

Po Box 2915
Bloomington IL 61702-2915

Named Insured

AT3 M-12-9D1E-FABB F V

PLUMAS EUREKA VILLAS
HOMEOWNERS ASSOCIATION NO 7
PO BOX 544
BLAIRSDEN CA 96103-0544

Policy Number	90-WE-4396-9	
Policy Period	Effective Date	Expiration Date
12 Months	JUL 9 2025	JUL 9 2026
The policy period begins and ends at 12:01 am standard time at the premises location.		

Agent and Mailing Address

NIC BEDDOE
10775 PIONEER TRL STE 211C
TRUCKEE CA 96161-0234

PHONE: (530) 550-1400

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: HOMEOWNERS ASSOCIATION

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

POLICY PREMIUM \$ 53,282.00

Discounts Applied:
Renewal Year
Multiple Unit
Claim Record

Prepared
APR 29 2025
CMP-4000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

SECTION I - PROPERTY BLANKET

Coverage A - Buildings Limit of Insurance*
 Coverage B - Business Personal Property \$ 27,658,400
\$ 69,900

Location Number	Location of Described Premises
001	100 & 102 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
002	104 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
003	106 & 108 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
004	110 & 112 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
005	114 & 116 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
006	118 & 120 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
007	122 & 124 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703
008	126 POPLAR VALLEY RD BLAIRSDEN CA 96103-9703

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

Location Number	Location of Described Premises
009	111 COTTONWOOD DR BLAIRSDEN CA 96103-9733
010	121 COTTONWOOD DR BLAIRSDEN CA 96103-9733
011	127 COTTONWOOD DR BLAIRSDEN CA 96103-9733
012	133 COTTONWOOD DR BLAIRSDEN CA 96103-9734
013	137 COTTONWOOD DR BLAIRSDEN CA 96103-9734
014	139 COTTONWOOD DR BLAIRSDEN CA 96103-9734
015	143 COTTONWOOD DR BLAIRSDEN CA 96103-9734
016	135 COTTONWOOD DR BLAIRSDEN CA 96103-9734
017	145 COTTONWOOD DR BLAIRSDEN CA 96103-9734
018	147 COTTONWOOD DR BLAIRSDEN CA 96103-9734

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

Location Number	Location of Described Premises
019	113 COTTONWOOD DR BLAIRSDEN CA 96103-9733
020	119 COTTONWOOD DR BLAIRSDEN CA 96103-9733
021	123 COTTONWOOD DR BLAIRSDEN CA 96103-9733
022	129 COTTONWOOD DR BLAIRSDEN CA 96103-9733
023	141 COTTONWOOD DR BLAIRSDEN CA 96103-9734
024	125 COTTONWOOD DR BLAIRSDEN CA 96103-9733
025	109 COTTONWOOD DR BLAIRSDEN CA 96103-9733
026	115 COTTONWOOD DR BLAIRSDEN CA 96103-9733
027	117 COTTONWOOD DR BLAIRSDEN CA 96103-9733
028	131 COTTONWOOD DR BLAIRSDEN CA 96103-9733

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
Policy Number 90-WE-4396-9

Location Number	Location of Described Premises
029	103 COTTONWOOD DR BLAIRSDEN CA 96103-9733
030	105 COTTONWOOD DR BLAIRSDEN CA 96103-9733
031	107 COTTONWOOD DR BLAIRSDEN CA 96103-9733
032	101 COTTONWOOD DR BLAIRSDEN CA 96103-9733

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

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 266.2

SECTION I - DEDUCTIBLES

Basic Deductible \$20,000

Special Deductibles:

Money and Securities	\$250	Employee Dishonesty	\$250
Equipment Breakdown	\$2,500		

Other deductibles may apply - refer to policy.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

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	LIMIT OF 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
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

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

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	\$50,000
Off Premises	\$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	\$15,000
Pollutant Clean Up And Removal	\$10,000
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Signs	\$2,500
Valuable Papers And Records	
On Premises	\$10,000
Off Premises	\$5,000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

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.

