



Policy Number WA0008925334-03

HOLYOKE OF SALEM INS AGCY INC
213 CT ST
MIDDLETOWN, CT 06457-3346

IMPORTANT: POLICY DOCUMENT(S) ATTACHED, FOR:

Hickory Bay Towers HOA, Inc.
PO Box 218831
Nashville, TN 37221-8831

Thank you for allowing us to serve your insurance needs.



Policy Number: WA0008925334-03
Prior Pol No: WA0008925334-02
Billing Number: 410053162

COUNTRY Mutual Insurance Company

Businessowners Policy Declarations

Named Insured: Hickory Bay Towers HOA, Inc.

Agency Name: HOLYOKE OF SALEM INS AGCY INC

Agency Code: 02019

Policy Period From: 07/01/2017 To: 07/01/2018 12:01 A.M., Standard Time

Optional Coverages	Limits of Insurance
WORLDS APART Advantage Endorsement	
Equipment Breakdown	
Building Limit – Automatic Increase 3%	
CAPsure Community Association Coverage (All In)	
Employee Dishonesty	\$25,000
Property Management Agent As An Employee Covered For "Employee Dishonesty" Only	
Employee Dishonesty for Designated Community Association Officers And Directors	
Forgery and Alteration	\$25,000
Extended Business Income	90 Days
Hired Non-Owned Auto Liability	\$1,000,000
Aggregate Limits of Insurance Per Location	

Policy Forms and Endorsements attached at issuance:

See Schedule of Forms and Endorsements

If you wish to request a copy of your policy, contact your agent or call our Customer Service Center at 1-800-662-6243.

THIS POLICY DECLARATION TOGETHER WITH THE COVERAGE FORM(S), FORMS AND ENDORSEMENTS, IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.

To report a claim after hours, call 1-800-225-2533



Policy Number: WA0008925334-03
Policy Period: From: 07/01/2017 To: 07/01/2018

COUNTRY Mutual Insurance Company

Named Insured: Hickory Bay Towers HOA, Inc.

Agency Name: HOLYOKE OF SALEM INS AGCY INC

Agency Code: 02019

Schedule of Named Insured(s)

Named Insured	Applicable Locations
HICKORY BAY TOWERS	1



Policy Number: WA0008925334-03
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COUNTRY Mutual Insurance Company

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Agency Name: HOLYOKE OF SALEM INS AGCY INC

Agency Code: 02019

Location Summary

Loc #	Complex Name	Street Address	City	State	Zip Code
1		200 Sanders Ferry Rd	Hendersonville	TN	37075



COUNTRY Mutual Insurance Company

Named Insured: Hickory Bay Towers HOA, Inc.

Agency Name: HOLYOKE OF SALEM INS AGCY INC

Agency Code: 02019

Location and Building Schedule

Loc #1 Hendersonville, TN 37075

Bldg #1	200 Sanders Ferry Rd	Primary Residential Association	Fire resistive	60 Units
				Limit
Building Coverage				\$11,695,629
Extended Replacement Cost +25%				
Ordinance or Law Coverage 1				
Ordinance or Law Coverage 2/3				10%
Protective Safeguards Symbol P-1				

Bldg #2	200 Sanders Ferry Rd	Primary Residential Association	Fire resistive	61 Units
				Limit
Building Coverage				\$11,695,629
Extended Replacement Cost +25%				
Ordinance or Law Coverage 1				
Ordinance or Law Coverage 2/3				10%
Protective Safeguards Symbol P-1				

Bldg #3	200 Sanders Ferry Rd	Outbuilding / Pool / Misc. Structure	Non-combustible	0 Units
				Limit
Building Coverage				\$116,659
Extended Replacement Cost +25%				

Bldg #4	200 Sanders Ferry Rd	Outbuilding / Pool / Misc. Structure	Non-combustible	0 Units
				Limit
Building Coverage				\$57,496
Extended Replacement Cost +25%				

Bldg #5	200 Sanders Ferry Rd	Outbuilding / Pool / Misc. Structure	Non-combustible	0 Units
				Limit
Building Coverage				\$149,990



