

LFHA Board of Directors Meeting 5-21-24 Minutes

Location: Lacey Fire Station 34, 8447 Steilacoom Rd SE, Olympia, WA

Board members present; David CdeBaca, Beckie Weatherford, Deanna

Rocamora Member-at-Large; Christopher Lewis

Board members/Member-at-Large absent; Constance Kimmons, Shannon

Hildreth Guests: 5

Time started: 6:30pm

Open Forum

The floor was opened for new business. No topics were added, however a problem with the irrigation system at the new roundabout was discussed. A leak was discovered which caused the water bill to significantly increase. The water has since been turned off to that portion of the irrigation system. Member-at-Large Lewis and the Maintenance Volunteer Lead Heard will arrange a time to investigate the leak to come up with a repair plan.

Minutes and Executive Committee Minutes

The April minutes and Executive Committee Minutes were sent via email to the board members for review and comment. Secretary Rocamora reviewed a summary of the motions made at the Executive Committee Meetings held on 4/22/24 and 5/6/24. (Addendum A)

A motion was made and seconded to approve the April board minutes and the Executive Committee Minutes from 4/22/24 and 5/6/24.

Discussion occurred regarding how interest is charged for past due accounts and methods for collecting on delinquent accounts. The collections process is an active project and is currently under review. The board will be seeking guidance from a new legal firm as well as reviewing the RCWs to maintain compliance.

A call to vote was made and passed unanimously.

Treasurer's Report (Addendum B and C)

The reports were presented and reviewed. The 2nd audit vote is being announced on the entrance sign boards and Facebook. If this vote does not pass, a CPA audit is required and could cost LFHA approximately \$10,000. It was reported that the cost of the CPA audit would have to come from the LFHA operating budget and if not, enough funds are available, the remaining amount would come from the Reserve account.



CC&R's

Report presented by President CdeBaca. No CC&R letters sent out. A parking complaint on Duke Court was received and responded to. Residents are encouraged to call the Non-Emergency Sherrif phone number for parking violations or vehicle obstructions. The LFHA does not have regulations for parking and cannot enforce local, county or state parking violations.

Contract Maintenance

Member-at-large Hildreth has resigned from this position and Member-at-large Lewis has volunteered to step in. Any suggestions, concerns or requests for RMR landscaping should be reported to Member at-large Lewis effective immediately. He will be the point of contact between RMR landscaping and LFHA. An area of concern was photographed and shared with Lewis, he will follow up RMR landscaping and cc the board if any emails are exchanged.

Volunteer Maintenance (Addendum D)

The report was presented and reviewed. The garbage cans at Hearing Park are full even though they are not out for public use yet. The trash service is put on hold during the winter months to save the LFHA the cost of pickup service and because the park is not being used for family gatherings or events during the off season. Treasurer Weatherford will call Lemay to start service and Member-at-Large Lewis has volunteered to bring the cans out of the park for collection on Thursdays. When the service is stopped this fall, a request to pick up the cans will be made to avoid this situation in the future.

LFHA is responsible for maintaining the 10 storm water ponds located in the neighborhood. The county inspects these ponds each year to make sure they are in good working order and will issue fines to the association if they are out of compliance. Volunteer maintenance lead J. Heard and his volunteer crew maintain these ponds and have completed work on 7 of the 10 ponds so far. A request was made to counsel RMR landscaping on cutting back the pond perimeters and clearing the branches around the ponds. Member-at-Large Lewis requested a tour of the ponds. Heard and Lewis will arrange a time to survey the ponds.

Discussion occurred about a fence/tree issue on Princeton Court. No further action was taken, the board is aware of the situation.

ARC

An ARC form was received for a shed that has already been built.

Events (Addendum E)

Report was presented and reviewed. A Hearing Park reservation was received for June 8th.

Old Business

CPA Audit for 2022 and 2023/ 2nd Vote update: The 2nd vote has been emailed (Election Buddy) and sent via post card. The deadline to vote is June 18th.

LFHA Liability Insurance Update **(Addendum F,G,H)**: LFHA received quotes for liability insurance from State Farm and Farmers Insurance. The scope of work performed by the volunteer maintenance committee was discussed as it pertains to allowable activities covered by the new insurance plan. Both



State Farm and Farmers representatives confirmed the Volunteer Maintenance Committee can use power tools to cut fallen branches and debris, but they can no longer fell any trees regardless of situation or condition of the tree. Any trees that are dead or posing a threat to property or person will be reported to the board for an action plan. Any removal of trees will be completed by a contractor. The board voted to select State Farm as the liability insurance provider for LFHA at a savings of approximately \$1300 annually.

Tree removal SOP (email from resident suggesting establishing criteria for tree removal): The board reviewed the tree survey provided by the volunteer maintenance committee and is validating the survey with Sound Urban Forestry LLC. The survey is scheduled for 5/22/24 and will include 3 trees. The report from Sound Urban Forestry will be compared to the volunteer survey regarding recommended action plan.

Replacing the Handrails at Hearing Park: A request was made to investigate placing handrails at Hearing Park leading down to the beach. Discussion occurred at the Executive meeting regarding this request. The board recognizes this was included as part of the original project of replacing the bulkhead, however, the board has decided to table this project. The new Reserve Study report lists more pertinent projects that need to be addressed. The Report will be published on the LFHA website.

Rotting Timbers: The board voted to approve replacing the rotting timbers on the steps with concrete. The Volunteer Maintenance Committee will start the project on 5/26/24.

Reserve Study: The report was received and reviewed with some corrections noted. The corrections have been received. The asphalt at Hearing Park was noted as a major concern and is in need of replacement. Discussion occurred about options to replace it however no decisions were made. This is an ongoing topic and discussion will continue.

Update on the pruning of the Oregan White Oak Tree: This has been completed and paid for. The recommendations from Urban Sound Forestry were followed and the project is complete.

New Business

Long Lake Management Division Board Vacancy- LFHA has 2 seats on this committee. They meet the 4th Thursday of every month from 6:30-8:30pm at 1231 Franz Street Lacey, WA 98503. Anyone from the neighborhood can volunteer, they do not need to be a board member. The vacancies will be announced on Ifha.info and Facebook. Member-at-Large Lewis volunteered to go to the next meeting.

Disability payment plan request: A resident has requested to make payments on their outstanding balance of \$773 which includes previous annual assessments and late fees. Resident offered to pay \$25 twice a month. Suggestion was made to not charge interest while making payments on payment plan. Discussion occurred regarding what the by-laws state for past due assessments. Suggestion made to offer a counter proposal with the goal of paying the past due amt by 12-31-24. A suggestion was made to invite the residents to an executive meeting to discuss/negotiate the payment plan.



A motion was made and seconded to invite the resident to the next executive meeting to discuss the terms of a payment plan.

Discussion occurred regarding the feasibility of inviting the resident to a meeting considering they may have physical disabilities. Additional concerns were raised over next steps if the resident did not want to meet or did not show up.

A Call to vote was made: Yay: 0 Nay: 3 Motion does not pass

A motion was made and seconded to make a counter proposal to the resident payment plan. The counter proposal states that the entire past due balance of \$773 needs to be paid in full by 12-31-24. Additionally, failure to communicate a late payment or any missed payment would void the payment plan and the account will be sent straight to collection. This agreement also requires the 2025 annual assessments to be paid on time and the resident is responsible for any PayPal fees incurred.

A call to vote was made and passed unanimously.

A motion was made and seconded to adjourn Discussion: None

A call to vote was made and passed unanimously.

Meeting adjourned at 8:04pm.



Executive Meeting Summary of Motions

4-22-24: Emergency meeting called to discuss liability insurance cancellation and create an action plan.

Motion was made and seconded to not renew with CAU insurance company and instead look for another insurance company.

Discussion: Suggestions were made to look for a policy that provides a volunteer rider specifically allowing the use of power tools and if one cannot be found, asking what the maintenance committee is allowed to do under their umbrella. Explaining the duties of the volunteer maintenance committee is important (maintain greenbelts, retention ponds, lake front park, etc). The power tools go beyond the standard use of a volunteer committee per CAU.

A call to vote was made and the motion passed unanimously.

A motion was made and seconded to purchase 3 banners for the annual yard sale.

Discussion: Questions were raised if a lack of liability insurance would or should cancel this event. The opinion of the board is that the event can continue with or without liability insurance. The yard sale will be Friday-Sunday 8:30am-4pm

A call to vote was made and passed unanimously.

5-6-24: General Executive Meeting

- LFHA Liability Insurance update- Quotes were received from Farmers Insurance and State Farm Insurance. The board reviewed the quotes and voted via email/text message to accept the State Farm Policy. The Policy is effective May 3rd, 2024. The policy is for 1 yr and saves LFHA \$1300.00 annually.
- Email from resident: Criteria for cutting down trees in greenbelt.

The Board agrees we should create an SOP for tree removal and maintenance.

Agenda item for May board mtg: it has been discussed. Waiting for validity report of greenbelt survey, post a letter of understanding on our website and plan to replant greenbelt? It's never been the purpose of the board to cut down trees that don't pose a threat.

