

RENEWAL OF:
CPC100421

CERTIFICATE OF INSURANCE

COMMON POLICY DECLARATIONS

Certificate Number
CPC100515
AUTHORITY REF. NO.
B0142AA2200286

This Declaration is attached to and forms part of certificate provisions (Form LPG1).

ITEM 1. NAMED INSURED AND MAILING ADDRESS

GULF STREAM COTTAGES HOA INC.

1756 HIGHWAY 501

MYRTLE BEACH SC 29577

AGENT NAME AND ADDRESS

BURNS & WILCOX, LTD.
10607 HIGHWAY 707, SUITE 180
MYRTLE BEACH, SC 29588

THIS COMPANY HAS BEEN APPROVED BY THE DIRECTOR OR HIS DESIGNEE OF THE SOUTH CAROLINA DEPARTMENT OF INSURANCE TO WRITE BUSINESS IN THIS STATE AS AN ELIGIBLE SURPLUS LINES INSURER, BUT IT IS NOT AFFORDED GUARANTY FUND PROTECTION. THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR NAMED STORM OR WIND/ HAIL LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU. THE ENCLOSED EXAMPLE ILLUSTRATES HOW THE DEDUCTIBLE MIGHT AFFECT YOU.

ITEM 2. POLICY PERIOD From: 10/ 21/ 2023 To: 10/ 21/ 2024 Term: 12 MONTHS

12:01 A.M., Standard Time at your mailing address

BUSINESS DESCRIPTION: HOMEOWNERS ASSOCIATION

Insurance is effective with certain

Chubb European Group SE.

FORM OF BUSINESS: Individual Joint Venture Partnership Organization Corporation LLC

Audit Period: Annual unless otherwise stated:

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

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
Commercial Property Coverage Part - Section 1	\$ 1,064.00
Commercial General Liability Coverage Part - Section 2	\$ NOT COVERED
Commercial Crime Coverage Part - Section 3	\$ NOT COVERED
Commercial Inland Marine Coverage Part - Section 4	\$ NOT COVERED
Professional Liability Coverage Part - Section 5	\$ NOT COVERED
Errors & Omissions Liability Coverage Part - Section 6	\$ NOT COVERED
Liquor Liability Coverage Part - Section 7	\$ NOT COVERED
Jeweler's Block Coverage Part - Section 8	\$ NOT COVERED
	\$ NOT COVERED
	\$ NOT COVERED
POLICY FEE	\$ 200.00
	TOTAL \$ 1,064.00

This policy contains a Mold And Fungus EXCLUSION and/or Limitation

This policy contains a Terrorism EXCLUSION

SURPLUS LINES TAX \$ 75.84

This policy does not cover Flood loss

Premium shown is payable: \$ 1,339.84 at inception. \$ 1,339.84

NO FLAT CANCELLATION

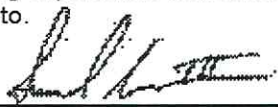
TOTAL \$ 1,339.84

Forms applicable to all Coverage Parts:

SEE SCHEDULE OF FORMS AND ENDORSEMENTS

This certificate of Insurance is made and accepted subject to the foregoing stipulations and conditions together with such other provisions, agreement or conditions as may be endorsed or added hereto.

Dated at: 10/ 25/ 2023 JSS/ LX

By: 
Samuel Carson (Correspondent)

**COMMERCIAL POLICY COVERAGE PART
SUPPLEMENTAL DECLARATIONS
PARTICIPATION BY RESPECTIVE CONTRACT**

These Supplemental Declarations form a part of Certificate Number CPC100515

This Declaration Page is attached to and forms part of the common policy declarations.

EFFECTIVE WITH			
<u>Section</u>	<u>Company</u>	<u>Contract #</u>	<u>Amount or Percent</u>
1 - PROPERTY	Chubb European Group SE	B0142AA2200286	100 %
			%
			%
			%
			%
			%
			%
			%
			%

FORMS AND ENDORSEMENTS (other than applicable forms and endorsements shown elsewhere in the policy).

