

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

### TAILORED PROTECTION POLICY DECLARATIONS

AGENCY WHITEHEAD INSURANCE GROUP INC  
19-0044-00 MKT TERR 094 931-484-5103

Renewal Effective 06-10-2026

**POLICY NUMBER 124619-03111000-26**

INSURED CITYVIEW CONDOMINIUM ASSOC INC

Company Use 03-46-TN-1206

ADDRESS PO BOX 51767  
KNOXVILLE TN 37950-1767

Company Bill	Policy Term
	12:01 a.m. to 12:01 a.m.
	06-10-2026 to 06-10-2027

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

55039 (11-87)

### COMMON POLICY INFORMATION

**Business Description:** Association

**Entity:** Association\_\_\_\_\_

**Program:** Condominium-Residential Association

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PART(S):	PREMIUM
COMMERCIAL PROPERTY COVERAGE	\$113,136.00
COMMERCIAL GENERAL LIABILITY COVERAGE	\$5,933.00
COMMERCIAL CRIME COVERAGE	\$327.00
<b>TOTAL</b>	<b>\$119,396.00</b>
<b>TOTAL POLICY PREMIUM IF ON FULL PAY PLAN BY 06-10-2026</b>	<b>\$107,205.00</b>

**THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.**  
The Paid in Full Discount does not apply to fixed fees, statutory charges or minimum premiums.

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

IL0017 (11-85) 55001 (07-12) 55056 (07-87) 59390 (11-20)

A merit rating plan factor of 0.90 applies.

Countersigned By: 

Auto-Owners Ins. Co.

Issued 04-02-2026

AGENCY WHITEHEAD INSURANCE GROUP INC  
19-0044-00 MKT TERR 094

Company POLICY NUMBER 124619-03111000-26  
Bill 03-46-TN-1206

INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

54104 (07-87)

**COMMERCIAL PROPERTY COVERAGE**

55198 (12-10)

**STANDARD PROPERTY PLUS COVERAGE PACKAGE DECLARATION**

The coverages and limits below apply separately to each location or sublocation that sustains a loss to covered property and is designated in the Commercial Property Coverage Declarations. No deductible applies to the below Property Plus Coverages.

COVERAGE	LIMIT
ACCOUNTS RECEIVABLE	\$100,000
BAILEES	\$5,000
	\$2,500 PER ITEM
BUSINESS INCOME & EXTRA EXPENSE W/RENTAL VALUE, INCLUDING NEWLY ACQUIRED LOC'S 0 HOUR WAITING PERIOD	\$50,000
DEBRIS REMOVAL	\$25,000
ELECTRONIC DATA PROCESSING EQUIPMENT	\$25,000
EMPLOYEE DISHONESTY	\$15,000
FINE ARTS, COLLECTIBLES AND MEMORABILIA	\$10,000
	\$2,500 PER ITEM
FIRE DEPARTMENT SERVICE CHARGE	\$5,000
FORGERY AND ALTERATION	\$10,000
MONEY AND SECURITIES INSIDE PREMISES	\$15,000
MONEY AND SECURITIES OUTSIDE PREMISES	\$15,000
NEWLY ACQUIRED BUSINESS PERSONAL PROPERTY	\$500,000 FOR 90 DAYS
NEWLY ACQUIRED OR CONSTRUCTED PROPERTY	\$1,000,000 FOR 90 DAYS
ORDINANCE OR LAW	SEE COMMERCIAL PROPERTY DECLARATIONS
OUTDOOR PROPERTY	\$15,000
TREES, SHRUBS OR PLANTS	\$1,000 PER ITEM
RADIO OR TELEVISION ANTENNAS	\$10,000
PERSONAL EFFECTS AND PROPERTY OF OTHERS	\$15,000
POLLUTANT CLEAN UP AND REMOVAL	\$25,000
PROPERTY IN TRANSIT	\$25,000
PROPERTY OFF PREMISES	\$25,000
REFRIGERATED PRODUCTS	\$10,000
SALESPERSON'S SAMPLES	\$10,000

Auto-Owners Ins. Co.

