

SINCE 1825



# Commercial Umbrella Policy

**U1209167A**

**GALLANT INSURANCE AGENCY, INC.**

- With -

**Norfolk & Dedham Mutual  
Fire Insurance Company**

## Insurance Policy For:

**THE DAVIS PLACE CONDOMINIUM  
ASSOCIATION, INC. C/O LEVINE  
159 PROSPECT STREET #1  
ACTON MA 01720**

*Locally Grown Insurance®*

**NDGroup.com**

**1-800-688-1825**

**Mutual Company  
Nonassessable Policy**

**NORFOLK & DEDHAM MUTUAL FIRE INSURANCE COMPANY  
COMMERCIAL UMBRELLA LIABILITY POLICY  
RENEWAL DECLARATIONS**

Date of Issue 06/26/2023

Direct Bill

Agency Bill

<b>COMMON POLICY DECLARATION</b>	<b>POLICY NUMBER</b> U1209167A	<b>RENEWAL</b>
Named Insured :	THE DAVIS PLACE CONDOMINIUM ASSOCIATION, INC. C/O LEVINE	
P.O., Address :	159 PROSPECT STREET #1	
City, State, Zip :	ACTON MA 01720	

POLICY PERIOD: From **07/30/23** To **07/30/24** 12:01 A.M. Standard Time at your Mailing Address above

<b>REPRESENTATIVE:</b>	Agent or Broker : <b>GALLANT INSURANCE AGENCY, INC.</b>	Agent's Code Number
	Office Address : <b>PO BOX 975</b>	<b>20075</b>
	Town and State : <b>ACTON, MA 01720</b>	

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

FORM OF BUSINESS:  Corporation  Partnership  Joint Venture  Individual  Other

LIMITS OF INSURANCE	
EACH OCCURRENCE LIMIT	\$ 2,000,000
PERSONAL and ADVERTISING INJURY LIMIT	\$ 2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 2,000,000
GENERAL AGGREGATE LIMIT	\$ 2,000,000
RETAINED LIMIT: \$10,000	

**SCHEDULE OF UNDERLYING INSURANCE**

Insurer	Policy Number	Policy Period	COVERAGES	LIMITS OF INSURANCE	
Norfolk and Dedham Mutual Fire Ins Co	R0630962A	07/30/23 - 07/30/24	AUTOMOBILE LIABILITY	EACH PERSON	EACH ACCIDENT
			<input checked="" type="checkbox"/> BODILY INJURY / PROPERTY DAMAGE	\$ 1,000,000	\$ 2,000,000
			<input type="checkbox"/> COMBINED SINGLE LIMIT	EACH OCCURRENCE LIMIT	\$
Norfolk and Dedham Mutual Fire Ins Co	R0630962A	07/30/23 - 07/30/24	GENERAL LIABILITY	EACH OCCURRENCE LIMIT	GEN AGGREGATE LIMIT
			<input type="checkbox"/> COMMERCIAL LIABILITY	\$	\$
			<input checked="" type="checkbox"/> BUSINESSOWNER'S	\$ 1,000,000	\$ 2,000,000
			<input checked="" type="checkbox"/> PERSONAL / ADVERTISING	\$ 1,000,000	\$ 2,000,000
			<input checked="" type="checkbox"/> PRODUCTS / COMP OPS	\$ 1,000,000	\$ 2,000,000
		<input type="checkbox"/> EBLI	\$	\$	
Norfolk and Dedham Mutual Fire Ins Co	WE163927A	09/01/22 - 09/01/23	EMPLOYER'S LIABILITY	EACH ACCIDENT	DISEASE-EACH EMPLOYEE
				\$ 500,000	\$ 500,000
				DISEASE-POLICY LIMIT	\$ 500,000
		OTHER	EACH OCCURRENCE LIMIT	AGGREGATE	
Norfolk and Dedham Mutual Fire Ins Co	R0630962A	07/30/23 - 07/30/24	<input checked="" type="checkbox"/> CONDO D & O	\$ 1,000,000	\$ 1,000,000
			<input type="checkbox"/> LIQUOR LIABILITY	\$	\$

MINIMUM EARNED PREMIUM \$	TOTAL ADVANCE PREMIUM \$	\$ 1,000.00
	THIS IS NOT A BILL	\$

Forms and endorsements made a part of this policy at time of issue: CU 00 01, CU 00 23, CU 00 25, CU 00 31, CU 00 33, CU 01 02, CU 04 12, CU 21 08, CU 21 14, CU 21 23, CU 21 24, CU 21 25, CU 21 26, CU 21 27, CU 21 36, CU 21 40, CU 21 50, CU 21 58, CU 21 71, CU 21 86, CU 21 90, CU 24 29, CU 24 32, CU 34 23, IL 00 17, IL 09 85

These Declarations together with the Common Policy Conditions, Coverage Part Declarations, Conditions, Forms and Endorsements, if any, issued to form a part thereof, completes the above numbered policy.

