

NEW BUSINESS

DEC 15 2008



EFFECTIVE DATE: 12/07/2008

| | | | |
|---|--|---|--|
| Policy Number: BOP8551699 | | Prior Policy: | |
| Billing Type: DIRECT BILL | | | |
| Coverage Is Provided In PEERLESS INDEMNITY INSURANCE COMPANY | | | |
| Named Insured and Mailing Address: PENACOOK LANDING ON THE SOUHEGAN CONDOMINIUMS 5 MEDALLION CTR C/O CITYSIDE MANAGEMENT MERRIMACK NH 03054 | | Agent: BROWN & BROWN OF NH INC 309 DWH PO BOX 1510 MERRIMACK NH 03054 | |
| | | Agent Code: 8110668 Agent Phone: (603)-424-9901 | |

**COMMERCIAL PROTECTOR COVERAGE FORM DECLARATIONS
BUSINESSOWNERS COVERAGE FORM DECLARATIONS**

In return for the payment of premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

POLICY PERIOD: From: 12/07/2008 To: 12/07/2009 at 12:01 AM Standard Time at your mailing address shown above.

FORM OF BUSINESS: CONDO ASSOCIATION

BUSINESS DESCRIPTION: CONDOS

DESCRIPTION OF PREMISES

| Prem. No. | Bldg. No. | Location Occupancy, Construction/Fire Protection |
|-----------|-----------|--|
| 001 | 001 | 1 PENACOOK TERRACE MERRIMACK NH 03054 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME, P-1 |
| 001 | 002 | 15 PENACOOK TERRACE MERRIMACK NH 03054 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME, P-1 |
| 001 | 003 | 19 PENACOOK TERRACE MERRIMACK NH 03054 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME, P-1 |

44-98 (06/04)

NEW BUSINESS

**COMMERCIAL PROTECTOR COVERAGE FORM DECLARATIONS (Continued)
 BUSINESSOWNERS COVERAGE FORM DECLARATIONS**

001 004 34 PENACOOK TERRACE
 MERRIMACK NH 03054
 CONDOMINIUM-ASSOCIATION-RESIDENTIAL
 FRAME, P-1

001 005 39 PENACOOK TERRACE
 MERRIMACK NH 03054
 CONDOMINIUM-ASSOCIATION-RESIDENTIAL
 FRAME, P-1

001 006 56 PENACOOK TERRACE
 MERRIMACK NH 03054
 CONDOMINIUM-ASSOCIATION-RESIDENTIAL
 FRAME, P-1

PROPERTY COVERAGE (Business Income is included as an Additional Coverage not subject to the limits below, please refer to your policy and endorsements for coverage details and limitations)

| Prem. No. | Bldg. No. | Coverage | Limits of Insurance |
|-----------|-----------|-----------------------------|---------------------|
| *** | *** | BUILDING (REPLACEMENT COST) | \$ 6,495,180 |

* The above Limit of Insurance for BUILDING is a Blanket Limit of Insurance applying to the following locations:

- 001 001
- 001 002
- 001 003
- 001 004
- 001 005
- 001 006

| | | | |
|-------------|----|-------|---|
| DEDUCTIBLE: | \$ | 1,000 | In Any One Occurrence |
| | \$ | 500 | Optional Coverage Deductible (Section I, D. Deductibles 2.) |

AUTOMATIC INCREASE: Building Coverage Shall Be Increased 4% Annually.
 Personal Property Coverage Shall Be Increased Annually.

MORTGAGE HOLDERS: NONE

PROPERTY OPTIONAL COVERAGES

| Coverage | Additional Limits of Insurance |
|--|--------------------------------|
| COMMERCIAL PROTECTOR COVERAGE EXTENSION PLUS | INCLUDED |

COMMERCIAL PROTECTOR COVERAGE FORM DECLARATIONS (Continued)
BUSINESSOWNERS COVERAGE FORM DECLARATIONS

PROPERTY OPTIONAL COVERAGES – Location Level – These Limits of Insurance apply in addition to those found in the COMMERCIAL PROTECTOR

| Prem. No. | Bldg. No. | Coverage | Additional Limits of Insurance |
|-----------|-----------|--------------------------------|--------------------------------|
| 001 | 001 | EMPLOYEE DISHONESTY | \$ 25,000 |
| 001 | 001 | OUTDOOR SIGNS | \$ 5,000 |
| 001 | 001 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |
| 001 | 002 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |
| 001 | 003 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |
| 001 | 004 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |
| 001 | 005 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |
| 001 | 006 | ORDINANCE OR LAW COVERAGE 1 | INCLUDED |
| | | COVERAGE 2 & 3 COMBINED | \$ 100,000 |

LIABILITY AND MEDICAL PAYMENTS COVERAGE

Except for Fire Legal Liability, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Paragraph D.4. of the Section II LIABILITY of the COMMERCIAL PROTECTOR COVERAGE FORM (BUSINESSOWNERS COVERAGE FORM).