• Handrail at Hearing Park

Reserve study reviewed. The board recognizes there is a need for the handrails. Based on the new Reserve Study, the handrails are not mentioned as a yellow (needs attention) matter. The board discussed the items that need attention as outlined by the Reserve Study (asphalt, play structure, tree removal) and brainstormed ideas for the asphalt and accessibility. President CdeBaca pointed out a discrepancy with an item in the Reserve Study, Treasurer Weatherford will follow up with the reserve company to resolve the discrepancy.



The board will not take action to pursue replacing the handrails at this time.

• Rotting Timbers at Hearing Park

The rotting timbers on the walkway leading to the dock could be replaced with concrete and is suggested by the reserve study to be replaced.

A motion was made and seconded to allow the maintenance committee to replace the rotting timbers on the walkway leading to the dock at Hearing Park with concrete at a cost of approx. \$100.

Discussion: Volunteer Maintenance Lead Jeff anticipates the cost of replacing the steps in concrete to be \$100 for the entire project. Need to ensure the correct concrete is being used for weight bearing concerns. The reserve study was reviewed and was found to suggest replacing the concrete stairs in addition to the timbers due to being uneven and being a trip hazard. The concrete stairs are not part of the reserve funding since they do not have a useful life calculation. Concern brought up that if the steps are replaced, the repair of the rotting timbers would need to be replaced again. No further action taken regarding the concrete steps.

A call to vote on the motion was made and passed unanimously.

o Lifejackets at Hearing Park, Water safety/ life jacket Training.

The logistics of hosting a lifejacket communal borrowing system were discussed and determined to not be a viable project for the abilities of this board and would open the HOA to potential liability concerns. The board will not continue this project.

• A motion was made and seconded to dissolve the Resolution of the collection of unpaid HOA assessments dated sept 2015 between LFHA and Vial Fotheringham LLP (VF).

Discussion: The board received notification that the CFE (cash flow enhancement process) is being discontinued by VF. If the board turned over new collection accounts with this revision, the board would be charged hourly for services rendered instead of being collected from the account holder. Financially, the board cannot afford this change.

A call to vote was made on the motion and passed unanimously.

Addendum B 2024 BookBudget 2024 Budget тотаL

(\$40 & \$20 \$0 with Credits Applied 0.00 -3,880.00 -840.00 1,100.00 (

	Projected 2024 Budget	Mar 24 Actual Apr 2 Actual	May 24 Actual Budget Bal Left	2024	Budget		
Ordinary Income/Exp	oense Accts Rec 202	2 2023 2024 Incor	me <mark>4/30/2024 \$16</mark>	9.46 \$174.54	\$179.78 2024 Associat	ion Dues (\$179.78 & \$89.89) Dues) -4,728.50 -4,474.71
-1,585.44 1,191.49	\$13,283.7 76,046.94	⁵ \$84.74 \$87.28 \$	89.90 2024 Specia	l Assessment	(\$40.00 & \$20.00		
Reserve with Cre	dits Applied \$0.00)	-960.00 -840.00 -28	0.00 1,020.00 16,9	20.00 ^{10% Pos}	sible		Unpaid \$40.00 \$40.00 \$40.00
Credits Prepaid f Total Income -5,688	or 2024 in 2023 0.00 .50 -5,314.71 -1,865	0 0.00 0.00 -1,359.80 5.44 2,211.49 92,966	6 -1,359.86 <mark>\$9,296</mark> . 5.94	69			
Expense Banking							
						4/30/2	2024
2 Tax Preparation Fe \$88,183.67 3 Insura			• •	16,920.00) \$	15,820.00 5 Fence/Signa	ge Repairs-Maint. 0.00 0.00	0.00
Reserve Fund 4 Lice \$57,038.34	nses & Fees (May) (0.00 -20.00 0.00 0.00	0 (20.00)	2,000.00 (<mark>2</mark> ,	000.00) 7mth CD Commo	on Area Maint/Mowing (at	
Maintenance Reser	ve Paid Reserve Fun	d Contribution Spe	cial Assessment				

```
$2,200) for 12 months) 0.00 -2,266.00 -2,266.00 16,402.00 ( 27,600.00) $44,000.00 6
 7 Volunteer Projects/Petty Cash/Garbage -241.73 0.00 0.00 667.36 (1,000.00)
 8 Hearing Park Maintenance/Waterfront 0.00 -39.27 0.00 460.73 ( 500.00) VF Collections 10 Other Landscaping/Trees 0.00 -427.47 0.00
 8,572.53 (9,000.00) 4/30/24 12 Theft & Vandalism 0.00 0.00 0.00 50.00 (50.00) $3,379.56 * Total Maintenance -241.73 -6,612.74
 -3,106.00 29,252.62 (40,150.00)
    Office Expenses Grimm 15 PO Box Rental (Due in February) 0.00 0.00 0.00 400.00 (400.00) 12/31/2019 16 Postage -161.80 -68.00
 0.00 -55.64 ( 600.00)
 17 Quickbooks Annual Fee 0.00 -351.04 0.00 -1.04 (350.00)
 18 Supplies -248.16 0.00 -122.64 441.08 (850.00)
 19 Telephone (at $40.00 per month) -37.06 -37.06 0.00 331.76 ( 480.00)
 20 Website/Email -6.57 -34.42 -7.90 187.97 (250.00)
 * Total Office Expenses -453.59 -490.52 -130.54 1,304.13 ( 2,930.00)
 21 Community Events 0.00 0.00 -150.00 650.00 ( 900.00)
    Professional Fees
 22 Legal Fees 0.00 0.00 0.00 2,000.00 ( 2,000.00)
                                                          23 Accounting Fees/Reserve Study 0.00 0.00 -930.00 3,570.00 (4,500.00)
           Bookkeeping (at $360.17 per month)
             +$350 Year End/Taxes -1,196.74 0.00 0.00 2,754.96 (4,672.04) 24
 * Total Professional Fees -1,196.74 0.00 -930.00 8,324.96 (11,172.04) Utilities
 26 Electricity (at $666.67 per month) -1,076.31 -807.09 0.00 4,640.07 ( 8,000.00) Port-a-potty (at $62.00 per Service at
              12
             Services) -59.46 -59.46 0.00 565.62 (744.00)
 27
             Water - Irrigation ($60 per Month &
              Backflow 2@$110) -54.72 -54.72 0.00 723.84 ( 940.00) 28
 * Total Utilities -1,190.49 -921.27 0.00 5,929.53 (8,744.00) Total Expense -3,082.55 -14,926.99 -4,316.54 46,828.78 (
90,026.04) Net Ordinary Income (2,940.90) Other Income
 Interest Income (at $50.00 per month aprox) 18.00 18.11 0.00 514.19 ( 600.00) YTD Interest Total Other Income 18.00 18.11 0.00 514.19 ( 600.00)
    $85.81 Net Other Income 18.00 18.11 0.00 514.19 ( 600.00) Total Net Income 3,540.90 1st Qtr Totals 1st Qtr 2nd Qtr 3rd Qtr 4th Qtr 2024
Assessments ( 4,087.67) ( 2,842.09) $64,099.33 ( 2,842.09) 0.00 0.00 Previous Assessments ( 185.12) ( 909.70) $2,271.26 ( 909.70) 0.00 0.00 Finance
  Charges/CC&R Fines/Transfer (40.80) (142.07) $742.25 (142.07) 0.00 0.00 Late Charges (400.00) (500.00) $935.00 (500.00) 0.00 0.00 Reserve
    Payments ( 960.00) ( 840.00) $14,780.00 ( 840.00) 0.00 0.00 Credits ( 14.91) ( 5.85) $737.18 ( 5.85) 0.00 0.00 Total Paid $5,688.50 5,239.71
                                                    $83,565.02 5,239.71 0.00 0.00 88,804.73
```



ACCOUNTS RECEIVABLE

- VF Accounts accounts for collections VF is currently working on foreclosure proceedings for the 2 accounts we currently have with them.
- Sent out revised 1st past due letters to 37 homeowners, payments are tricking in.
- Compiled letter, postcard, and election buddy for 2nd vote to waive CPA audit for 2022 and 2023. Letters and emails through electionbuddy.com were sent.

