



Insurance Policy

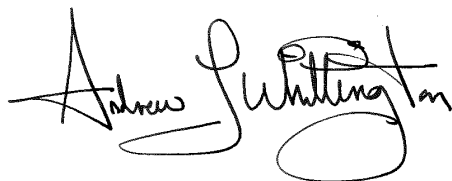
CLAIM OFFICE:

Mail claims to:
945 E. Paces Ferry Rd.
Suite 1800
Atlanta, GA 30326-1160

Fax claims to:
(404) 231-3755
(Attn: Claims Department)

Email claims to:
reportclaims@rsui.com
(Attn: Claims Department)

Your policy has been signed on our behalf by our President and by our Secretary and Treasurer. However, your policy will not be binding on us unless it is also countersigned by one of our duly authorized agents.

A handwritten signature in black ink, reading "Andrew J. Whittington". The signature is fluid and cursive, with the first name "Andrew" and last name "Whittington" clearly legible.

President

**RSUI Indemnity Company
Landmark American Insurance Company
Covington Specialty Insurance Company**

A handwritten signature in black ink, reading "Donald T. Anderson". The signature is cursive and extends to the right with a long, sweeping tail.

Secretary

**RSUI Indemnity Company
Landmark American Insurance Company
Covington Specialty Insurance Company**



COMMON POLICY DECLARATIONS

THIS POLICY IS ISSUED BY THE COMPANY NAMED BELOW

COMPANY NAME: Covington Specialty Insurance Company (A New Hampshire Stock Company)

BRANCH ADDRESS: 945 East Paces Ferry Road, Suite 1800, Atlanta, GA 30326-1160

POLICY NO.: VBB133075 **PRIOR POLICY:** VBA946051

NAMED INSURED:
BIRCH CREEK FOREST PROPERTIES INC

NO FLAT CANCELLATION

MAILING ADDRESS:
202 BIRCH CREEK FOREST DR.
SOMERVILLE, TX 77879

POLICY PERIOD: From 10/22/2024 to 10/22/2025 12:01 A.M. Standard Time at your Mailing Address above.

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.

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

COVERAGE PARTS			PREMIUM	
Commercial Property			\$	2,677.00
Commercial General Liability			\$	Not Covered
Liquor Liability			\$	Not Covered
Commercial Inland Marine			\$	Not Covered
Commercial Professional Liability			\$	Not Covered
Annual Minimum and Deposit Premium			\$	2,677.00
Audit Period: Annual unless otherwise stated:				
SL taxes and fees	Amwins Service Fee: \$275.00 Surplus Lines Tax : \$143.17 Stamping Fee: \$1.18	Terrorism Premium	\$	--Excluded--
Other		Other charges (SL taxes, fees)	\$	419.35
TOTAL POLICY PREMIUM			\$	3,096.35

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS:

SEE SCHEDULE OF FORMS AND ENDORSEMENTS – GBA900002

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE FORM(S) AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE CONTRACT OF INSURANCE.

AGENCY NAME / ADDRESS:
AMWINS ACCESS INS SERVICES, LLC
AMWINS - DALLAS, TX
5910 NORTH CENTRAL EXPRESSWAY, SUITE 400
DALLAS, TX 75206