COVERAGE	LIMIT OF INSURANCE
Back-Up of Sewer or Drain	Included
Employee Dishonesty	\$25,000
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$2,000,000
Coverage M - Medical Expenses (Any One Person)	\$10,000
Damage To Premises Rented To You	\$300,000
AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$4,000,000
General Aggregate	\$4,000,000

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.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
 Policy Number 90-WE-4396-9

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-4101	Businessowners Coverage Form
CMP-4260.2	*Amendatory Endorsement - CA
CMP-4587	*Exclusion Silica
FE-6999.3	*Terrorism Insurance Cov Notice
CMP-4705.2	Loss of Income & Extra Expense
CMP-4830	Interior Building Damage
CMP-4828	Extra Replacement Cost
CMP-4696	Residential Community Assoc
CMP-4746.1	Hired Auto Liability
CMP-4710	Employee Dishonesty
CMP-4508	Money and Securities
CMP-4864	Building Ordinance or Law Cov
FD-6007	Inland Marine Attach Dec
	* New Form Attached

This policy is issued by the State Farm General Insurance 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 General Insurance Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

Muchelle Mancias
 Secretary

Daniel J. Krane
 President

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
Policy Number 90-WE-4396-9

IMPORTANT NOTICE:

California law requires us to provide you with information for filing complaints with the State Insurance Department regarding the coverage and service provided under this policy.

Your agent's name and contact information are provided on the front of this document. Another option is to reach out by mail or phone directly to:

State Farm® Executive Customer Service
 PO Box 2320
 Bloomington IL 61702
 Phone # 1-800-STATEFARM (1-800-782-8332)

Department of Insurance complaints should be filed only after you and State Farm or your agent or other company representative have failed to reach a satisfactory agreement on a problem.

California Department of Insurance
 Consumer Services Division
 300 South Spring Street
 Los Angeles, CA 90013
 Phone # 1-800-927-HELP (4357) or visit www.insurance.ca.gov/01-consumers

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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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for PLUMAS EUREKA VILLAS
Policy Number 90-WE-4396-9

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 encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your structure.

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Po Box 2915
Bloomington IL 61702-2915

Named Insured

M-12-9D1E-FABB F V

PLUMAS EUREKA VILLAS
HOMEOWNERS ASSOCIATION NO 7
PO BOX 544
BLAIRSDEN CA 96103-0544

INLAND MARINE ATTACHING DECLARATIONS

Policy Number	90-WE-4396-9	
Policy Period	Effective Date	Expiration Date
12 Months	JUL 9 2025	JUL 9 2026
The policy period begins and ends at 12:01 am standard time at the premises location.		

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-6271 Amendatory Endorsement
FE-8745 Inland Marine Computer Prop

See Reverse for Schedule Page with Limits

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APR 29 2025
FD-6007

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ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

ENDORSEMENT NUMBER	COVERAGE	LIMIT OF INSURANCE	DEDUCTIBLE AMOUNT	ANNUAL PREMIUM
FE-8745	Inland Marine Computer Prop Loss of Income and Extra Expense	\$ 10,000 \$ 10,000	\$ 500	Included Included

OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY

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APR 29 2025
FD-6007

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IMPORTANT NOTICE

Regarding Changes to Your Policy

CMP-4260.2 AMENDATORY ENDORSEMENT (California) is added to your State Farm® policy and replaces **CMP-4260.1 AMENDATORY ENDORSEMENT (California)** and **CMP-4261 AMENDATORY ENDORSEMENT (California)**.

Editorial changes have been made to the following provisions:

- **SECTION I – CONDITIONS, Mortgageholders**
- **SECTION I AND SECTION II – COMMON POLICY CONDITIONS, Cancellation**
- **SECTION I AND SECTION II – COMMON POLICY CONDITIONS, When We Do Not Renew**

The endorsement follows this notice. Please read the endorsement and place it with your policy. If you have any questions, please contact your State Farm agent.

DISCLAIMER: This notice only provides a general summary of changes to your State Farm policy. This notice is not a statement of contract. This notice does not change, modify, or invalidate the provisions, terms, or conditions as set forth in your State Farm policy booklet, the most recently issued declarations, and any applicable endorsements.

AMENDATORY ENDORSEMENT (California)

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

1. **SECTION I – CONDITIONS** is amended as follows:
 - a. Paragraph 2.b.(6) and (7) under **Mortgageholders** are replaced by the following:
 - (6) If we cancel this policy, we will provide notice to the mortgageholder at least:
 - (a) 10 days before the effective date of cancellation if we cancel for your nonpayment of premium; or
 - (b) 30 days before the effective date of cancellation if we cancel for any other reason.
 - (7) If we elect not to renew this policy, we will provide notice to the mortgageholder at least 10 days before the expiration date of this policy.
 - b. Paragraph 1.e.(4)(a)ii.2 of **Loss Payment** under **Property Loss Conditions** is replaced by the following:

Within 36 months after we pay the actual cash value if the loss or damage related to a state of emergency as described in Section 8558 of the Government Code;
2. **SECTION I – EXCLUSIONS** is amended as follows:
 - a. Paragraph 2.f. **Dishonesty** is replaced by the following:
 - f. **Dishonesty**
 - (1) Dishonest or criminal acts by you, anyone else with an interest in the property, or any of your or their partners, “members”, officers, “managers”, employees, directors, trustees, or authorized representatives, whether acting alone or in collusion with each other or with any other party; or
 - (2) Theft by any person to whom you entrust the property for any purpose, whether acting alone or in collusion with any other party.