ACCOUNTS PAYABLE

Date Amount	To Whom	Description
-------------	---------	-------------

4/4/2024		3 Dept of Treasury	tax due from 2023 Form 1120-H
4/4/2024	\$427.47	Sound Urban Forestry LLC	evaluation of oak tree 35th court
4/5/2024		3 Google Web	drive storage

4/8/2024		3 Goebel Septic	monthly port-a-pot cleaning
4/18/202 4		3 Consumer Cellular	Monthly Cell Phone Bill
4/18/202 4		3 City of Lacey	Water Bill for NE Entrance
4/18/202 4		3 City of Lacey	Water Bill for SE Entrance
4/22/202 4	\$67.40 PSE		Streetlights
4/22/202 4	\$715.40		Streetlights
4/22/202 4	\$11.87 PSE		NE Entrance
4/22/202 4	\$12.76 PSE		SE Entrance
4/22/202 4		4 GoDaddy	LEHA.net_domain renewal
4/16/202 4		VOID	
4/16/202 4		7 Chris Lewis	keys for park
4/30/202 4) State Farm	HOA Insurance

Communication

• Phone - 12 Calls regarding gate codes, account status, CCRs,

• Texts - 4 Text messages

• Email - 22 Emails - account status, gate codes, VF collections, Reserve study • Website - 82 visits

Addendum D

May 2024 LFHA Maintenance Report

4/29 Surveyed rotted timbers on walkway leading to dock. Estimate \$100 to replace timber with concrete, Cleared fence lines of brush & overhanging limbs, removed litter. Garbage cans stored behind shed during off season are full. Appears some park users are out of the loop 620 lb dump run \$14.00 5 volunteers, 12 man hrs

5/6 Serviced annual pond inspection Oxford loop pond and Oxford Ave pond. removed blackberry, ivy down branches, cleared fence lines. Pulled some of the weeds in the outflow. Perimeters have been neglected, we cut back encroaching brush. Some erosion from mowing on steep slopes. 4 volunteers 10 man hrs

5/13 Serviced annual pond inspection on Duke Ct and Harvard/Lk Forest ponds. Removed several yards of sediment, rebuilt splash pad. Removed down branches and several dozen Holly seedlings 5 volunteers 12 man hrs

5/20 Serviced annual pond inspection on Gonzaga N, Gonzaga S and Stanford ponds. Cut back perimeters, removed blackberry & thistle, removed down branches & sediment. Perimeters are ignored by contractor as well as removing the occasional down branches. contractor is ignoring down branches & mowing around them. 680 lb dump run \$15.00 4 volunteers 12 man hrs

5/20 Inspected maple trees behind Princeton Ct interfering with resident's plan to replace existing cyclone fence with new cedar fence. existing trees on both sides of the property line here appear to be healthy but are in fact a problem and have been for years. Total removal of some of the trees is likely the only permanent, long term solution, however, there is a steep bank here and the tree roots are key to stabilizing .

Discussion: Replacing rotted timbers at waterfront

Total May volunteer man hrs: 46 Reimbursable expenses: 4/10 620 lb dump run \$14.00 5/20 680 lb dump run \$15.00 total \$29.00 Addendum E

May Event Report

Community garage sale is May 17-19. It has been advertised on multiple Facebook sites and signs are posted.

Next event is for June 8th and is about informing the community about Wahington's free fishing weekend. This will be advertised on the community Facebook page.

There are 2 reservations at the park, one for June15th and the other for the 22nd.

No other events are planned at this time.

ADDENDUM F

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Ste 114 Bellevue, WA 98005 ryan1.krobinson2@farmersagency.com Phone: (425) 828-2669

Robinson Insurance Agency (Bellevue, WA) 9 Lake Bellevue Dr

Enclosed you will find a non-admitted Non Profit Package quote for Lake Forest Home Assoc Inc. The quote number is NPP024A81K4.

Section I- Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date. Section II- Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.

Section III- Provides the Liability Limits of Insurance

Section IV- Lists the required coverage forms, notices, endorsements and exclusions.

Section V- Offers optional coverages that are available to the applicant but are not currently included in the quote.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

A Commercial Umbrella quote that provides higher limits of Liability. It is attached as a separate quote under #CUP024A7760. This quote is optional and not required to be bound along with the primary quote. If coverage is desired, we would issue a separate policy.

A pre-filled application that includes the information you have already provided.

Endorsement TRIADN Disclosure Notice of Terrorism Insurance Coverage for your review.

A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

For your convenience, an area on page 1 of the guote has been provided to record your requested effective date and which optional coverages you might want to include when you are ready to buy coverage.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to guote this account!

Sincerely, Ryan Robinson Robinson Insurance Agency (Bellevue, WA)

Cover letter DocuSign Envelope ID:

Robinson Insurance Agency (Bellevue, WA) 9 Lake Bellevue Dr Ste 114 Bellevue, WA 98005 ryan1.krobinson2@farmersagency.com Phone: (425) 828-2669

6F179463-029F-418A-A2DC-5DD885491974NPP024A81K4

Please bind effective: Insured email address:

05/03/2024

lfhabode@gmail.com

Quote is valid until 6/23/2024

Lake Forest Home Assoc Inc

To:

Insured phone number:

360-455-8324

ryan1.krobinson2@farmersagency.com Confirm optional coverages: Do not include any optional coverages. Include the following optional coverages (Taxes & Fees may apply to optional premium if purchased) Option 1 - (add: \$150.00) - Non-Owned & Hired Automobile Liability Option 2 - (add: *\$292.00) - Terrorism Coverage *See Terrorism Section for Exact Pricing and Terms

From: Ryan Robinson

Insured Signature ______President, Date _____

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

NON PROFIT PACKAGE POLICY INFORMATION

Carrier: Mount Vernon Fire Insurance Company Status: Non-admitted

A.M. Best Rating: A++ (Superior) - XII

COVERAGE PART PREMIUM Commercial General Liability \$5,831.00 Community Association Directors & Officers Coverage \$2,217.00 PLEASE REFER TO THE EXCESS LIABILITY QUOTE #CUP024A7760 IF HIGHER LIMITS OF LIABILITY ARE DESIRED.

TOTAL PREMIUM DUE TO CARRIER \$8,048.00

ADDITIONAL COSTS

Wholesaler Broker Fee \$135.00 Washington Surplus Lines Tax (2.000%) \$163.66 Washington Stamping Fee (.100%) \$8.18 TOTAL AMOUNT DUE \$8,354.84

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS – VISIT BIZRESOURCECENTER.COM FOR DETAILS

This account is subject to the following - Sections A, B and C:

A. Prior To Bind Requirements:

Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the coverages requested**

plus Producer Fee \$400 Total \$8,754.84 Page 1 of 6

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 NPP024A81K4

A. Prior To Bind Requirements:

Our completed & signed application as long as all underwriting information needed has been provided to us; or A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or A completed & signed application from another company as long as all underwriting information needed has been provided to us

Underwriter receipt, review and acceptance of the fully completed USLI Community Association Directors & Officers Liability Application dated no more than 45 days prior to the effective date of coverage and signed by one of the following as applicable: an officer on the Board or the Property Manager with authority to bind Applicant to the representations therein. We may modify the terms and/or premiums quoted or rescind this quote if the information provided in the completed Application is different from the original submission or there is a significant change in the risk from the date it was quoted.

Acceptable application must reflect the following:

No prior/pending claims within the last 5 years or known circumstances that may lead to a claim Percentage of

units rented or leased is 50% or less. No short term or

vacation rentals. No person/entity owns more than 10% Association has a positive fund balance of the total number of units No Claims

No Builder, Developer, or Agent representation on the Board of the Association. Terms are subject to change.

At least 70% of the total anticipated units/lots are sold

Average home/unit value does not exceed \$1,000,000

OPTIONAL Crime Coverage Requirements when offered:

Must meet all D&O requirements

Checks written by the association require a countersignature

Receipt and acceptable underwriter review of a USLI Community Association application with relevant CRIME questions completed and signed by an officer on the Board or the Property Manager with authority to bind Applicant to the representations therein.

Responses to the Prior to Bind questions below are not needed if the completed and signed application is submitted at the time of binding.

"x" indicates Prior to Bind requirement for Coverage Part

Liab = Liability; Prop = Property; Lig = Liguor; Cr = Crime; IM = Inland Marine; Prof = Directors and Officers and/or Employment Practices Liability as quoted Prof Liab Eligibility Question (applies to all locations) Response

x Is the fully completed Community Association Package F included with the bind request?* *Application must be dated no more than 45 and signed by one of the following: an office authority to bind Applicant to the representat x Are there past, pending or planned foreclosures	days prior ot the effective date of coverage r on the Board or the Property Manager with tions therein	Yes No Yes
unpaid taxes against the named insured or a individually within the last five years?	any officer, partner, member or owner,	No
x Has Insurance coverage been cancelled or non- applicable in MO)	renewed in the past three years? (not	Yes No
x Do the association's bylaws include an age restr x Does the association own, maintain, contract with or have an affiliation with any of the following: animal stables, bridges for vehicle use, day cares, skiing/resort activities, fire/police/ambulance services, waste management, electricity generation or other utilities? x Does the Association sponsor any athletic teams or hold sporting competitions on premises?	Yes	
Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the	Page 2 of 6	

coverages requested**

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 NPP024A81K4

"x" indicates Prior to Bind requirement for Coverage Part

Liab = Liability; Prop = Property; Liq = Liquor; Cr = Crime; IM = Inland Marine; Prof = Directors and Officers and/or Employment Practices Liability as quoted Prof Liab Eligibility Question (applies to all locations) Response