COUNTRY Mutual Insurance Company

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Agency Code: 02019

Location and Building Schedule

Extended Replacement Cost +25%

Bldg #6	200 Sanders Ferry Rd	Outbuilding / Pool / Misc. Structure	Non-combustible	0 Units
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Building Coverage Limit
 Extended Replacement Cost +25% \$116,659

Bldg #7	200 Sanders Ferry Rd	Outbuilding / Pool / Misc. Structure	Masonry Veneer	0 Units
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Building Coverage Limit
 Replacement Cost \$21,425

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WORLDS APART[®] ADVANTAGE ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

The following is a summary of increased limits of insurance and additional coverage provided by this endorsement. This endorsement is subject to the provisions of your policy, which means that it is subject to all terms, limitations and conditions applicable to the Businessowners Coverage Form unless specifically deleted, replaced or modified herein. This endorsement is applicable only to those premises described in the Declarations. Coverage for loss of Business Income or Extra Expense does not apply if a loss is covered only as a result of this endorsement.

No deductible applies to these coverages unless specifically stated in the coverage description.

Endorsement Schedule	
Coverage Description	Limit of Insurance
SECTION I - PROPERTY	
COVERED PROPERTY	
Expanded Described Premises	1,000 Feet
ADDITIONAL COVERAGES	
Business Income	
Actual Loss Sustained	18-Months
Extended Business Income	90 Days
Dependent Properties	\$25,000
Claims Expense	\$5,000
Computer Fraud	\$5,000
Debris Removal	35%/\$25,000
Fine Arts	\$25,000
Fire Department Service Charge	\$25,000
Fire Extinguisher Systems Recharge Expense	\$10,000
Lessor's Leasehold Interest for Mercantile or Office Occupancy Tenants	\$10,000
Lock and Key Coverage	
Lost Key Coverage	\$10,000
Electronic Key Systems	\$25,000
Money Orders And Counterfeit Money	\$25,000
Pollutant Clean Up and Removal	\$25,000
Reward	\$15,000
Tenant Move Back Expenses	\$10,000
COVERAGE EXTENSIONS	
Accounts Receivable	
At the Described Premises	\$50,000
Not At the Described Premises	\$15,000
Automated External Defibrillators	\$5,000
Computer Equipment	\$10,000

Appurtenant Structures	
Business Personal Property	\$5,000
Newly Acquired or Constructed	
Building	\$500,000
Business Income and Extra Expense	\$250,000
Period of Coverage	60 Days
Off-Premises Utility Service Failure	
Direct Damage	\$25,000
Time Element	\$25,000
Outdoor Property	\$10,000
Personal Effects	\$5,000
Valuable Papers and Records	
At the Described Premises	\$50,000
Not At the Described Premises	\$15,000
OPTIONAL COVERAGES	
Employee Dishonesty, Forgery and Alteration, Designated Property Management Agent	Shown on the Policy Declarations
Money and Securities	
Inside the Premises	\$25,000
Outside the Premises	\$25,000
Outdoor Signs	\$25,000
SECTION II - LIABILITY	
Broadened Coverage For Damage To Premises Rented To You	\$300,000
Heating Or Air Conditioning Loss Reimbursement	\$5,000 per Occurrence \$10,000 Annual
Lock-Out Or Sale, Removal And Disposal Liability	\$5,000
Per Location Aggregate Limit of Insurance	Business Liability Limits of Insurance Per Location
Tenants' Property Legal Liability	\$10,000

Except as otherwise stated in this endorsement, the terms and conditions of the policy apply to the insurance stated below:

- I. The following changes apply to **SECTION I - PROPERTY**, Paragraph **A.1.**, **Covered Property**:
 - A. Expanded Described Premises
In paragraphs A.1.a.(6) and A.1.b. 100 feet is revised to 1,000 feet.
- II. The following changes apply to **SECTION I - PROPERTY**, Paragraph **A.5.**, **Additional Coverages**:
 - A. The following changes apply only if Business Income and Extra Expense are covered under this policy:
 1. **Business Income**
Paragraph **A.5.f.(1)(b)** is replaced by the following:
(b) We will only pay for loss of Business Income that you sustain during the "period of restoration" and that occurs within 18 consecutive months after the date of direct physical loss or damage. We will only pay for ordinary payroll expenses for 60 days following the date of direct physical loss or damage, unless a greater number of days is shown in the Declarations.
 2. **Extended Business Income**