

Po Box 2915
Bloomington IL 61702-2915

Named Insured

M-27-1BF8-FAF4 F V

DISHARON RIDGE UNIT OWNERS
ASSOCIATION INC
10896 BIG CANOE
BIG CANOE GA 30143-5138

Policy Number	91-25-4243-1	
Policy Period	Effective Date	Expiration Date
12 Months	OCT 10 2023	OCT 10 2024
The policy period begins and ends at 12:01 am standard time at the premises location.		

Agent and Mailing Address
PARISH LOWRIE CPCU
360 W CHURCH ST
JASPER GA 30143-1400

PHONE : (706) 692-6920
(706) 692-2886

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's term is terminated, we will give you and the Mortgagee/Lender written notice in compliance with the policy provisions or as required by law.

Entity Corporation

Reason for Declarations Your policy is amended MAR 25 2024
PREMIUM ADJUSTMENT

Endorsement Premium None

Discounts Applied:
Renewal Year
Multiple Unit
Claim Record

Prepared
JUL 11 2024
CMP-4000

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FOR REPORT OR OTHER INFORMATION

DECLARATIONS (CONTINUED)

Residentia Community Association Policy for D:SHAROON RIDGE UNIT OWNERS
 Policy Number 91-25-4243-1

SECTION I - PROPERTY BLANKET

Coverage A = Buildings
 Coverage B = Business Personal Property

Limit of Insurance
 \$ 10,267,900
 No Coverage

Location Number	Location of Described Premises
001	86 SCONTI RIDGE DR BIG CANOE GA 30143
002	116 SCONTI RIDGE DR BIG CANOE GA 30143
003	140 SCONTI RIDGE DR BIG CANOE GA 30143
004	146 SCONTI RIDGE DR BIG CANOE GA 30143
005	170 SCONTI RIDGE DR BIG CANOE GA 30143
006	178 SCONTI RIDGE DR BIG CANOE GA 30143
007	182 SCONTI RIDGE DR BIG CANOE GA 30143

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

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DECLARATIONS (CONTINUED)

Residentia Community Association Policy for D'SHAROON RIDGE UNIT OWNERS
 Policy Number 91-25-4243-1

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 221.8

SECTION II - DEDUCTIBLES

Basic Deductible \$5,000

Special Deductibles

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

Other deductibles may apply - refer to policy.

SECTION III - 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

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DECLARATIONS (CONTINUED)

Resident Community Association Policy for D'SHAROON RIDGE UNIT OWNERS
Policy Number 91-25-4243-1

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

SECTION II - 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

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DECLARATIONS (CONTINUED)

Residentia Community Association Policy for D'SHAROON RIDGE UNIT OWNERS
Policy Number 91-25-4243-1

Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500	
Sigms	\$2,500	
Valuable Papers And Records		-
On Premises	\$10,000	-
Off Premises	\$5,000	

SECTION II - 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	\$50,000
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months

SECTION III - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$1,050,000
Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$300,000
Directors And Officers Liability	\$3,000,000

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DECLARATIONS (CONTINUED)

Residential Community Association Policy for D'SHAROON RIDGE UNIT OWNERS
Policy Number 91-25-4243-1

AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$2,100,000
General Aggregate	\$2,100,000
Directors and Officers Aggregate	\$3,000,000

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

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

FORMS AND ENDORSEMENTS

CMP-4100	Businessowners Coverage Form
CMP-4211.3	Amendatory Endorsement
CMP-4814	Directors & Officers Liability
FE-6999.3	Terrorism Insurance Cov Notice
CMP-4556	Residential Community Assn
CMP-4746.1	Hired Auto Liability
CMP-4710	Employee Dishonesty
CMP-4508	Money and Securities
CMP-4705.2	Loss of Income & Extra Expense
CMP-4561.4	Policy Endorsement
FE-3650	Actual Cash Value Endorsement
FD-6007	Land and Marine Attach Dec

NAMED INSURED'S FULL NAME

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DECLARATIONS (CONTINUED)

Resident Community Association Policy for D:SHAROON RIDGE UNIT OWNERS
Policy Number 91-25-4243-1

NATIONSBANK OF GEORGIA NA ITS SUCCESSORS AND/OR ASSIGNS PO BOX 740031
ATLANTA GA 30374-0031

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

Participating Policy

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

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

Lynne M. Youell
Secretary

Michael F. Lipson
President

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BIG CANOE GA 30143-5138

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12 Months	OCT 10 2023	OCT 10 2024
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 Mortgage/Lenderholder written notice in compliance with the policy provisions or as required by law.

Annual Policy Premium included

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

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

Forms, Options, and Endorsements

- FE-8739 Inland Marine Conditions
- FE-6870 Amend of Inland Marine Condtns
- FE-6871.1 Inland Marine Computer Prop

See Reverse for Schedule Page with Limits

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FORM NO 60 06 0001 (01/2018)

ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

ENDORSEMENT NUMBER	COVERAGE	LIMIT OF INSURANCE	DEDUCTIBLE AMOUNT	ANNUAL PREMIUM
FE-6871.1	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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FORM NO. 66 (01/01) (REVISED)