x Does the association own, maintain or have an affiliation with airport/airstrip or sewage	Mala
treatment facility?	Yes
	No
x Are there any plans or ongoing construction or development of homes, units, common	Yes
facilities or undeveloped lots?	No
x Are there functioning and operational smoke and/or heat detectors in all residential	
structures and clubhouses?	Yes
	No
x Do the written bylaws require all property owners to become members of the association? Yes No	
x Is this a master association that oversees other sub-associations? Yes No	
x Is there a minimum of 6 inches of loose fill surface (E.g., sand, pea gravel, shredded	Mala
wood product or shredded rubber) or a shock absorbent surface material (E.g., rubber No tiles, mats or poured-in-place material) under all permanently installed playground equipment?	Yes
x Are there any bridges for vehicle use or dams? Yes No	
x Are any marina services provided (fueling, dry boat storage/moorage, repairs, sales,	Mala
etc.)?	Yes
	No
x Are 50 percent or more of the units occupied? Yes No	
x Are more than 50 percent of the units rented or leased? Yes No	
x Does the association allow non-association members to use the recreational facilities	Yes
such as pool(s), fitness facilities or clubhouse?	No
x Does the association use any type of security guard service or other personnel to monitor	-
or guard the premises?	Yes
	No
x Does the Association obtain certificates of General Liability and Worker's Compensation	Yes
coverage from all contractors?	
	No
x Are the rules clearly posted at the beaches? Yes No	
x Are there any diving boards or slides at the beaches? Yes No	
x If swimming is permitted, are buoys or signs in place to mark No the designated swimming area?	
Please contact us with any questions regarding the terminology used or the coverages provided. Page 3 of 6	
Read the quote carefully, it may not match the coverages requested Yes	
DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 NPP024A81K4	
"x" indicates Prior to Bind requirement for Coverage Part	

Liab = Liability; Prop = Property; Liq = Liquor; Cr = Crime; IM = Inland Marine;

Prof = Directors and Officers and/or Employment Practices Liability as quoted Prof Liab Eligibility Question (applies to all locations) Response

x Is the beach available for use by the general public? Yes No

- x Is there life-saving equipment within a reasonable distance at beaches? Yes No
- x Are "No Swimming" signs posted on all docks, boat slips, boat ramps, and piers? Yes No
- x Are there commercial operations or docking of commercial vessels? Yes No
- x Is there a charge or fee for access to the pier? Yes No
- x Does the Association own or rent any watercraft? Yes No
- x Are the rules clearly posted at the lake(s)? Yes No
- x Are there any diving boards or slides at the lake(s)? Yes No
- x Is the lake available for use by the general public? Yes No
- x Is there life-saving equipment within a reasonable distance of the lake(s)? Yes No

B. Items Required Within 21 days of the inception of coverage:

No Items Required Within 21 Days

C. Underwriting Notes:

Thank you for the opportunity to quote this risk and for using Instant Quote.

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 NPP024A81K4 II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS Location #1 - 3813 Vassar Loop Se, Lacey, WA 98503 Liability Coverage Description Class Code Prod/CompOps Rate Prod/CompOps All Other Premium Basis Exposure All Other Rate Premium 68500 Units 419 Community Associations - Not-for-Profit Per Acre only Per Unit 49454 Acre 8 Per Acre 49950 Flat 1 Additional Insured - Townhouse Association Incl 11.700 Incl \$4,902 Incl 0.000 Incl Incl Flat Beaches - bathing not commercially 40072 Flat 1 operated Incl 500.000 Incl \$500 Incl 25.000 Incl \$25 Flat Boat Slips or Docks - existence hazard only 10106 Slip 1 Incl 100.000 Incl \$100 Incl 32.400 Incl \$259 Lakes - existence hazard only Community Per Slip Association Not-For-Profit only 45524 Acre 1 Open Space maintained by the Association

Page 4 of 6

Playground - Association risk only 46671 Playground 1

Incl 45.000 Incl \$45 Liability Coverage Premium for Location

Per Playground

#1: \$5,831

Community Association Directors & Officers Liability Coverage

Description Retention (each claim) Premium Community Association Directors & Officers Liability \$2,500 \$2,217 Community

Association Directors & Officers Liability Coverage Premium for Location #1: \$2,217

Total for Location: \$8,048

III. LIABILITY LIMITS OF INSURANCE

COMMERCIAL GENERAL LIABILITY

Each Occurrence \$1,000,000 Personal Injury and Advertising Injury \$1,000,000 Medical Expense (Any One Person) \$5,000 Damage To Premises Rented to You \$100,000 Products/Completed Ops Aggregate Included General Aggregate \$2,000,000 General Liability Deductible \$0

IV. REQUIRED FORMS &

ENDORSEMENTS Community Association Endorsements

COMMUNITY ASSOC. DIRECTORS & OFFICERS LIABILITY

Claims Made Limit \$1,000,000 Deductible \$2,500

CAP PKG (03/07) Community Association Package Product PL 1 PFAS Application CAP-235 (08/15) Data Breach & Identity Theft Endorsement

Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the coverages requested** (08/17) Amend Definition of Organization

(03/23) Exclusion - Perfluoroalkyl And Polyfluoroalkyl Substances (PFAS)

Page 5 of 6

CAP (08/15) Community Association Directors & CAP-238 Officers Liability Coverage Form DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 NPP024A81K4 Common Endorsements	
2110WA (04/15) Service Of Suit Jacket (07/19) Policy Jacket Gen	eral Liability Endorsements
CG 21 06 (12/23) Exclusion - Access or Disclosure of L-549 Confidential or Personal Material or Information	(04/15) Absolute Professional Liability Exclusion
CG0001 (12/07) Commercial General Liability Coverage L-599 WA Form	 (04/15) Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception
	(08/05) Pre-Existing Or Progressive Damage Or Defect Exclusion
CG0068 (05/09) Recording And Distribution Of Material Or L-600 Information In Violation Of Law Exclusion	(04/15) Expanded Definition Of Bodily Injury
CG2017 (10/93) Additional Insured - Townhouse L-610 Association	ns
CG2147 (12/07) Employment-Related Practices Exclusion L-783 N CG4032 (05/23) Exclusion - Perfluoroalkyl and L-787 Polyfluoroalkyl Substances (PFAS) IL0017 (11/98) Common Policy Conditions LLQ-100 (04/15) Who I	(05/13) Infringement Of Copyright, Patent, Trademark Or Trade Secret Endorsement Is An Insured Clarification Endorsement
IL0021 (09/08) Nuclear Energy Liability Exclusion LLQ-368 Endorsement	(04/15) Separation Of Insureds Clarification Endorsement
L-526 (01/15) Absolute War Or Terrorism Exclusion TRI/	ADN (12/20) Disclosure Notice of Terrorism Insurance Coverage

V. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote. Coverage Additional Premium Option 1 Non-Owned & Hired Automobile Liability \$150.00

Important Information

Prior to binding with this optional coverage, we would need to confirm that the applicant does not have a Business Auto policy, does not regularly deliver goods or products and does not require its employees to use their personal vehicle to conduct the applicant's business on a regular basis

If this coverage is purchased, add L-488 Non-Owned And/Or Hired Auto Liability

Coverage Additional Premium Option 2 Terrorism Coverage \$292.00

Important Information

Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act, is available for an additional premium of \$100 or 5.00% of the total applicable premium, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE - Notice of Terrorism Exclusion. When making your decision to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount, and limits in this policy applicable to losses arising from events other than acts of terrorism.

The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium shown above is subject to change.

Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the coverages requested**

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Page 6 of 6



Mount Vernon Fire Insurance Company

Community Association Package Product Application Applicant may qualify for an INSTANT

QUOTE by completing Section I below. Section II answers will be required prior to binding and are subject to underwriting approval.

Instant quote is not available for account Association Name: Location	Lake Forest Home	s loss history, please complete Section I and submit details in a claims suppleme Assoc Inc 3813 Vassar		
	Loop Se	Same as mailing address		
City:	Lacey	WAState: 98503Zip:		
Web Address:				
Type of Association:				
Residential Condo Homeo	wner Commercial/Retail Cooperat	tive Master with sub-associations Mobile Home/RV Park		
Road/Lake Association Pr	operty Owner Condo-Hotel Timesl	nare/Interval		
Number of Units:	419 Number of En	nployees: 0		
Is there any commercial/retai	l occupancy? If "Yes", # of retail	Yes No		
units:		# of commercial (office or warehouse) units:		
Total area of commercial/reta	il space:	square feet		
Who is responsible for the ins	surance and maintenance of the re	esidential The Association or Individual Unit Owners buildings?		
Does the Association own or	maintain a pool? Yes No If "Yes",	confirm number of enclosed/fenced locations with pools.		