Issued 04-02-2026

AGENCY WHITEHEAD INSURANCE GROUP INC  
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INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

55198 (12-10)

**STANDARD PROPERTY PLUS COVERAGE PACKAGE DECLARATION**

COVERAGE	LIMIT
UTILITY SERVICES FAILURE	\$50,000
VALUABLE PAPERS AND RECORDS ON PREMISES	\$50,000
VALUABLE PAPERS AND RECORDS OFF PREMISES	\$10,000
WATER BACK-UP FROM SEWERS OR DRAINS	\$15,000

Forms that apply to this coverage part:

64004 (12-10)	54198 (12-10)	54334 (12-10)	64020 (12-10)	54189 (12-10)
54186 (12-10)	54218 (03-13)	54217 (07-17)	54216 (03-13)	54214 (03-13)
54221 (12-10)	54220 (06-00)	54219 (12-10)	54338 (03-13)	54339 (03-13)
64010 (12-10)	64352 (12-20)	64000 (12-10)	64001 (12-10)	64002 (12-10)

**Coverages Provided**

Insurance at the described premises applies only for coverages for which a limit of insurance is shown.

**LOCATION 0001 - BUILDING 0001**

Location: 445 W Blount Ave, Knoxville, TN 37920-1106

Occupied As: Condo Association

Secured Interested Parties: None

**Rating Information**

Territory: 471

County: Knox

Program: Condominium-Residential A

Construction: Frame

Protection Class: 02

Class Code: 0343

Annual Receipts: \$500,000

Specific Rate - Building: 0.076

Specific Rate - Pers Prop: 0.067

Class Rate - Bi & Extra Exp: 1.720

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
BUILDING			\$33,143,100		
Causes of Loss					
Basic Group I	90%	\$40,000*		0.095	\$31,486.00
Basic Group II	90%	\$40,000*		0.177	\$58,663.00
Windstorm/Hail	90%	1% *			Included
Special	90%	\$40,000*		0.031	\$10,274.00
Theft	90%	\$40,000*			Included
OPTIONAL COVERAGE					

Auto-Owners Ins. Co.

Issued 04-02-2026

AGENCY WHITEHEAD INSURANCE GROUP INC  
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Company POLICY NUMBER 124619-03111000-26  
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INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
Agreed Value Exp Date 06-10-2027					
Inflation Guard Factor Building 1.031					
Replacement Cost					
Equipment Breakdown		\$40,000	See Form 54843		\$2,802.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$7,341.00
Tier: Standard					
ORDINANCE OR LAW					
Coverage A-Undamaged Portion		\$40,000	Incl in Bldg Limit		Included
Coverage B-Demolition		\$40,000	\$60,000		Included
Coverage C-Increased Cost		\$40,000	\$60,000		Included
PERSONAL PROPERTY			\$221,320		
Causes of Loss					
Basic Group I	90%	\$40,000*		0.075	\$166.00
Basic Group II	90%	\$40,000*		0.071	\$157.00
Windstorm/Hail	90%	1% *			Included
Special	90%	\$40,000*		0.083	\$184.00
Theft	90%	\$40,000*			Included
OPTIONAL COVERAGE					
Agreed Value Exp Date 06-10-2027					
Inflation Guard Factor Personal Property 1.025					
Replacement Cost					
Equipment Breakdown		\$40,000	See Form 54843		\$14.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$37.00
Tier: Standard					
ORDINANCE OR LAW					
Coverage D-Tenant's I&B		\$40,000	\$60,000		Included
BI & EXTRA EXP			Actual Loss Sustained		
0 Hour Waiting Period			12 Months		
Causes of Loss					
Special	0%	\$0		1.394	\$697.00
Theft					Excluded
OPTIONAL COVERAGE					
Equipment Breakdown		\$0	See Form 54843		\$18.00

\*This deductible will apply separately to each building.

Forms that apply to this building:

54835 (07-08)	IL0250 (02-89)	IL0003 (07-02)	59350 (01-15)	64036 (02-12)
64224 (01-16)	59325 (12-19)	64326 (07-19)	IL0017 (11-85)	64393 (08-22)
CP0090 (07-88)	64013 (12-10)	64010 (12-10)	64020 (12-10)	64004 (12-10)
54843 (07-19)	54585 (12-10)	64352 (12-20)	64001 (12-10)	64000 (12-10)
64014 (07-17)	59390 (11-20)			

Auto-Owners Ins. Co.

