



8000 00000 BBOP COND NEW BUSINESS

**BUSINESSOWNERS POLICY  
 COMMON POLICY DECLARATIONS**

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 Date of Issue  
 5/24/18

<b>Policy Number</b>
09 0021004497 3 00

Policy Period	Term	Inception Date	Agent	Agent's Phone
From: 5/01/18 To: 5/01/19 12:01 Standard Time	12 mos	5/01/18 12:01 AM	00-0086184	(941) 722-3238

Agent (941) 722-3238  
 MOORE & MOORE INSURANCE AGENCY  
 601 8TH AVE W  
 PALMETTO FL 34221

BRIDGEWATER TOWNHOMES HOA OF MANAT  
 2425 MANATEE AVE W  
 BRADENTON FL 34205-4933

FORM OF BUSINESS: Corporation

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.

**Policy Limits (Coverage provided only where limits are indicated)**

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

**COVERAGE SECTIONS**

BUSINESSOWNERS PROPERTY COVERAGES		\$7,698.00
BUSINESSOWNERS LIABILITY COVERAGES		\$4,966.00
TERRORISM PREMIUM		\$126.00
	ANNUAL PREMIUM SUBTOTAL	\$12,790.00
EMPATF		\$4.00
FL SURPLUS LINES PREMIUM TAX		\$640.00
FSLSO FEE		\$13.00
MANAGING GENERAL AGENT		\$35.00
	TOTAL FEES	\$692.00
	TOTAL ANNUAL PREMIUM	\$13,482.00

SURPLUS LINES BROKER: KATHERINE.HOWINGTON - W110774  
 11101 ROOSEVELT BLVD. N  
 ST. PETERSBURG, FL 33716

PRODUCING AGENT:

JAMES MOORE JR  
 601 8TH AVE W,  
 PALMETTO, FL, 34221 5115

This document forms a part of, completes, and executes the referenced policy. The declarations or information pages, together with the common policy conditions, coverage parts, forms and endorsements, if any, issued to form a part thereof, completes the policy. In witness thereof, the Company attests these documents as the entire contract of insurance; and executes same on behalf of the company.

This policy shall not be valid unless also countersigned by the duly authorized Agent of this company at the agency hereinbefore mentioned, if required by state law.

Katherine Howington

5/24/18

Countersigned by Authorized Representative

Date



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BANKERS SPECIALTY INSURANCE COMPANY  
 PO BOX 33060  
 ST. PETERSBURG, FL 33733-8060  
 800-627-0000

BBOP99.001 0109 0316  
 6131362  
 5/24/18

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**BUSINESSOWNERS POLICY  
 PROPERTY DECLARATIONS**

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**SECTION I - PROPERTY**

Coverage Provided - Insurance at the described premises applies only for coverage for which a limit of insurance and/or premium is shown.

**DESCRIPTION OF BUSINESS**

PREM. NO.	BLDG. NO.	CLASS CODE	CLASS DESCRIPTION	DESCRIPTION OF BUSINESS
1	1	69145	Condominium Residential - No Mercantile	CONDO ASSOCIATION

**DESCRIPTION OF LOCATION**

PREM. NO.	BLDG. NO.	ADDRESS	OCCUPANCY	VALUATION	AUTOMATIC INCREASE
1		1602 POINT PLEASANT AVE W BRADENTON, FL 34205-6810			
1	1	1602 POINT PLEASANT AVE W BRADENTON, FL 34205-6810	Lessor	RC	8%

**DEDUCTIBLES (APPLY PER LOCATION, PER OCCURRENCE)**

PREM. NO.	ALL OTHER PERILS DEDUCTIBLE	HURRICANE DEDUCTIBLE
1	\$5,000	2%

**PROPERTY COVERAGE-LIMITS OF INSURANCE**

PREM. NO.	BLDG. NO.	COVERAGE	LIMIT OF INSURANCE
1	1	Business Income and Extra Expense	Actual Loss Sustained 12 Month
1	1	Building	\$4,403,991





BANKERS SPECIALTY INSURANCE COMPANY

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ADDITIONAL COVERAGE/COVERAGE EXTENSIONS/OPTIONAL COVERAGES

POLICY LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS  
 COVERAGE LIMIT OF INSURANCE

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Equipment Breakdown Covered

LOCATION LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS  
 PREM. LIMIT OF INSURANCE

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NO.	COVERAGE	LIMIT OF INSURANCE
1	Sinkhole	INCLUDED

BUILDING LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS  
 PREM. BLDG. LIMIT OF INSURANCE

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NO.	NO.	COVERAGE	DESCRIPTION	LIMIT OF INSURANCE
***	NONE	***		





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**SECTION II - LIABILITY AND MEDICAL EXPENSES**

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

COVERAGE	LIMIT OF INSURANCE
General Liability	
General Aggregate Limit (Other Than Products-Completed Oper	\$4,000,000
Products-Completed Operations Aggregate Limit	\$4,000,000
Personal And Advertising Injury Limit	INCLUDED
Each Occurrence Limit	\$2,000,000
Medical Expenses Limit	\$10,000 (Per Person)

**LOCATION LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS  
 PREM.**

NO.	COVERAGE	LIMIT OF INSURANCE
1	Docks - Liability	INCLUDED
1	Swimming Pool - Liability	INCLUDED