Forms and endorsements applying to this Coverage Part and made part of this policy at time of issue:

BURNS & WILCOX, LTD.

Dated: _____

By: _____

(Correspondent)

PRIVACY POLICY STATEMENT of CHUBB EUROPEAN GROUP SE

This Privacy Policy Statement describes how we protect the confidentiality of your non-public personal information. We want you to know how and why we use and disclose the information that we have about you. The following describes our policies and practices for securing the privacy of our current and former customers.

INFORMATION WE COLLECT

The non-public personal information that we collect about you includes, but is not limited to:

- Information contained in applications or other forms that you submit to us, such as name, address, and social security number
- Information about your transactions with our affiliates or other third-parties, such as balances and payment history
- Information we receive from a consumer-reporting agency, such as credit-worthiness or credit history

INFORMATION WE DISCLOSE

We disclose the information that we have when it is necessary to provide our products and services. We may also disclose information when the law requires or permits us to do so.

CONFIDENTIALITY AND SECURITY

Only our employees and others who need the information to service your account have access to your personal information. We have measures in place to secure our paper files and computer systems.

RIGHT TO ACCESS OR CORRECT YOUR PERSONAL INFORMATION

You have a right to request access to or correction of your personal information that is in our possession.

CONTACTING US

If you have any questions about this privacy notice or would like to learn more about how we protect your privacy, please contact the agent or broker who handled this insurance. We can provide a more detailed statement of our privacy practices upon request.

Security List

Contract: B0142AA2200286

Chubb European Group SE -1882/ 2488 CGM -100%

BWSCSYND286

COMMERCIAL PROPERTY COVERAGE PART SUPPLEMENTAL DECLARATIONS

Certificate No. CPC100515

Effective Date: 10/ 21/ 2023
12:01 A.M., Standard Time

Named Insured: GULF STREAM COTTAGES HOA INC.

BUSINESS DESCRIPTION

HOMEOWNERS ASSOCIATION

DESCRIPTION OF PREMISES

PREM. NO.	BLDG. NO.	LOCATION AND CONSTRUCTION
1	1	1900 CASSANDRA LANE, MYRTLE BEACH, SC 29577; FRAME

COVERAGES PROVIDED - INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN.

PREM. NO.	BLDG. NO.	COVERAGE	LIMIT OF INS.	COVD CAUSES OF LOSS	COINSURANCE	RATES
1	1	BUILDING	\$24,000	SPECIAL/ X-THEFT	80%	1.970
1	1	BUSINESS PERSONAL PROPERTY	\$30,000	SPECIAL/ X-THEFT	80%	1.970

OPTIONAL COVERAGES - APPLICABLE ONLY WHEN ENTRIES ARE MADE IN THE SCHEDULE BELOW

† IF EXTRA EXPENSE COVERAGE, LIMITS ON LOSS PAYMENT

PREM. NO.	BLDG. NO.	AGREED VALUE EXP. DATE	COVERAGE	REPLACEMENT COST APPLIES IF CHECKED (X)		
				AMOUNT	BUILDING	PERS. PROPERTY INCLUD. "STOCK"
1	1			X		X

PREM. NO.*	BLDG. NO.	INFLATION GUARD (Percentage)		†† MONTHLY LIMIT OF INDEMNITY (Fraction)	†† MAXIMUM PERIOD OF INDEMNITY (X)	†† EXTENDED PERIOD OF INDEMNITY (Days)
		BUILDING	PERSONAL PROPERTY			

PREM. NO.	BLDG. NO.	EQUIPMENT BREAKDOWN COVERAGE (APPLIES IF CHECKED)	PREMIUM
		<input type="checkbox"/>	

MORTGAGE HOLDER(S)

†† APPLIES TO BUSINESS INCOME ONLY

PREM. NO.	BLDG. NO.	MORTGAGE HOLDER NAME AND MAILING ADDRESS

DEDUCTIBLE

\$ 1,000 Exceptions: SEE CP0321

FORMS AND ENDORSEMENTS (other than applicable Forms and Endorsements shown elsewhere in the Certificate)

