



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)
05/28/2021

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS MARSH USA, INC. TWO ALLIANCE CENTER 3560 LENOX ROAD, SUITE 2400 ATLANTA, GA 30326 Attn: Atlanta.certrequest@marsh.com Fax: 212-948-4321 102860439-Prop-PROP-21-22		PHONE (A/C, No, Ext):	COMPANY NAME AND ADDRESS See Attached For Carrier Listings	NAIC NO:
FAX (A/C, No):	E-MAIL ADDRESS:	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH		
CODE:	SUB CODE:	POLICY TYPE		
AGENCY CUSTOMER ID #:		LOAN NUMBER	POLICY NUMBER See Attached	
NAMED INSURED AND ADDRESS On Top of the World (Central) Owners Association, Inc. 8445 SW 80th Street Ocala, FL 34481		EFFECTIVE DATE 05/30/2021	EXPIRATION DATE 05/30/2022	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION		PERILS INSURED	BASIC	BROAD	<input checked="" type="checkbox"/>	SPECIAL	1
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 10,000,000		DED: 10,000					
		YES	NO	N/A			
<input checked="" type="checkbox"/> BUSINESS INCOME	<input checked="" type="checkbox"/> RENTAL VALUE	X			If YES, LIMIT: INCLUDED	<input checked="" type="checkbox"/>	Actual Loss Sustained; # of months: 12
BLANKET COVERAGE		X			If YES, indicate value(s) reported on property identified above: \$ 10,000,000		
TERRORISM COVERAGE			X		Attach Disclosure Notice / DEC		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		X					
IS DOMESTIC TERRORISM EXCLUDED?		X					
LIMITED FUNGUS COVERAGE			X		If YES, LIMIT:	DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)		X					
REPLACEMENT COST		X					
AGREED VALUE			X				
COINSURANCE			X		If YES, %		
EQUIPMENT BREAKDOWN (If Applicable)		X			If YES, LIMIT: 100,000,000	DED: 10,000	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		X			If YES, LIMIT: Included	DED: 10,000	
- Demolition Costs		X			If YES, LIMIT: Included	DED: 10,000	
- Incr. Cost of Construction		X			If YES, LIMIT: Included	DED: 10,000	
EARTH MOVEMENT (If Applicable)		X			If YES, LIMIT: 50,000,000	DED: 100,000	
FLOOD (If Applicable)		X			If YES, LIMIT: SEE ATTACHED	DED: SEE ATTACHED	
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:				X	If YES, LIMIT:	DED:	
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		X			If YES, LIMIT:	DED: SEE ATTACHED	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		X					

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST ATL-005255596-01		<input type="checkbox"/> CONTRACT OF SALE <input type="checkbox"/> MORTGAGEE		<input type="checkbox"/> LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS On Top of the World (Central) Owners Association, Inc. 8445 SW 80th Street Ocala, FL 33763		AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Manashi Mukherjee			

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ADDITIONAL REMARKS SCHEDULE

AGENCY MARSH USA, INC.		NAMED INSURED On Top of the World (Central) Owners Association, Inc. 8445 SW 80th Street Ocala, FL 34481	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 28 **FORM TITLE:** Evidence of Commercial Property Insurance

Carrier Participation:

Westchester Surplus Lines Insurance Company - D37420608 008 - 95%
 Effective Date: 5/30/2021
 Expiration Date: 5/30/2022

Interstate Fire and Casualty Company - RTX20053821 - 5%
 Effective Date: 5/30/2021
 Expiration Date: 5/30/2022

Terrorism Primary \$100M:
 Carrier: Liberty Surplus Insurance Corporation - 5N119515002 - 100%
 Effective Date: 5/30/2021
 Expiration Date: 5/30/2022

All Risk of direct physical loss or damage to real and personal property on a replacement cost basis, subject to policy terms, conditions and exclusions. Coverage Includes, but is not limited to fire, extended perils such as vandalism, malicious mischief, flood, earthquake and boiler & machinery.

Flood:
 All Other Flood annual aggregate limit: \$50,000,000 except,
 Special Flood Hazard Area annual aggregate limit: \$15,000,000
 Flood Deductibles:
 \$100,000; except \$500,000 for Special Flood Hazard Area

Named Storm Deductibles:
 Clearwater - 5% per Unit of Insurance, Minimum of \$250,000, Maximum of \$10M
 Ocala - 3% per Unit of Insurance, Minimum of \$250,000, Maximum of \$10M

Other sublimits & deductibles may apply per policy terms and conditions.