This exclusion applies whether or not an act occurs during your normal hours of operation.

This exclusion does not apply to acts of destruction by your employees; but theft by your employees is not covered.

With respect to accounts receivable and “valuable papers and records”, this exclusion does not apply to carriers for hire.

- b. Under Paragraph i. **Fungi, Virus Or Bacteria**, the reference to **23. Fungi, Wet Or Dry Rot** is changed to **24. Fungi, Wet Or Dry Rot**.
3. Paragraph **24. d. under Fungi, Wet Or Dry Rot And Bacteria** of **SECTION I – EXTENSIONS OF COVERAGE** does not apply.
4. **SECTION II – LIABILITY** is amended as follows:
 - a. When used in this policy, the words “his or her” are replaced with “that person’s”.
 - b. **Section II – Exclusions** is amended as follows:
 - (1) Paragraphs **17.b. and 17.c. under Personal And Advertising Injury** are replaced by the following:
 - b. Arising out of oral or written publication of material, in any manner, if done by or at the direction of the insured with knowledge of its falsity;
 - c. Arising out of oral or written publication of material, in any manner, whose first publication took place before the beginning of the policy period;
 - c. Under **SECTION II – MEDICAL EXPENSES**, Paragraph **1.d.(2) under Coverage M – Medical Expenses** is replaced by the following:
 - (2) Executes authorization to allow us to obtain copies of medical bills, medical records, and any other information we deem necessary to substantiate the claim.
Such authorizations must not:
 - (a) Restrict us from performing our business functions in:
 - i. Obtaining records, bills, information, and data; or
 - ii. Using or retaining records, bills, information, and data collected or received by us;
 - (b) Require us to violate federal or state laws or regulations;
 - (c) Prevent us from fulfilling our data reporting and data retention obligations to insurance regulators; or
 - (d) Prevent us from disclosing claim information and data:
 - i. To enable performance of our business functions;
 - ii. To meet our reporting obligations to insurance regulators;
 - iii. To meet our reporting obligations to insurance data consolidators; and
 - iv. As otherwise permitted by law.

If the holder of the information refuses to provide it to us despite the authorization, then at our request the person making claim or his or her legal representative must obtain the information and promptly provide it to us; and
 - d. **SECTION II – DEFINITIONS**, is amended as follows:
 - (1) Paragraphs **18.f. and 18.g** are replaced by the following:
 - f. The use of another’s advertising idea in your “advertisement”; or
 - g. Infringing upon another’s copyright, trade dress or slogan in your “advertisement”.
 - (2) Paragraph **18.h.** is deleted.
5. **SECTION I AND SECTION II – COMMON POLICY CONDITIONS** is amended as follows:
 - a. Paragraph **1.** is replaced by the following:
 1. **Cancellation**
 - a. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.

b. All Policies In Effect For 60 Days Or Less

If this policy has been in effect for 60 days or less, and is not a renewal of a policy we have previously issued, we may cancel this policy by providing to the first Named Insured and to the producer of record, advance notice of cancellation, stating the reason for cancellation, at least:

- (1) 10 days before the effective date of cancellation if we cancel for a reason listed in Paragraph **c.(1)(a)** or **c.(1)(b)** below regardless of how long this policy has been in effect; or
- (2) 30 days before the effective date of cancellation if we cancel for any other reason.

c. All Policies In Effect For More Than 60 Days

(1) If this policy has been in effect for more than 60 days, or is a renewal of a policy we issued, we may cancel this policy only upon the occurrence, after the effective date of the policy, of one or more of the following:

- (a) Nonpayment of premium, including payment due on a prior policy we issued and due during the current policy term covering the same risks.
- (b) Discovery of fraud or material misrepresentation by:
 - i. Any insured or his or her representative in obtaining this insurance; or
 - ii. You or your representative in pursuing a claim under this policy.
- (c) A judgment by a court or an administrative tribunal that you have violated a California or Federal law, having as one of its necessary elements an act which materially increases any of the risks insured against.
- (d) Discovery of willful or grossly negligent acts or omissions, or of any violations of state laws or regulations establishing safety standards, by you or your representative, which materially increase any of the risks insured against.
- (e) Failure by you or your representative to implement reasonable loss control requirements, agreed to by you as a condition of policy issuance, or which were conditions precedent to our use of a particular rate or rating plan, if that failure materially increases any of the risks insured against.
- (f) A determination by the Commissioner of Insurance that the:
 - i. Loss of, or changes in, our reinsurance covering all or part of the risk would threaten our financial integrity or solvency; or
 - ii. Continuation of the policy coverage would:
 - 1) Place us in violation of California law or the laws of the state where we are domiciled; or
 - 2) Threaten our solvency.
- (g) A change by you or your representative in the activities or property of the commercial or industrial enterprise, which results in a materially added, increased or changed risk, unless the added, increased or changed risk is included in the policy.

(2) We will provide advance notice of cancellation, stating the reason for cancellation, to the first Named Insured and to the producer of record, at least:

- (a) 10 days before the effective date of cancellation if we cancel for a reason listed in Paragraph **c.(1)(a)** or **c.(1)(b)** above; or
- (b) 30 days before the effective date of cancellation if we cancel for any other reason listed in Paragraph **c.(1)** above.

d. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.

e. If this policy is cancelled, we will send the first Named Insured any premium refund due. The refund will be pro rata. The cancellation will be effective even if we have not made or offered a refund.

f. If this policy insured more than one named insured:

- (1) The first named insured may effect cancellation for the account of all insureds; and

- (2) Our notice of cancellation to the first named insured is notice to all insureds. Payment of unearned premium to the first named insured is for the account of all interests therein.

g. Residential Property

This provision applies to coverage on real property which is used predominantly for residential purposes and consisting of not more than four dwelling units, and to coverage on tenants' household personal property in a residential unit. If such coverage has been in effect for 60 days or less and is not a renewal of coverage we previously issued, we may cancel this coverage for any reason, except that we may not cancel this policy solely because:

- (1) Corrosive soil conditions exist on the premises; or
- (2) The first Named Insured has:
 - (a) Accepted an offer of earthquake coverage; or
 - (b) Cancelled or did not renew a policy issued by the California Earthquake Authority (CEA) that included an earthquake policy premium surcharge.

However, we shall cancel this policy if the first Named Insured has accepted a new or renewal policy issued by the CEA that includes an earthquake policy premium surcharge but fails to pay the earthquake policy premium surcharge authorized by the CEA.

- b. Paragraph 13. is replaced by the following:

13. When We Do Not Renew

- a. Subject to the provisions of Paragraphs b. and c. below, if we elect not to renew this policy, we will provide notice stating the reason for nonrenewal to the first Named Insured shown in the Declarations and to the producer of record, at least 60 days, but not more than 120 days, before the expiration or anniversary date.
- b. **Residential Property**

This provision applies to coverage on real property used predominantly for residential purposes and consisting of not more than four dwelling units, and to coverage on tenants' household property contained in a residential unit.

We may elect not to renew such coverage for any reason, except that we will not refuse to renew such coverage solely because:

- (1) The first Named Insured has accepted an offer of earthquake coverage.

However, the following applies only to insurers who are associate participating insurers as established by Cal. Ins. Code Section 10089.16. We may elect not to renew such coverage after the first Named Insured has accepted an offer of earthquake coverage, if one or more of the following reasons applies:

- (a) The nonrenewal is based on sound underwriting principles that relate to the coverages provided by this policy and that are consistent with the approved rating plan and related documents filed with the Department of Insurance as required by existing law;
- (b) The Commissioner of Insurance finds that the exposure to potential losses will threaten our solvency or place us in a hazardous condition. A hazardous condition includes, but is not limited to, a condition in which we make claims payments for losses resulting from an earthquake that occurred within the preceding two years and that required a reduction in policyholder surplus of at least 25% for payment of those claims; or
- (c) We have:
 - i. Lost or experienced a substantial reduction in the availability or scope of reinsurance coverage; or
 - ii. Experienced a substantial increase in the premium charged for reinsurance coverage of our residential property insurance policies; and

the Commissioner has approved a plan for the nonrenewals that is fair and equitable, and that is responsive to the changes in our reinsurance position.