Countersigned \_\_\_\_\_ Date \_\_\_\_\_ By: \_\_\_\_\_ Authorized Representative

IN WITNESS WHEREOF the Company has caused this policy to be signed by its president and secretary. But, this policy shall not be valid unless countersigned on this Declaration page by a duly authorized representative of the Company.

INSURED COPY



## ADDITIONAL POLICY INFORMATION

ENDORSEMENTS FOR POLICY NUMBER: U1209167A



ENDORSEMENT	DATE	DESCRIPTION
CU 00 01	(04-13)	COMMERCIAL LIABILITY UMBRELLA COVERAGE FORM
CU 00 23	(05-13)	EXCLUSION - LEAD/LEAD CONTAMINATION
CU 00 25	(05-13)	EXCLUSION - ASBESTOS
CU 00 31	(02-22)	EXCLUSION - TOBACCO AND ELECTRONIC SMOKING DEVICE LIABILITY
CU 00 33	(06-14)	TWO OR MORE POLICIES ISSUED BY US
CU 01 02	(01-16)	MASSACHUSETTS RESIDENTIAL FUEL TANK EXCLUSION
CU 04 12	(12-19)	CONDOMINIUMS, CO-OPS, ASSOCIATIONS - DIRECTORS AND OFFICERS LIABILITY COVERAGE
CU 21 08	(12-19)	EXCLUSION - INTERCOMPANY PRODUCTS SUITS
CU 21 14	(04-13)	AMENDMENT OF LIQUOR LIABILITY EXCL.- EXCEPTION FOR SCHEDULED PREM OR PRODS
CU 21 23	(02-02)	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM)
CU 21 24	(11-16)	EXCLUSION - NON-OWNED AIRCRAFT
CU 21 25	(12-01)	TOTAL POLLUTION EXCLUSION ENDORSEMENT
CU 21 26	(04-13)	EXCLUSION - CROSS SUITS LIABILITY
CU 21 27	(12-04)	FUNGI OR BACTERIA EXCLUSION
CU 21 36	(01-15)	EXCLUSION OF PUNITIVE DAMAGES RELATED TO A CERTIFIED ACT OF TERRORISM
CU 21 40	(01-15)	EXCLUSION OF CERTIFIED NBCR ACTS OF TERRORISM; CAP ON LOSSES
CU 21 50	(03-05)	SILICA OR SILICA-RELATED DUST EXCLUSION
CU 21 58	(05-09)	COMMUNICABLE DISEASE EXCLUSION
CU 21 71	(06-15)	EXCLUSION - UNMANNED AIRCRAFT
CU 21 86	(12-20)	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION
CU 21 90	(12-20)	PUBLIC OR LIVERY PASSENGER CONVEYANCE AND ON-DEMAND DELIVERY SERVICES EXCLUSION
CU 24 29	(12-19)	BUSINESSOWNERS LIABILITY CHANGES
CU 24 32	(04-13)	LIMITED COVERAGE TERRITORY
CU 34 23	(12-20)	CANNABIS EXCLUSION WITH HEMP EXCEPTION
IL 00 17	(11-98)	COMMON POLICY CONDITIONS
IL 09 85	(12-20)	DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT



ADDITIONAL POLICY INFORMATION

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CU 04 12 : CONDOMINIUMS, CO-OPS, ASSOCIATIONS - DIRECTORS AND OFFICERS LIABILITY

Pending or Prior Litigation Date:

NONE

Retroactive Date:

07/30/2007

Directors and Officers Liability Annual Aggregate Limit:

\$2,000,000

Retained limit:

\$10,000

CU 21 14 : AMENDMENT OF LIQUOR LIABILITY EXCL.- EXCEPTION FOR SCHEDULED PREM OR

Description Of Activity(ies)

NONE

PREMIUM:

0


CU 24 29 : BUSINESSOWNERS LIABILITY CHANGES

EACH OCCURRENCE LIMIT :

\$2,000,000

AGGREGATE LIMIT (EXCEPT WITH RESPECT TO"COVERED AUTOS") :

\$2,000,000



MUTUALS-MEMBERSHIP & VOTING NOTICE: The assured is hereby notified that by virtue of this policy the assured is a member of the NORFOLK & DEDHAM MUTUAL FIRE INSURANCE COMPANY, and is entitled to vote either in person or by proxy at any and all meetings of said company. The annual meetings are held at its home office on the second Wednesday of March in each year, at 1:00 PM.

MUTUALS-PARTICIPATION CLAUSE WITHOUT CONTINGENT LIABILITY: No Contingent Liability: This policy is nonassessable. The policyholder is a member of the Company and shall participate, to the extent upon the conditions fixed and determined by the Board of Directors in accordance with the provisions of law, in the distribution of dividends so fixed and determined.

In Witness Whereof, we have caused this policy to be executed and attested, and, if required by state law, this policy shall not be valid unless countersigned by our authorized representative.



Corporate Secretary



President & CEO