Forms and Endorsements applying to this Coverage Part and made part of this Certificate at time of issue:
APPLICABLE TO ALL COVERAGES:

SEE SCHEDULE OF FORMS AND ENDORSEMENTS

MINIMUM EARNED PREMIUM ENDORSEMENT

This Endorsement effective 12:01 A.M. 10/21/2023

forms a part of policy number CPC100515 issued to
GULF STREAM COTTAGES HOA INC.

by BURNS & WILCOX, LTD.

It is hereby understood and agreed that the minimum earned premium for this policy is 25.00 %, and that such minimum earned premium is not subject to short rate or pro rata adjustment in the event of cancellation of this policy by you.

It is further understood and agreed that cancellation for non-payment of premium shall be deemed a request by you for cancellation of this policy thereby activating the foregoing minimum earned premium provision.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

CLAIM REPORTING INFORMATION

Your insurance policy has been placed with Chubb European Group SE.

Our commitment to you is to provide fast, fair claim service. Promptly reporting an event that could lead to a claim, as required by your policy, helps us fulfill this commitment to you. Please refer to your policy for this and all other terms and conditions.

HOW TO REPORT A CLAIM

Email at minuteman@claimemail.com or fax at 248-932-9051.

In order to expedite this process, please be prepared to furnish as much of the following information as possible:

- Your policy number
- Date, time and location of the loss / accident
- Details of the loss / accident
- Name, address and phone number of any involved parties
- If applicable, name of law enforcement agency or fire department along with the incident number.

Please also refer to your policy for specific claim reporting requirements.

Thank you for your business and as always, we appreciate the opportunity to serve you.

DEDUCTIBLE

The Insurers obligations under this policy of which this is a part shall apply only to such amounts for which the insurer may be liable in excess of the deductible amount shown on the Declarations Page attached hereto. The deductible shall apply per occurrence and shall apply separately at each location, sub-location and building insured hereunder. Wind, Hail and Named Storm deductible as per the applicable form working will take precedence and supersede the foregoing.

FULLY EARNED PREMIUM

In the event of a total loss to any of the property covered by this policy, the premium charged for the policy shall be fully earned. Total loss is defined as the payment of the policy limits as listed or scheduled in the policy.

SCHEDULE OF FORMS AND ENDORSEMENTS

POLICY NUMBER: CPC100515	EFFECTIVE DATE: 10/21/2023	NAMED INSURED: GULF STREAM COTTAGES HOA INC.
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SOFAE 09-10
SC01-CHESTERFIELD

