
Aggregate Limit of Liability	\$50,000	
Insuring Agreement A - Information Security & Privacy Liability	\$50,000	\$2,500
Insuring Agreement B - Privacy Breach Response Services	\$50,000/ 5,000 Notified Individuals	\$2,500/ 100 Notified Individuals
Insuring Agreement C - Regulatory Defense & Penalties	\$50,000	\$2,500
Insuring Agreement D - Website Media Content Liability	\$50,000	\$2,500
Insuring Agreement E - PCI Fines, Expenses And Costs	\$10,000	\$2,500
Insuring Agreement F - Cyber Extortion	\$50,000	\$2,500
Insuring Agreement G - First Party Data Protection	\$50,000	\$2,500
Insuring Agreement H - First Party Network Business Interruption Income Loss/Extra Expense Waiting Period	\$50,000	\$2,500  12 hours

**Policy Forms And Endorsements Attached At Inception**

Number	Title
25-8938 J7155-ED1 W2340-ED1	VA P/H Regarding Claims-Made Cyber Liability Coverage Form Cyber Liab - VA Amendatory Endor



Dear Valued Customer,

Have the growth of your business and rising labor costs reduced the accuracy of the payroll or revenue shown on your policy? Have increased costs and inflationary trends reduced the protection provided by your policy? Building and Business Personal Property insurance limits, once adequate, may no longer meet today's repair or replacement costs.

To help compensate for these inflationary trends, the limits of insurance for Building and/or Business Personal Property coverages have been increased by a modest percentage. To keep your policy current with rising labor costs and normal business growth, the payroll and/or revenue have also been increased by a modest percentage.

This renewal offer includes the adjusted limits of insurance, payroll, revenue, and premium for your policy. The adjustments are relatively small, and they're based on estimated increases in the past year's construction and repair costs, as well as other inflationary factors, such as rising labor costs and normal business growth.

These increases do not guarantee adequate coverage for any loss; they are based on estimates. It is possible, for example, that updates or improvements to your property or increased sales might cause your individual needs for coverage to be greater than the amount provided by these adjustments. If you have not reviewed your policy recently, the effects of inflationary changes over time create the likelihood that the increases we made are less than the increases you need for optimal coverage.

These changes are made to better serve your insurance needs, and we encourage you to contact your Farmers® agent, who will be pleased to help you with a comprehensive review of your policy.

Acceptance of these changes does not waive the provisions of the coinsurance clause or any other policy clause.

Thank you for choosing Farmers. We appreciate your business.