Issued 04-02-2026

AGENCY WHITEHEAD INSURANCE GROUP INC  
19-0044-00 MKT TERR 094

Company POLICY NUMBER 124619-03111000-26  
Bill 03-46-TN-1206

INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

**LOCATION 0001 - BUILDING 0002**

Location: 445 W Blount Ave, Knoxville, TN 37920-1106

Occupied As: Condo Association

Secured Interested Parties: None

**Rating Information**

Territory: 471

County: Knox

Program: Condominium-Residential A

Construction: N/A

Protection Class: 02

Class Code: 1190

Spcl Class Rate - Swimming Pool In The Open: 0.080

COVERAGE	COINSURANCE	DEDUCTIBLE	LIMIT	RATE	PREMIUM
SWIMMING POOL IN THE OPEN			\$104,000		
Causes of Loss					
Basic Group I	90%	\$40,000		0.040	\$42.00
Basic Group II	90%	\$40,000		0.082	\$85.00
Windstorm/Hail	90%	1%			Included
Special	90%	\$40,000		0.032	\$33.00
Theft	90%	\$40,000			Included
OPTIONAL COVERAGE					
Agreed Value Exp Date 06-10-2027					
Replacement Cost					
Equipment Breakdown		\$40,000	See Form 54843		\$4.00
Property Plus Coverage Package		None	See 55198 (12-10)		\$13.00
Tier: Standard					
ORDINANCE OR LAW					
Coverage A-Undamaged Portion		\$40,000	Incl in Bldg Limit		Included
Coverage B-Demolition		\$40,000	\$60,000		Included
Coverage C-Increased Cost		\$40,000	\$60,000		Included

\*This deductible will apply separately to each building.

Forms that apply to this building:

54835 (07-08)	IL0250 (02-89)	IL0003 (07-02)	59350 (01-15)	64036 (02-12)
64224 (01-16)	59325 (12-19)	64326 (07-19)	IL0017 (11-85)	64393 (08-22)
CP0090 (07-88)	64010 (12-10)	64020 (12-10)	64004 (12-10)	54843 (07-19)
54585 (12-10)	64352 (12-20)	64002 (12-10)	59390 (11-20)	

COMMERCIAL PROPERTY COVERAGE - LOCATION 0001 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 54835, 59390	\$1,120.00
<b>LOCATION 0001</b>	<b>\$113,136.00</b>

Auto-Owners Ins. Co.

Issued 04-02-2026

AGENCY WHITEHEAD INSURANCE GROUP INC  
19-0044-00 MKT TERR 094

Company POLICY NUMBER 124619-03111000-26  
Bill 03-46-TN-1206

INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

55040 (11-87)

**COMMERCIAL GENERAL LIABILITY COVERAGE**

COVERAGE	LIMITS OF INSURANCE
General Aggregate (Other Than Products-Completed Operations)	\$2,000,000
Products-Completed Operations Aggregate	\$2,000,000
Personal And Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000
<b>COMMERCIAL GENERAL LIABILITY PLUS ENDORSEMENT</b>	
Damage to Premises Rented to You (Fire, Lightning, Explosion, Smoke or Water Damage)	\$300,000 Any One Premises
Medical Payments	\$10,000 Any One Person
Hired Auto & Non-Owned Auto	\$1,000,000 Each Occurrence
Expanded Coverage Details See Form:	
Extended Watercraft	
Personal Injury Extension	
Broadened Supplementary Payments	
Broadened Knowledge Of Occurrence	
Additional Products-Completed Operations Aggregate	
Blanket Additional Insured - Lessor of Leased Equipment	
Blanket Additional Insured - Managers or Lessors of Premises	
Newly Formed or Acquired Organizations Extension	
Blanket Waiver of Subrogation	

Twice the "General Aggregate Limit", shown above, is provided at no additional charge for each 12 month period in accordance with form 55885.