SCHEDULE OF FORMS

LLOYDS1A 09-98 LLOYDS1B 10-93 CHUBB BWSCSYND286 2022-2023 BW1PTYSC 08-18 BW26 04-07 BW001772 08-17 BW-DED BW-FEP BWFLNOT 05-07 BW-OCC IL0017 11-98 BWSCCOMP 09-20 CP0010 04-02 CP0090 07-88 CP0321 10-12 CP1030 04-02 CP1033 10-12 IL0249 09-08 IL0415 04-98 IL0935 07-02 ILP001 01-04 LMA3100 09-10 LMA5018 09-05 LMA5019 09-05 LMA5020 LORD 09-05 LMA5021 09-05 LMA5062 04-06 LMA5390 01-20 LMA5391 03-20 LMA5401 11-19 LMA9076A 01-18 LMA9167 09-19 NOTWHDSC 08-20 LSW1001 08-94 NMA464 01-38 NMA1191 07-59 NMA1331 04-61 NMA2340 11-88 NMA2802 12-97 NMA2920 10-01 NMA2962 02-03	CERTIFICATE OF INSURANCE COMMERCIAL POLICY COVERAGE PART EUROPEAN GROUP SE PRIVACY NOTICE CHUBB SECURITY LIST COMM PROP COV PART MIN EARNED PREM ENDT CLAIM REPORTING FORM DEDUCTIBLE FULLY EARNED PREMIUM FLOOD & EARTH MOVEMENT INS NOTICE OCCURENCE DEFINITION COMMON POLICY CONDITIONS COMPLAINTS PROCEDURE BUILDING AND PERSONAL PROPERTY COMM PROP CONDITIONS % WIND DED CAUSES OF LOSS - SPECIAL FORM THEFT EXCL SC-CHANGES - CANCELLATION/NONRENEWAL PROTECTIVE SAFEGUARDS EXCL-COMPUTER-RELATED LOSSES OFAC NOTICE SANCTION LIMITATION AND EXCLUSION CLAUSE MICROORGANISM EXCL ABS ASBESTOS ENDORSEMENT SERVICE OF SUIT CLAUSE (USA) APPLICABLE LAW (USA) FRADULENT CLAIM CLAUSE TRIA ENDT - NOT PURCHASED CORONAVIRUS EXCL PROPERTY CYBER & DATA EXCL SC SURPLUS LINES NOTICE SC NOTICE OF INSURERS RIGHT TO CANCEL SC NOTICE NAMED STORM DED SEVERAL LIABILITY NOTICE WAR & CIVIL WAR EXCL CLAUSE RADIOACTIVE CONTAMINATION EXCL CANCELLATION CLAUSE EXCLUSIONS ELECTRONIC DATE RECOGNITION TERRORISM EXCLUSION ENDORSEMENT BIOLOGICAL OR CHEMICAL MATERIALS
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ADDITIONAL FORMS

NPP1568346G

Renewal of Number

United States Liability Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

A Member Company of United States Liability Insurance Group

POLICY DECLARATIONS

No. NPP1568346H

NAMED INSURED AND ADDRESS:

GULF STREAM COTTAGES HOMEOWNERS

ASSOCIATION INC.

1756 US HWY 501

MYRTLE BEACH, SC 29577

POLICY PERIOD: (MO. DAY YR.) From: 11/04/2023 To: 11/04/2024

12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

FORM OF BUSINESS: Non-Profit Corporation

BUSINESS DESCRIPTION: Community Association

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

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.
THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
Commercial Liability Coverage Part	\$1,359.00
Directors And Officers Liability Coverage Part	\$1,040.00
TOTAL:	\$2,399.00

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue

See Endorsement EOD (1/95)

Agent: **JOHNSON & JOHNSON, INC. (1309)**
PO Box 899
Charleston, SC 29402

Issued: 10/19/2023 1:55 PM

Broker:

By: 
Authorized Representative

UPD (08-07)

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

EXTENSION OF DECLARATIONS

Policy No. NPP1568346H

Effective Date: 11/04/2023

12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS

FORMS AND ENDORSEMENTS

The following forms apply to multiple coverage parts

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CG2173	01/15	Exclusion Of Certified Acts Of Terrorism
IL0017	11/98	Common Policy Conditions
IL0021	09/08	Nuclear Energy Liability Exclusion Endorsement
Jacket	07/19	Policy Jacket
L-610	11/04	Expanded Definition Of Bodily Injury
LLQ100	07/06	Amendatory Endorsement
LLQ368	08/10	Separation Of Insureds Clarification Endorsement
TRIADN	12/20	Disclosure Notice of Terrorism Insurance Coverage

The following forms apply to the Commercial Liability coverage part

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CG0001	12/07	Commercial General Liability Coverage Form
CG0068	05/09	Recording And Distribution Of Material Or Information In Violation Of Law Exclusion
CG2017	10/93	Additional Insured - Townhouse Associations
CG2107	05/14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included
CG2147	12/07	Employment-Related Practices Exclusion
IL0249	12/21	South Carolina Changes - Cancellation and Nonrenewal
L-488	02/11	Non-Owned And/Or Hired Auto Liability
L-532	08/03	Exclusion - Construction Operations
L-549	12/07	Absolute Professional Liability Exclusion
L-599	10/12	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
L-600	08/05	Pre-Existing Or Progressive Damage Or Defect Exclusion
L-783NPP	07/18	Amendment of Liquor Liability Exclusion
L-787	05/13	Infringement Of Copyright, Patent, Trademark Or Trade Secret Endorsement