Countersigned: 11/1/2024
Date

By: 
Authorized Representative

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COMMERCIAL LINES SUPPLEMENTAL
DECLARATIONS

POLICY NO.: VBB133075

EFFECTIVE DATE: 10/22/2024

NAMED INSURED: BIRCH CREEK FOREST PROPERTIES INC

SCHEDULE OF ENDORSEMENTS

FORM NUMBER	TITLE
GBA 901001 1112	Insurance Policy Jacket
	Forms Applicable to All Coverage Parts
GBA 900001 0819	Common Policy Declarations
GBA 909017 0823	Texas Important Notice
GBA 909022 1022	State Fraud Statement
RSG 99018 1211	Notice - Rejection of Terrorism Coverage
RSG 99128 0120	Texas Important Notice
GBA 904010 0117	Minimum Earned Premium Retained
GBA 904023 0322	Amendment - Common Policy Conditions (Return Premium)
GBA 904025 1122	Amendment - Nonpayment Cancellation Condition
GBA 906005 0115	Exclusion Of Terrorism
GBA 906015 0423	Exclusion - Marijuana and Cannabis
IL 0017 1198	Common Policy Conditions
	Forms Applicable to Coverage Part - PROPERTY
GBA 400001 0516	Commercial Property Coverage Part Declarations
CP 0010 1012	Building and Personal Property Coverage Form
CP 0090 0788	Commercial Property Conditions
CP 1010 1012	Causes of Loss - Basic Form
CP 1020 1012	Causes of Loss - Broad Form
CP 1030 0917	Causes of Loss - Special Form
CP 1033 0695	Theft Exclusion
GBA 404002 0813	Actual Cash Value Defined
GBA 404011 1012	Windstorm or Hail Deductible
GBA 404012 0424	Total or Constructive Total Loss Clause
GBA 404030 0116	Construction Type Definitions
GBA 404031 0417	Conditional Extension - Building



COMMERCIAL LINES SUPPLEMENTAL DECLARATIONS

POLICY NO.: VBB133075

EFFECTIVE DATE: 10/22/2024

NAMED INSURED: BIRCH CREEK FOREST PROPERTIES INC

SCHEDULE OF ENDORSEMENTS

[illegible]

This Endorsement Changes The Policy. Please Read It Carefully.

IMPORTANT NOTICE

Have a complaint or need help?

If you have a problem with a claim or your premium, call your insurance company or HMO first. If you can't work out the issue, the Texas Department of Insurance may be able to help.

Even if you file a complaint with the Texas Department of Insurance, you should also file a complaint or appeal through your insurance company or HMO. If you don't, you may lose your right to appeal.

RSUI Group, Inc.

To get information or file a complaint with your insurance company:

Call: SVP, Compliance & Risk Management at 404-231-2366

Toll-free: 877-269-1377

Online: www.rsui.com

Email: rhardeman@rsui.com

Mail: 945 East Paces Ferry Road, Suite 1800, Atlanta GA 30326

The Texas Department of Insurance

To get help with an insurance question or file a complaint with the state:

Call with a question: 1-800-252-3439

File a complaint: www.tdi.texas.gov

Email: ConsumerProtection@tdi.texas.gov

Mail: Consumer Protection, MC: CO-CP, Texas Department of Insurance, P.O. Box 12030,
Austin TX 78711-2030

¿Tiene una queja o necesita ayuda?

Si tiene un problema con una reclamación o con su prima de seguro, llame primero a su compañía de seguros o HMO. Si no puede resolver el problema, es posible que el Departamento de Seguros de Texas (Texas Department of Insurance, por su nombre en inglés) pueda ayudar.

Aun si usted presenta una queja ante el Departamento de Seguros de Texas, también debe presentar una queja a través del proceso de quejas o de apelaciones de su compañía de seguros o HMO. Si no lo hace, podría perder su derecho para apelar.

RSUI Group, Inc.

Para obtener información o para presentar una queja ante su compañía de seguros:

Llame a: SVP, Compliance & Risk Management al 404-231-2366

Teléfono gratuito: 877-269-1377

En línea: www.rsui.com

Correo electrónico: rhardeman@rsui.com

Dirección postal: 945 East Paces Ferry Road, Suite 1800, Atlanta GA 30326

El Departamento de Seguros de Texas

Para obtener ayuda con una pregunta relacionada con los seguros o para presentar una queja ante el estado:

Llame con sus preguntas al: 1-800-252-3439

Presente una queja en: www.tdi.texas.gov

Correo electrónico: ConsumerProtection@tdi.texas.gov

Dirección postal: Consumer Protection, MC: CO-CP, Texas Department of Insurance, P.O.
Box 12030, Austin TX 78711-2030