Age of oldest building: Maximum # of stories: Are any units in the association available as rental units? Yes No Are there any short-term rentals owned or managed by the Association? Yes No 0 What percentage of the units are occupied by student tenants? (not applicable in DC): What is the average 500000 What percentage of units 100 home/unit value? are sold? Does any person/entity own multiple units? Yes No If "Yes", what is the greatest percentage of units owned by one person/entity? Amenities Section 11 Does the Association own or maintain any of the following Yes No amenities? If "Yes", confirm number of each: Docks/Slips/Piers: Lakes/Ponds (acres): Privately Owned Beaches: 1 Fitness Center: Sport Courts (type): Streets/Roads (miles): Open Space/Greenbelts (acres): Playgrounds: Clubhouse (square feet): 8 1 Walking/Equestrian Trails Enclosed Parking Garages (square feet): (miles): Property Section Frame Joisted Masonry Other Construction: Protection Class: Year Constructed: Square Footage: **Building Limit:** Deductible: \$2,500 \$5,000 \$1,000 80% Agreed Blanket Agreed for Property Coverage other than Buildings, please choose one of the following Coinsurance options: Amount Blanket Agreed Amount must be insured to 100% of the listed property value subject to a maximum total insured value of \$250,000 (not available in all states) Please provide requested limits for the following property that is to be insured: Business Personal Property: Shed/Gazebo: Streets And Roads: Fence/Walls: Playground Equipment: Signs: Trees/Shrubs: Other Paved Surfaces: Canopy/Awning: Walkways: Outdoor Equipment: Irrigation/Sprinkler Systems: Pool/Spa/Jacuzzi: Lights/Poles: Other: CAP PKG 04/10 Page 1 5 Of DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 **II. ELIGIBILITY CRITERIA** 1. Does the Association have any prior, pending, or existing Yes No bankruptcy in the past 5 years? 2. Has any insurance policy in the name of the Association ever been canceled or non-renewed? Yes No If "Yes", please explain: 3. Does the Association have an affiliation with, own or maintain any of the following: Water Treatment Facility? a) Golf course or country club? c) Airport/Airstrip or Sewage Treatment Facility? If "Yes", does the golf course or country club have a separate Yes No Yes No Yes No Yes No board or is it separately managed? b) 4. Does the builder/developer/sponsor maintain representation on the board? Yes No If "Yes", has control of the board been turned over to the Association? Yes No 5. Is there any ongoing conversion from apartments to condominiums? Yes No 6.

> Is membership in the Association voluntary? Yes No If there is any commercial cooking, does the kitchen meet all NFPA

96 requirements? N/A	Yes No
Professional Liability	
8. Does the Association have a negative fund balance? Yes No 9. Y	Within the last 24 months:
a) Has the Association completed a foreclosure sale against an owner?	circumstance or situation which may result in a claim against the applicant or any of its Directors, Officers, Trustees, Employees or Volunteers?
b. Have any board elections been challenged?	
c. Has the board initiated litigation for reasons other than the collection of dues/fees? 10. Within the last 5 years, has any inquiry complaint, notice of hearing, claim or suit been made against the applicant, or any person proposed for Insurance in the capacity of Director, Officer, Trustee, Employee or Volunteer of the applicant?	Yes No Yes No Yes No Yes No
11	Yes No
" Is any person(s) proposed for this Insurance aware of any fact,	
Are more than 50% of the units rented or leased? Yes No 12.	
General Liability	
13.	
14.	y losses/claims in the past 3 years? (If yes, attach loss runs) Yes No Is there any aluminum or knob & tube wiring? Yes No
Does the Association obtain certificates of General Liability and Worker's Compensation coverage from all contractors?	b) Is 100% of the wiring connected to functioning circuit breakers? Yes No
15. If the applicant is responsible for the insurance or maintenance of the residential buildings, please answer the following: Yes No	c) Are there functioning smoke detectors and fire extinguishers in all common areas? Yes No
d) If ove	er 3 stories, is there a fully enclosed, fire-protected stairwell? Yes No N/A e) If over 7 stories, is the building 100% sprinklered? Yes No
16.	N/A
	Are less than 50% of the units occupied? Yes No
17. Is the Association subject to an	ny age restrictive covenants? Yes No
18.	tion's representional facilities by non-unit owners or the public? Yes No.
	tion's recreational facilities by non-unit owners or the public? Yes No is or hold sporting competitions on premises? Yes No armed or unarmed security, manned or unmanned security gates,
Does the Association have an affiliation with, own, maintain or contract for any of the following:	surveillance cameras, motion sensors, and alarm systems in place to monitor or guard access to their property?
animal stables, bridges for vehicle use, day care, skiing/resort	If the Association is a Master Association, are all sub-associations
activities, fire/police/ambulance services, electricity generation or other utilities?	required to carry their own insurance? 25.
21.Does the Association own or maintain any undeveloped lots?22.	Yes No
Are there more than 5 undeveloped lots (not owned or maintained	Yes No Yes No Yes No
by the Association)? 23.	
Are there plans for construction or development of any	Yes No
undeveloped lots (if applicable)? 24.	
Does the Association have any preventive measures including 26.	
20.	Are more than 90% of the units rented or leased? Yes No

CAP PKG 04/10 Page 2 5 of 4 Does the Association own any automobiles or have a Business

goods or products? ^{C)} Does the Association require its employees to use their personal automobile to conduct the Association's business on a regular basis?²⁷ If there is a pool, does the following apply for each pool: completely If the applicant answered "Yes" to having Amenities in Section I, fenced with self-latching gate, depths clearly marked, rules clearly please answer the following that apply: posted, life safety equipment readily available, and no diving boards or slides? Yes No Yes No Yes No Yes No If "Yes", does the pool comply with the Virginia Graeme Baker Pool and Spa Safety Act? Yes No 28. If there is a fitness center, are rules posted requiring adult supervision and no professional services provided? Yes No 29. If there is a lake, pond or beach: a) Yes No Are there any bridges for vehicle use or dams? b) Is swimming permitted? Yes No N/A equipment present and the lake/beach is for use by the If "Yes", does the following apply: rules are clearly posted, Association members only? there are no diving boards or slides, there is life saving Yes No c) Does the Association own or rent any watercraft? Yes No 30. If there are any docks/slips/piers, please answer the following: d) a) Are there any commercial operations or docking of Yes No Yes No Yes No commercial vessels permitted? Yes No 31. If there are any association-owned common buildings (i.e. b) clubhouse), does the following apply: All wiring connected to Are any marina services provided (fueling, dry boat functioning circuit breakers, the entire building is protected by storage/moorage, repair, sales, etc.)? c) functioning smoke detectors, and no aluminum or knob & tube Is there a charge or fee for access to the pier? wiring? Yes No N/A Does the Association own or rent any watercraft? Property 32. Have there been any Property Losses in the past three years? (If yes, attach loss runs) Yes No 33. If you own the building and it is older than 10 years, please complete the following: Age of roof: Plumbing Updated (yr) Electrical Updated (yr) Heating Updated (yr) yrs. 34. Roof Type: Flat Wood Shake Shingle Slate Metal Tile Other 35. Functioning and operational fire extinguishers, smoke and/or heat detectors in all common areas? Yes No 36. 38. N/A If there is a restaurant, please answer the following: For any building built prior to 1978, 100% of the electrical wiring is connected to functioning and operational circuit breakers? 37. For any building built prior to 1978, no aluminum or knob & tube N/A wiring. Yes No Yes No N/A a) Is there commercial cooking on the premises? Yes No b) Describe Cooking equipment used: Grills Open Flame Oven Deep Fat Fryers Charcoal Grill c) What type of extinguishing system is functioning and operational? Wet Dry d) Is there a cleaning contract in force with an outside firm? Yes No **III. ADDITIONAL APPLICANT INFORMATION** Form of Business: Individual Corporation Partnership LLC Other What year did the business start?

PO Box 3368

98509-3368

Ifhabode@gmail.com 360-455-8324

 Email Address of primary contact: Phone:

 Inspection Contact Name:
 David CdeBaca - President

 Property Manager/Firm Name: Telephone/Email Address:

CAP PKG 04/10 Page 3.5 of

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Arizona Notice: Misrepresentations, omissions, concealment of facts and incorrect statements shall prevent recovery under the policy only if the misrepresentations, omissions, concealment of facts or incorrect statements are; fraudulent or material either to the acceptance of the risk, or to the hazard assumed by the insurer or the insurer in good faith would either not have issued the policy, or would not have issued a policy in as large an amount, or would not have provided coverage with respect to the hazard resulting in the loss, if the true facts had been made known to the insurer as required either by the application for the policy or otherwise.

Florida and Illinois Notice: I understand that there is no coverage for punitive damages assessed directly against an insured under Florida and Illinois law. However, I also understand that punitive damages that are not assessed directly against an insured, also known as "vicariously assessed punitive damages", are insurable under Florida and Illinois law. Therefore, if any Policy is issued to the Applicant as a result of this Application and such Policy provides coverage for punitive damages, I understand and acknowledge that the coverage for Claims brought in the State of Florida and Illinois is limited to "vicariously assessed punitive damages" and that there is no coverage for directly assessed punitive damages.

Minnesota Notice: Authorization or agreement to bind the insurance may be withdrawn or modified only based on changes to the information contained in this application prior to the effective date of the insurance applied for that may render inaccurate, untrue or incomplete any statement made with a minimum of 10 days notice given to the insured prior to the effective date of cancellation when the contract has been in effect for less than 90 days or is being canceled for nonpayment of premium.