**AUDIT TYPE:** Non-Audited

Forms that apply to this coverage:

55405 (07-08)	59350 (01-15)	55146 (06-04)	IL0250 (02-89)	IL0017 (11-85)
IL0021 (07-02)	CG2106 (05-14)	55091 (05-17)	CG2004 (11-85)	CG2167 (12-04)
CG0001 (04-13)	55513 (05-17)	CG2109 (06-15)	55029 (05-17)	CG2196 (03-05)
CG2132 (05-09)	CG2147 (12-07)	55885 (05-17)	CG2026 (04-13)	59325 (12-19)
65063 (08-23)	CG4032 (05-23)	59390 (11-20)		

Auto-Owners Ins. Co.

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Company POLICY NUMBER 124619-03111000-26  
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INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

**LOCATION 0001 - BUILDING 0001**

Location: 445 W Blount Ave, Knoxville, TN 37920-1106

Territory: 002

County: Knox

CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Commercial General Liability Plus Endorsement Included At 7.5% Of The Premises Operation Premium	00501	Prem/Op	Prem/Op Prem Included	Included	Included
Lakes Or Reservoirs - Existence Hazard Only (For Profit)	45523	Prem/Op Prod/Comp Op	Lakes/Reservoir 1 1	Each 1 791.260 8.224	\$791.00 \$8.00
Parking - Private	46622	Prem/Op Prod/Comp Op	Area 66,483 66,483	Each 1000 14.723 .982	\$979.00 \$65.00
Swimming Pools Noc	48925	Prem/Op Prod/Comp Op	Pools 1 1	243.042 20.482	\$243.00 \$20.00
Condominiums - Residential - (Association Risk Only)	62003	Prem/Op Prod/Comp Op	Units 122 122	Each 1 29.211 1.264	\$3,564.00 \$154.00
Additional Interests Designated Per/Organization L 1. Realty Resource Syst	49950	Prem/Op Prod/Comp Op	Flat Charge Flat Charge		\$25.00 \$25.00

COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0001 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 55405, 59390	\$59.00
<b>LOCATION 0001</b>	<b>\$5,933.00</b>

55041 (02-88)

**COMMERCIAL CRIME COVERAGE**

THIS DECLARATIONS PAGE SHOWS THE COVERAGE FORM(S) AND SECTION(S) WHICH APPLY AND FOR WHICH YOU HAVE PAID A PREMIUM.

Plan: 01 Combination Crime-Separate Limits Option

Location: All Premises

COVERAGE	BY PERSON/ POSITION	SECTION	LIMIT	DEDUCTIBLE	PREMIUM
A-Blanket Employee Dishonesty			\$250,000	\$1,000	\$327.00

Cancellation of prior insurance: By acceptance of this fidelity bond you give us notice cancelling prior fidelity bond with the cancellation to be effective at the time this policy becomes effective.

Forms that apply to all premises:

Auto-Owners Ins. Co.

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Term 06-10-2026 to 06-10-2027

IL0017 (11-85)	IL0250 (02-89)	IL0003 (07-02)	29415 (01-16)	59325 (12-19)
CR0001 (10-90)	CR1000 (06-95)	CC175 (01-86)	25053 (07-16)	

COMMERCIAL CRIME COVERAGE - ALL PREMISES PREMIUM SUMMARY	PREMIUM
ALL PREMISES PREMIUM	\$327.00

Auto-Owners Ins. Co.

Issued 04-02-2026

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19-0044-00 MKT TERR 094

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Bill 03-46-TN-1206

INSURED CITYVIEW CONDOMINIUM ASSOC INC

Term 06-10-2026 to 06-10-2027

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55056 (07-87)

## SUPPLEMENTAL DECLARATIONS

INTENT OF BUILDING COVERAGE IS TO COVER THE ENTIRE BUILDING, INCLUDING INTERIOR OF UNITS NOT TO INCLUDE PERSONAL BELONGINGS AND IMPROVEMENTS AND BETTERMENTS. COVERAGE INTENDED FOR FLOORS, WALLS, CABINETS, PAINT AND INTERIOR FIXTURES.