| Coverage | Limits of Insurance |
|---|-------------------------------------|
| LIABILITY AND MEDICAL EXPENSES | \$ 1,000,000 Per Occurrence |
| MEDICAL EXPENSES | \$ 5,000 Per Person |
| DAMAGE TO PREMISES RENTED TO YOU | \$ 50,000 Any One Fire or Explosion |
| AGGREGATE LIMITS | |
| BODILY INJURY OR PROPERTY DAMAGE UNDER PRODUCTS/COMPLETED OPERATIONS HAZARD | \$ 2,000,000 |
| ALL OTHER INJURY OR DAMAGE (INCLUDING MEDICAL EXPENSES) | \$ 2,000,000 |

LIABILITY OPTIONAL COVERAGES

| Coverage | Limits of Insurance |
|--------------------------|---------------------|
| HIRED AUTO LIABILITY | INCLUDED |
| NON-OWNED AUTO LIABILITY | INCLUDED |

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY:

(Applicable Forms and Endorsements are omitted if shown in specific Coverage Part/Coverage Form Declarations)

| Form Number | Description |
|-------------|---|
| 17-357 | - 0108 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM |
| 17-366 | - 1202 WAR LIABILITY EXCLUSION |
| 17-98 | - 0604 EXCLUSION - ASBESTOS |

44-98 (06/04)

NEW BUSINESS

COMMERCIAL PROTECTOR COVERAGE FORM DECLARATIONS (Continued)
BUSINESSOWNERS COVERAGE FORM DECLARATIONS

| | | |
|--------|--------|--|
| 44-105 | - 0604 | QUICK REFERENCE - COMMERCIAL PROTECTOR COVERAGE FORM |
| 44-115 | - 0604 | COMMERCIAL PROTECTOR COVERAGE FORM |
| 44-146 | - 0604 | COMMERCIAL PROTECTOR EXTENSION PLUS ENDORSEMENT |
| 44-148 | - 0604 | COMMERCIAL PROTECTOR LIABILITY EXTENSION ENDORSEMENT |
| 44-175 | - 0108 | CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM |
| 44-190 | - 0108 | EXCLUSION OF PUNITIVE DAMAGES OF CERT ACTS OF TERROR |
| 44-192 | - 0604 | WAR LIABILITY EXCLUSION |
| 44-200 | - 0204 | EXCLUSION - SILICA |
| 44-207 | - 0305 | EXCLUSION-VIOLATION OF STATUTES |
| 44-50 | - 0604 | HIRED AUTO AND NON-OWNED AUTO LIABILITY |
| BP0113 | - 0108 | NEW HAMPSHIRE CHANGES |
| BP0122 | - 0702 | NH BUSINESSOWNERS STANDARD FIRE POLICY PROVISION |
| BP0417 | - 0702 | EMPLOYMENT-RELATED PRACTICES EXCLUSION |
| BP0430 | - 0702 | PROTECTIVE SAFEGUARDS |
| BP0446 | - 1102 | ORDINANCE OR LAW COVERAGE |
| BP0501 | - 0702 | CALCULATION OF PREMIUM |
| BP0576 | - 1102 | LIMITED FUNGI OR BACTERIA COVERAGE |
| BP0577 | - 1102 | FUNGI OR BACTERIA EXCLUSION |
| BP0601 | - 0107 | EXCLUSION OF LOSS DUE TO BACTERIA |
| BP1701 | - 0702 | CONDOMINIUM ASSOCIATION COVERAGE |

PREMIUM

| | | |
|--|----|----------|
| Terrorism Risk Insurance Act of 2002 and 2005 Coverage | \$ | 0.00 |
| Total Policy Premium | \$ | 7,839.00 |

Countersigned: By _____
Authorized Representative Date

Includes copyrighted material of Insurance Services Office, Inc. with its permission. Copyright, Insurance Services Office, Inc. 1982,1983, 1984, 1985.

Date Issued: 12/08/2008

Forming a part of

| | |
|---|---|
| Policy Number: BOP 8551699 | |
| Coverage Is Provided In PEERLESS INDEMNITY INSURANCE COMPANY | |
| Named Insured: PENACOOK LANDING ON THE SOUHEGAN CONDOMINIUMS | Agent: BROWN & BROWN OF NH INC Agent Code: 8110668 Agent Phone: (603)-424-9901 |

**COMMERCIAL PROTECTOR SUPPLEMENTAL DECLARATIONS
DIRECTORS AND OFFICERS LIABILITY
(CONDOMINIUM ASSOCIATIONS AND HOMEOWNERS ASSOCIATIONS)**

THIS IS A CLAIMS MADE COVERAGE. READ YOUR COVERAGE FORM CAREFULLY.

LIMIT OF INSURANCE

Aggregate Limit \$ 1,000,000

RETROACTIVE DATE

This insurance does not apply to "loss" arising from "wrongful acts" that occur before the Retroactive Date, if any, shown here:
12/07/2008
(Enter Date or "None" if no Retroactive Date applies)

FORMS AND ENDORSEMENTS

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

| Form Number | Description |
|-------------|--|
| 17-29 | - 1093 DIRECTORS AND OFFICERS LIABILITY COVERAGE FORM |
| 17-31 | - 1093 LIMITED PRIOR ACTS ENDORSEMENT |
| 17-357 | - 0108 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM |
| 17-363 | - 0108 EXCLUSION OF PUNITIVE DAMAGES OF CERT. ACTS OF TERROR |
| 17-366 | - 1202 WAR LIABILITY EXCLUSION |

Date Issued: 12/08/2008