Missouri Notice: Pursuant to Section IV, Paragraph R., some Defense Costs are within the Limit of Liability. Any Defense Costs paid under this coverage will reduce the available Limits of Insurance and may exhaust them completely. Defense Costs means reasonable and necessary legal fees and expenses incurred by the Company, or by any attorney designated by the Company to defend any Insured, resulting from the investigation, adjustment, defense and appeal of a Claim. Defense Costs includes other fees, costs, costs of attachment or similar bonds (without any obligation on the part of the Company to apply for or furnish such bonds), but does not include salaries, wages, overhead or benefits expenses of any Insured.

New York Disclosure Notice: This policy is written on a claims made basis and shall provide no coverage for claims arising out of incidents, occurrences or alleged wrongful acts that took place prior to the retroactive date, if any, stated on the declarations. This policy shall cover only those claims made against an insured while the policy remains in effect and all coverage under the policy ceases upon termination of the policy except for the automatic extended reporting period coverage unless the insured purchases additional extend reporting period coverage. The policy includes and automatic 60 day extended claims reporting period following the termination of this policy. The Insured may purchase for an additional premium an additional extended reporting period of 12 months, 24 months or 36 months following the termination of this policy. Potential coverage gaps may arise upon the expiration for this extended reporting period. During the first several years of a claims-made relationship, claims-made rates are comparatively lower than occurrence rates. The insured can expect substantial annual premium increases independent overall rate increases until the claims-made relationship has matured.

Utah Notice: I understand that Punitive Damages are not insurable in the state of Utah. There will be no coverage afforded for Punitive Damages for any Claim brought in the State of Utah. Any coverage for Punitive Damages will only apply if a Claim is filed in a state which allows punitive or exemplary damages to be insurable. This may apply if a Claim is brought in another state by a subsidiary or additional location(s) of the Named Insured, outside the state of Utah, for which coverage is sought under the same policy.

Virginia Notice: You have an option to purchase a separate Limit of Liability for the extension period, policy common conditions I. If you do not elect this option, the Limit of Liability for the extension period shall be part of and not in addition to the limit specified in the declarations. Statements in the application shall be deemed the insured's representations. A statement made in the application or in any affidavit made before or after a loss under the policy will not be deemed material or invalidate coverage unless it is clearly proven that such statement was material to the risk when assumed and was untrue.

Colorado Fraud Statement: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida Fraud Statement: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Florida Statement: You are agreeing to place coverage in the surplus lines market. Superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

Kentucky Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto

commits a fraudulent insurance act, which is a crime

Maine and Washington Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

New Jersey Fraud Statement: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

New York Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Ohio Fraud Statement: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Oklahoma Fraud Statement: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

CAP PKG 04/10 Page 4 5 of

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Tennessee and Virginia Fraud Statement: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Fraud Statement (All Other States): Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

If your state requires that we have information regarding your Authorized Retail Agent or Broker, please provide below. Retail Agency Name: Main Agency Phone Number: Agency Mailing Address: City: 9 Lake Bellevue Dr, Suite 114 State: Zip:

Bellevue WA 98005

The signer of this application acknowleges and understands that the information provided in this Application is material to the Insurer's decision to provide the requested insurance and is relied on by the Insurer in providing such insurance. The signer of this application represents that the information provided in this Application is true and correct in all matters. The signer of this Application further represents that any changes in matters inquired about in this Application occurring prior to the effective date of coverage, which render the information provided herein untrue, incorrect or inaccurate in any way will be reported to the Insurer immediately in writing. The Insurer reserves the right to modify or withdraw any quote or binder issued if such changes are material to the insurability or premium charged, based on the Insurer's underwriting guides. The Insurer is hereby authorized, but not required, to make any investigation and inquiry in connection with the information, statements and disclosures provided in this Application. The decision of the Insurer not to make or to limit any investigation or inquiry shall not be deemed a waiver of any rights by the Insurer and shall not stop the Insurer from relying on any statement in this Application in the event the Policy is issued. It is agreed that this Application shall be the basis of the contract should a Policy be issued and it will be attached and become part of the Policy.

President

Applicant's Signature: Title: Date: Officer of the Board or Property Manager

CAP PKG 04/10 Page 5 5 of

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act ("the Act"), as amended, you have a right to purchase insurance coverage for losses arising out of acts of terrorism. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that any coverage for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States reimburses 80% of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

Coverage for "insured losses", as defined in the Act, is subject to the coverage terms, conditions, amounts and limits in this policy applicable to losses arising from events other than acts of terrorism.

You should know that the Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement, as well as insurers' liability, for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion in any one calendar year, your coverage may be reduced.

You should also know that, under federal law, you are not required to purchase coverage for losses caused by certified acts of terrorism.

REJECTION OR SELECTION OF TERRORISM INSURANCE COVERAGE

Note: In the states of California, Georgia, Hawaii, Illinois, Iowa, Maine, North Carolina, Oregon, Washington, West Virginia and Wisconsin, our terrorism exclusion makes an exception for fire losses resulting from an Act of Terrorism. In these states, if you decline to purchase Terrorism Coverage, you still have coverage for fire losses resulting from an Act of Terrorism.

Please "X" one of the boxes below and return this notice to the Company.

I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.

I elect to purchase coverage for certified acts of Terrorism for a premium of \$_____.

David CdeBaca

Applicant Name (Print)

Named Insured

Date

Authorized Signature

Lake Forest Home Association

TRIADN (12-20) Page 1 of 1

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Privacy Notice At Collection

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, https://www.usli.com/privacy-policy/.

DocuSign Envelope ID:

Privacy Notice 11/21 – USLI page 1 of 1

USLI.COM 888-523-5545

Associations

The all-in-one policy designed for homeowner, townhome and residential condominium associations including directors and officers liability, employment practices liability, general liability, property insurance, umbrella policy, and crime policy.

Why does your Community Association need to purchase all of these coverages?

- Community associations are sued by their employees, committee members and volunteers
- Over 60 percent of the claims against these associations are related to non-monetary issues
- Community associations have an annual budget that is often less than the average cost to defend a claim closed by litigation -Single dwelling homeowner associations require general liability and property coverage for common areas - Many condominium and homeowner associations are looking for additional liability limits offered through our umbrella policy

Why choose USLI's Community Association Package:

- Maximize efficiency: One application, quote, underwriter, policy, renewal, and carrier for all claims, with one concurrent effective date

The following are important coverages to have in your policy. Check to make sure you have all of these features:

Manager/Management company automatically named as an additional insured	
Defense outside the limit of liability	
Non-monetary and breach of contract coverage offered under director's and officers liability	
No exclusion for libel, slander, or defamation under directors and officers liability	
Mental anguish and emotional distress included in the general liability definition of bodily injury	
No general liability deductible	
Property with an outdoor enhancement endorsement	
Umbrella policy excess of general liability, hired and non-owned auto and directors and officers liability	

Why choose to be insured with USLI?

- One of only 20 A++ rated insurance groups in the United States by A.M. Best.
- A proud member of the Berkshire Hathaway Group, recently voted the #1 most admired Property & Casualty Company in the world (Fortune Magazine).

Insure your financial well-being with a stable company that will be there to pay your claim.

This document does not amend, extend or alter the coverage afforded by the policy. For a complete understanding of any insurance you purchase, you must first read your policy, declaration page and any endorsements and discuss them with your agent. A sample policy is available from your agent. Your actual policy conditions may be amended by endorsement or affected by state laws.

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Community Association NP POS 7/17

USLI.COM 888-523-5545

Why You Need Community Association Directors and Officers Professional Liability Insurance

Why is coverage necessary?

- As a member of the board of your community association, your personal assets are vulnerable based on your decisions and actions enforcing the governing documents, even long after you have left the board
- Over 60% of the claims against the board of a community association are related to non-monetary issues, can generate six-figure defense costs and persist over many years
- Community associations have an annual budget that is often less than the average cost to defend a claim closed by litigation often beyond the ability of the board to assess members to cover!

What coverage are we offering?

Manager/Management company automatically named as an additional insured	
Defense outside the limit of liability	
Non-monetary and breach of contract coverage offered under directors and officers liability	
No exclusion for libel, slander or defamation under directors and officers liability	
Mental anguish and emotional distress included in the general liability definition of bodily injury	
No general liability deductible	
Property with an outdoor enhancement endorsement	
Umbrella policy excess of general liability, hired and non-owned auto and directors and officers liability	
Policyholders have access to many services through our Business Resource Center that will assist in growing and protecting their businesses	
A.M. Best rated A ⁺⁺ carrier and a proud member of the Berkshire Hathaway Group	

This document does not amend, extend or alter the coverage afforded by the policy. For a complete understanding of any insurance you purchase, you must first read your policy, declaration page and any endorsements and discuss them with your agent. A sample policy is available from your agent. Your actual policy conditions may be amended by endorsement or affected by state laws.