The following forms apply to the Directors And Officers Liability coverage part

<i>Endt#</i>	<i>Revised</i>	<i>Description of Endorsements</i>
CAP	08/15	Community Association Directors & Officers Liability Coverage Form
CAP SC	12/21	South Carolina State Amendatory Endorsement
CAP-235	08/15	Data Breach & Identity Theft Endorsement
CAP-238	08/17	Amend Definition of Organization

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Policy No. NPP1568346H

Effective Date: 11/04/2023
12:01 STANDARD TIME

LIMITS OF INSURANCE

Each Occurrence Limit	\$1,000,000
Personal & Advertising Injury Limit (Any One Person/Organization)	\$1,000,000
Medical Expense (Any One Person)	\$5,000
Damages To Premises Rented To You (Any One Premises)	\$100,000
Products/Completed Operations Aggregate Limit	Included
General Aggregate Limit	\$2,000,000
Hired and Non-owned Auto Each Occurrence	Included
Hired and Non-owned Auto Aggregate	Included

LIABILITY DEDUCTIBLE

\$0

LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

<i>Location</i>	<i>Address</i>	<i>Territory</i>
1	1900 Cassandra Lane, Myrtle Beach, SC 29577	001

PREMIUM COMPUTATION

<i>Loc</i>	<i>Classification</i>	<i>Code No.</i>	<i>Premium Basis</i>	<i>Rate</i>		<i>Advance Premium</i>	
				<i>Pr/Co</i>	<i>All Other</i>	<i>Pr/Co</i>	<i>All Other</i>
1	Non-Owned & Hired Automobile Liability	90099	Flat	Included	150.000	Included	\$150
1	Community Associations - Not-for-Profit only	68500	51 Per Unit	Included	9.000	Included	\$459
1	Swimming Pool or Jacuzzi - association risk only	48927	1 Per Pool	Included	750.000	Included	\$750
1	Additional Insured - Townhouse Association	49950	1 Flat	Included	0.000	Included	Included

MINIMUM PREMIUM FOR GENERAL LIABILITY COVERAGE PART: \$500

TOTAL PREMIUM FOR GENERAL LIABILITY COVERAGE PART: \$1,359

(This Premium may be subject to adjustment.) MP - minimum premium

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

See Form EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

DIRECTORS & OFFICERS LIABILITY COVERAGE PART DECLARATIONS

PLEASE READ YOUR POLICY CAREFULLY.

THIS IS A CLAIMS MADE POLICY COVERAGE FORM AND UNLESS OTHERWISE PROVIDED HEREIN, THE COVERAGE OF THIS FORM IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE DURING THE POLICY PERIOD, OR THE EXTENSION PERIOD, IF APPLICABLE. DEFENSE COSTS SHALL BE APPLIED AGAINST THE RETENTION.

No. NPP1568346H

Effective Date: **11/04/2023**

12:01 AM STANDARD TIME

ITEM I. PARENT ORGANIZATION AND PRINCIPAL ADDRESS

**GULF STREAM COTTAGES HOMEOWNERS ASSOCIATION INC.
1756 US HWY 501
MYRTLE BEACH, SC 29577**

ITEM II. POLICY PERIOD: (MM/DD/YYYY) From: 11/04/2023 To: 11/04/2024

Community Association Directors & Officers Liability - D&O/EPL

ITEM III. LIMITS OF LIABILITY	\$1,000,000	EACH CLAIM
	\$1,000,000	IN THE AGGREGATE
ITEM IV. RETENTION:	\$1,000	EACH CLAIM
ITEM V. PREMIUM:	\$1,040	

ITEM VI. Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:
See Endorsement EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.