- (2) The first Named Insured has cancelled or did not renew a policy, issued by the California Earthquake Authority that included an earthquake policy premium surcharge.
- (3) Corrosive soil conditions exist on the premises.
- c. We are not required to provide notice of nonrenewal in the following situations:
 - (1) If the transfer or renewal of a policy, without any changes in terms, conditions, or rates, is between us and a member of our insurance group.
 - (2) If the policy has been extended for 90 days or less, provided that notice has been given in accordance with Paragraph a.
 - (3) If you have obtained replacement coverage, or if the first Named Insured has agreed, in writing, within 60 days of the termination of the policy, to obtain that coverage.
 - (4) If the policy is for a period of no more than 60 days and you are notified at the time of issuance that it will not be renewed.
 - (5) If the first Named Insured requests a change in the terms or conditions or risks covered by the policy within 60 days of the end of the policy period.
 - (6) If we have made a written offer to the first Named Insured, in accordance with the timeframes shown in Paragraph a., to renew the policy under changed terms or conditions or at an increased premium rate, when the increase exceeds 25%.

6. The following are added to **SECTION I AND SECTION II – COMMON POLICY CONDITIONS:**

Our Rights Regarding Claim Information

- a. We will collect, receive, obtain, use, and retain all the items described in Paragraph b.(1) below and use and retain the information described in Paragraph b.(3)(b) below, in accordance with applicable federal and state laws and regulations and consistent with the performance of our business functions.
- b. Subject to Paragraph a. above, we will not be restricted in or prohibited from:
 - (1) Collecting, receiving, or obtaining records, receipts, invoices, medical bills, medical records, wage information, salary information, employment information, data, and any other information;
 - (2) Using any of the items described in Paragraph b.(1) above; or
 - (3) Retaining:
 - (a) Any of the items in Paragraph b.(1) above; or
 - (b) Any other information we have in our possession as a result of our processing, handling, or otherwise resolving claims submitted under this policy.
- c. We may disclose any of the items in Paragraph b.(1) above and any of the information described in Paragraph b.(3)(b) above:
 - (1) To enable performance of our business functions;
 - (2) To meet our reporting obligations to insurance regulators;
 - (3) To meet our reporting obligations to insurance data consolidators;
 - (4) To meet other obligations required by law; and
 - (5) As otherwise permitted by law.
- d. Our rights under Paragraphs a., b., and c. above shall not be impaired by any:
 - (1) Authorization related to any claim submitted under this policy; or
 - (2) Act or omission of an insured or a legal representative acting on an insured's behalf.

All other policy provisions apply.

CMP-4260.2

IMPORTANT NOTICE

Regarding Changes to Your Policy

CMP-4587 EXCLUSION – SILICA OR SILICA-RELATED DUST is added to your State Farm® policy.

The following changes to your policy are effective with this policy term:

- **SECTION II – LIABILITY, Section II – Exclusions**
 - **Silica or Silica-Related Dust:** There is no coverage for “bodily injury”, “property damage” and “personal and advertising injury” losses related to “silica” or “silica-related dust”, including any loss, cost or expense arising out of abating, testing for, monitoring, cleaning up, or other related activities, of “silica” or “silica-related dust”, by any insured or by any other person or entity.
- **SECTION II – DEFINITIONS:** “Silica” or “Silica-related dust” is added.

The endorsement follows this notice. Please read the endorsement and place it with your policy. If you have any questions, please contact your State Farm agent.

DISCLAIMER: This notice only provides a general summary of changes to your State Farm policy. This notice is not a statement of contract. This notice does not change, modify, or invalidate the provisions, terms, or conditions as set forth in your State Farm policy booklet, the most recently issued declarations, and any applicable endorsements.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EXCLUSION – SILICA OR SILICA-RELATED DUST

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

A. The following is added to Section II – Exclusions:

Silica or Silica-Related Dust

1. “Bodily injury”, “property damage” or “personal and advertising injury” arising, in whole or in part, out of the actual, alleged, threatened, or suspected inhalation of, ingestion, absorption, consumption, discharge, dispersal, seepage, migration, release or escape of, contact with, exposure to, existence of, or presence of, “silica” or “silica-related dust”.
2. Any loss, cost or expense arising, in whole or in part, out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to or assessing the effects of, “silica” or “silica-related dust”, by any insured or by any other person or entity.

B. The following definitions are added to SECTION II – DEFINITIONS:

1. “Silica” means silicon dioxide (occurring in crystalline, amorphous and impure forms), silica particles, silica dust or silica compounds.
2. “Silica-related dust” means a mixture or combination of silica and other dust or particles.

All other policy provisions apply.

CMP-4587

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(CONTINUED)

In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2019, this disclosure is part of your policy.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Coverage for acts of terrorism is not excluded from your policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism 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 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 REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COVERAGE.

FE-6999.3

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IMPORTANT NOTICE
Anti-Fraud Disclosure

For your protection California law requires notification of the following disclosure:

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

553-4370 CA