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Community Association - Why Buy - POS 6/22



As a policyholder through USLI, you have access to many free and discounted services that will assist you in operating and growing your business through the Business Resource Center (BRC). Consider the following services and associated cost savings when deciding where to place your insurance!

Cybersecurity

- Complimentary access to eRiskHub®, a data breach prevention and response resource that will help you understand your exposure to a data breach and the importance of a response plan
- Best practice checklists for securing personal and payment card information, plus tips on protecting against cyberattacks

Background Checks and Screenings

• Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)

• Best practices for performing a background check • Discounted tenant and drug screenings and motor vehicle reports (MVRs)

Disaster Preparation and Recovery

• Guidance on preparing for natural disasters and serve weather

- Business planning and recovery toolkit
- Sample incident reporting form and disaster loan assistance resource

Human Resources

- Free PeopleSystems' human resources consultation helpline to be used for personnel issues, including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- Online library with information, forms and articles pertaining to human resources
- Discounted HR and payroll management system by PrimePoint
- Discounted employee workplace assessment by Talogy, previously PSI Caliper
- Resources for recruiting, interviewing and terminating employees

Marketing

Property Safety

- Free workplace safety and occupational health consultation
- Tips for building maintenance, fire prevention and water safety

Industry-specific Resources For:

- Health, wellness and sports
- Hospitality, food and beverage
- Nonprofits and social services
- Residential and rental properties
- Retail and professional services
- Youth services and child care
- and more!



Try our cost-savings calculator

to see how much you could save! and video editing programs

ONLINE LEARNING

Need help training your new employees?

Properly preparing new employees can be time-consuming and expensive. We offer a variety of free and discounted industry-specific training and certifications to help you save time and money!

Topics include:

- Food manager and handler safety
- Liquor safety
- CPR, first aid and concussion
- Sexual harassment
- Leadership and professional development

• Resources marketing via email and social media,

• Discount stationery, signage, promotional items and gifts

• Free and discounted stock imagery sites and photo

For a full list of vendors, discounts and fresources, visit bizresourcecenter.com.

BRC-Quote and Policy 12/23 DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

Robinson Insurance Agency (Bellevue, WA) 9 Lake Bellevue Dr Ste 114 Bellevue, WA 98005 ryan1.krobinson2@farmersagency.com Phone: (425) 828-2669

Enclosed you will find an annual admitted Commercial Umbrella Coverage for Lake Forest Home Assoc Inc. The quote number is CUP024A7760 Version 3 .

Section I- Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.

Section II- Schedule of Underlying Coverages

Section III- Lists the required coverage forms, notices, endorsements and exclusions.

Section IV- Offers optional coverages that are available to the applicant but are not currently included in the quote. Section V- Provides the Direct Bill Payment Description.



capturing leads and building surveys

In addition we have included some materials that will assist in the evaluation of this offer of

coverage. A pre-filled application that includes the information you have already provided.

Endorsement TRIADN Disclosure Notice of Terrorism Insurance Coverage for your review.

A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

The carrier will send you an invoice based on the terms reflected in this quote. Payment is due to the carrier.

Payment options available to you are:

- 1. Send the invoice remittance slip with payment to the lockbox address on their invoice
- 2. Pay online at <<u>www.usli.com/ezpay></u>.
- 3. Pay by phone (automated system available 24/7) at 866-632-2003

Your invoice will include a unique number that will allow you to register your policy at <u><www.usli.com/ezpay></u>. By registering your policy, you will have access to additional information as well as the option to set-up recurring payments. Recurring payments are a great way to minimize the possibility of your policy being cancelled or not renewed because payment was not received.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely, Ryan Robinson Robinson Insurance Agency (Bellevue, WA)

Cover letter DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

WA) 9 Lake Bellevue Dr Ste 114 Bellevue, WA 98005 ryan1.krobinson2@farmersagency.com Phone: (425) 828-2669

CUP024A7760 Version 3

Quote is valid until 6/23/2024		Please bind effective:		
Robinson Insurance		Insured ema		
To: Lake Forest Home Assoc Inc Insured phone number:	Confirm optional coverages: Do not include any optional coverage Include the following optional covera (Taxes & Fees may apply to optional	iges I premium if	purchased) Option 1 - Terrorism Coverage This policy is eligible to be Direct Billed. Note: a \$5.00 installment fee will apply to each installment after the first - please select one of the following:	
From: Ryan Robinson	n: Ryan Robinson		IENTS - Premium must be over \$675 See the last page of this quote for Payment Plan Descriptions	
ryan1.krobinson2@farmersagenc	y.com	NOTE: If the	Direct Bill Option is selected, the Company	
checked - Select a Pal/ment Plan)		will invoice the insured. Do not bill or collect the down payment. All taxes, surcharges and fees (except installment fees) will be billed in full with the first installment.		
SINGLE PAYMENT				
TWO PAYMENTS - Premium mus	st be over \$400 THREE			

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMMERCIAL UMBRELLA COVERAGE POLICY INFORMATION

Carrier: United States Liability Insurance Company Status: Admitted

A.M. Best Rating: A++ (Superior) - XII

Term Quoted: Annual

LIMIT OPTIONS PREMIUM FEES AMOUNT DUE \$1,000,000 \$1,055 \$110.00 \$1,165.00

ADDITIONAL COSTS

Wholesaler Broker Fee \$110 FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS - VISIT

BIZRESOURCECENTER.COM FOR DETAILS

We have provided a pre-filled application that would assist in satisfying these requirements.

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

Underwriter receipt, review and acceptance of the fully completed application. We may modify the terms and/or premiums quoted or reseind this quote if: 1) the information provided in the completed application is different from the original submission, 2) a web search, Please contact us with any questions regarding the terminology used or the coverages provided.

if completed at our discretion, reveals unsatisfactory results or indications of ineligible factors, or 3) there is a significant change in the **Read the

quote carefully, it may not match the coverages requested**

risk from the date it was quoted.

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974

CUP024A7760 Version 3

rescind this quote if: 1) the information provided in the completed application is different from the original submission, 2) a web search, if completed at our discretion, reveals unsatisfactory results or indications of ineligible factors, or 3) there is a significant change in the risk from the date it was quoted.

A. Prior To Bind Requirements:

Confirmation that all of the following are True:

The association does not sponsor any athletic/swimming teams and sporting competitions are not held on

premises Association does not own, maintain or have an affiliation with an airport/airstrip or sewage treatment facility.

There are no past, pending or planned foreclosure and/or bankruptcy or judgment for unpaid taxes against the named insured or any officer, partner, member or owner, individually within the past five years.

Insurance coverage has not been cancelled or non-renewed in the past three years (not applicable in MO).

Association does not own, maintain, contract with or have an affiliation with any of the following: animal stables, bridges for vehicle use, day cares, skiing/resort activities, fire/police/ambulance services, waste management, electricity generation or other utilities The association's bylaws do not include an age restriction for membership.

No plans or ongoing construction or development of homes, units, common facilities or undeveloped lots

Functioning and operational smoke and/or heat detectors are in all residential structures and clubhouses

The written bylaws require all property owners to become members of the association.

This is not a master association that oversees other sub-associations.

B. Items Required Within 21 days of the inception of coverage:

No 21 Day Subject to Notes

C. Underwriting Notes:

Please be advised, we have prepared this quote of higher limits of liability based on the information provided for a primary quote. It is valid only over the United States Liability Insurance Group quote provided, however we can consider adjusting it to be valid over other carriers. In addition, we can possibly include other lines of coverage in the underlying such as Automobile Liability and Employer's Liability.

Please contact me if you wish to discuss further.

Thank you for the opportunity to quote this risk and for using Instant Quote.

II. SCHEDULE OF UNDERLYING COVERAGES

Commercial General Liability Limits of Liability

Carrier: Mount Vernon Fire Insurance Company Each Occurrence: \$1,000,000

Page 1 of 3

AM Best Rating: A++g Products/Completed	Included
Operations Aggregate:	

General Aggregate: \$2,000,000 Personal & Advertising Injury: \$1,000,000

Automobile Liability Not Covered

Employers Liability Not Covered

Professional Liability Not Covered

Non Profit Liability Limits of Liability

Carrier: Mount Vernon Fire Insurance Company Combined Single Limit: \$1,000,000 AM Best Rating: A++g

Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the coverages requested**

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974 CUP024A7760 Version 3

III. REQUIRED FORMS & ENDORSEMENTS

CUP (07/05) Commercial Umbrella Policy IUL100 (07/06) Expected or Intended Injury Exclusion CUP113 (05/05) Automobile Liability Exclusion IUL117 (09/10) Nuclear Energy Liability Exclusion (Broad Form) CUP116 (11/07) Coverage A - Excess Following Form (07/19) Policy Jacket Jacket Professional Liability Coverage Endorsement

CUP117 (11/07) Extended Reporting Period Endorsement L 838 PFAS (03/23) Exclusion - Perfluoroalkyl And Polyfluoroalkyl Substances (PFAS) CUP542 WA (12/20) Exclusion of War and Certified Acts of L-549 (12/07) Absolute Professional Liability Exclusion Terrorism

CUP549 (09/16) Exclusion - Unmanned Aircraft L-646WA (07/10) Washington State Amendatory Endorsement IL0146 (08/10) Washington Common Policy Conditions TRIADN (12/20) Disclosure Notice of Terrorism Insurance Coverage

IV. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote. Coverage Rate

Option 1 Terrorism Coverage See notes for rate information

Important Information

Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act, is available for 2.0000% of the total applicable premium for this risk. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE – Notice of Terrorism Exclusion. When making your decision whether to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount and limits in this policy applicable to losses arising from events other than acts of terrorism.

Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages

V. DIRECT BILL PAYMENT PLAN DESCRIPTIONS

One Year Payment Plan Descriptions:

SINGLE PAYMENT TWO PAYMENTS

THREE PAYMENTS

- The entire premium is invoiced immediately and is due 20 days

Page 2 of 3

after it is invoiced.

- 50% of the premium is invoiced immediately and is due 20 days after it is invoiced; the balance is invoiced 150 days after inception.

- 40% of the premium is invoiced immediately and is due 20 days

An installment fee as noted on page 1 of this quote applies to each installment after the first.

Please contact us with any questions regarding the terminology used or the coverages provided. **Read the quote carefully, it may not match the coverages requested**

DocuSign Envelope ID: 6F179463-029F-418A-A2DC-5DD885491974



How To BIND Your USLI Kraft Lake Non-Admitted Policy With Tapco

Attached is your requested proposal from USLI. Please read it carefully.

When you are ready to bind, follow these simple instructions:

- Read the quote and all "Prior To Bind Requirements" carefully to verify that your risk is eligible. (If there is any discrepancy, *call USLI at 844-244-1121* in order to re-quote)
- · Complete and sign the application and, if applicable, the Terrorism form
- Make sure you:
 - $\circ~$ Check the desired limits on the proposal
 - Designate on the proposal the desired effective date (must be current or future date) •
- E-mail scanned images of the completed and signed application and proposal to
 - KraftLakeBinder@gotapco.com or fax to 336-584-8880
- Include "BIND USLI:" in the subject line of your email along with the applicant's name

Tapco is required to contact USLI in order to bind coverage and must have items in order to do so. Once USLI verifies the quote is bound, our office will contact you with binder confirmation and an invoice.

You will need to obtain payment information from the insured to pay Tapco once bound by USLI. Tapco will send you a link to a secure payment portal for payment by credit card (Visa, Mastercard or Discover) or ACH check.

after it is invoiced; 30% is invoiced 120 days after inception; the balance is invoiced 210 days after inception.

Page 3 of 3

• Please note that once you request a binder, your agency is responsible for the premium payment. You should secure payment from your client when requesting binding since you are responsible for payment Tapco once bound.

Once the company binds the quote, a minimum earned premium will apply (unless the policy is fully earned), along with the policy fee and applicable state taxes. Once bound, the policy cannot be flat cancelled.

Thank you for the opportunity to provide a quote for this client.

SPECIAL NOTE:

If your agency has never placed business with Tapco, please contact Tapco's New Broker Department at NewBrokers@gotapco.com. Your agency MUST be activated with Tapco before any binder request can be made.



Residential Community Association - HOA Quote Summary

Date Quoted: 4/29/2024 New Busn: 5/15/2022 Ren Busn: 7/1/2022 Eff Date: 04/29/2024 (New Business) Washington

Prepared for Prepared byLola Vazquez (VAFVVB) LAKE FORECT HOMEOWNERS ASSOCIATION Agent: Melanie Bakala (2F0E) 8643 OXFORD DR SE 360-426-2428 LACEY, WA 98503 melanie.bakala.rskb@statefarm.com

Location Count: 1 Aux Structure Count: 6 Hurricane/Wind Risk Value: Low

Policy Coverages Amount Premium Coverage A - Building(s) \$100,000 \$681.00 Coverage L - Business Liability (Per Occurrence) \$2,000,000 \$4,254.00 Coverage L - Business Liability (Annual Aggregate) \$4,000,000 Coverage M - Medical Expenses (Increased Limits) \$10,000 \$318.00 Basic Premium \$5,253.00

Optional Coverages Amount Premium Directors and Officers Liability Liability Limit: \$2,000,000 \$1,484.00 Blanket Insurance \$1.00 Inland Marine: Computer Property MF-D \$10,000 Optional Coverages \$1,485.00

Total Annual Premium* (Premium is Estimated) \$6,738.00 Monthly Premium (Service Charge Not Included) \$561.50

* Total Policy Premium estimate may NOT include all or any State/County/City taxes or surcharges.

These quotes only contain a general description of available coverages and limits, with a premium estimate. These estimates are subject to eligibility and Agent binding authority. They are not a contract, binder, or coverage recommendation. All coverages are subject to the terms, provisions, exclusions, and conditions in the policy and its endorsements. If information used for rating changes or different rates are effective at the time of policy issuance, this rate quote may be revised.

Deductibles Amount Basic Policy Deductible \$1,000 Inland Marine: Computer Property MF-D \$500

Credits and Charges Applied Adjustment(s)



Location 1: 8643 OXFORD DR SE 98503 County: Thurston (34) Zone: 12 Subzone: 02 **Stat Class:**873 Description: HOA: 31+ Units Units: 419 Aux Structures: 6

Auxiliary Structure Information

 Attached to Location: 8643 OXFORD DR SE Stat Class:874 Dock , Retaining wall, Warve, Bulkheads. BPP Amount: \$0

 Construction: Frame Age of Structure: 10 - 14 (2012)
 Sprinklers: No Structure Amount: \$45,000

 Prot Devices: None
 Sprinklers: No Structure Amount: \$45,000

 Attached to Location:
 8643 OXFORD DR SE Stat Class:
 874 Recreation Bldg BPP Amount:
 \$0

 Construction:
 Frame Age of Structure:
 10 - 14 (2012)
 Sprinklers:
 No Structure Amount:
 \$20,000

 Prot Devices:
 None

 Attached to Location: 8643 OXFORD DR SE Stat Class:874 Monuments BPP Amount: \$0

 Construction: Fire Resistive Age of Structure: 10 - 14 (2012)
 Sprinklers: No Structure Amount: \$10,000

 Prot Devices: None
 Sprinklers: No Structure Amount: \$10,000

 Attached to Location:
 8643 OXFORD DR SE Stat Class:
 874 Monuments BPP Amount:
 \$0

 Construction:
 Fire Resistive Age of Structure:
 10 - 14 (2012)
 Sprinklers:
 No Structure Amount:
 \$10,000

 Prot Devices:
 None

Attached to Location: 8643 OXFORD DR SE Stat Class:874 Playground BPP Amount: \$0 Construction: Fire Resistive Age of Structure: 10 - 14 (2012) Sprinklers: No Structure Amount: \$5,000 Prot Devices: None

 Attached to Location: 8643 OXFORD DR SE Stat Class:874 Fences BPP Amount: \$0

 Construction: Fire Resistive Age of Structure: 10 - 14 (2012)
 Sprinklers: No Structure Amount: \$10,000

 Prot Devices: None
 Sprinklers: No Structure Amount: \$10,000

Addendum H

6/3/24, 10:58 PM

<lfhabod@gmail.com>

Mon, Apr 29, 2024 at 9:48 AM

Gmail

Fwd: Signs

Lake Forest Home Association

<lfhabod@gmail.com> To: Lola Vazguez <lola.vazquez.vafvvb@statefarm.com>

Good morning,

Lake Forest Home Association

I just wanted to be certain on one thing you and I discussed over the phone about our Volunteer Maintenance Committee and their duties. We have over 20 acres of Greenbelt in our community as well as the private waterfront park. Over the years, the members of this committee do groundskeeping to some of this area in an effort to reduce costs to the association to have this maintained by a third party. Each committee member signs a "Release of Liability" waiver prior to joining. Also, each committee member must be over 18 years of age in order to participate. On the phone we discussed these tasks performed by the committee and you indicated it not being areas of concern regarding the insurance policy for the association:

• Lawn mowers are used to mow grass areas.

• Power tool use (hedgers, leaf blowers, edgers, chainsaws ect...) to trim/process fallen branches and overgrowth at ground level.

 The Association and its Volunteer Maintenance Committee does NOT participate in the felling of trees or climbing to trim existing trees. These actions are handled by a third-party licensed contractor.

As new board members, we want to be certain that this new policy will be one that best serves our community and establishes a transparent relationship with our insurance provider and the Association's Board.

Please let me know if there is anything that needs to be addressed on this before we continue.

Page 2 of 2

Gmail - Fwd: Signs

Also, I will be sending over a few more photos of the park area (covered picnic area, park fence/gate, and dock). Please review these and let me know if we are sufficient in our coverages for these items or if we need to increase in any of these areas.

Thank you,

David CdeBaca

LFHA President

[Quoted text hidden]

https://mail .google.com/mail/u/1/?ik⁼b16e680e43&view⁼pt&search⁼all&permmsgid⁼msg-a: r49212093278055367 40&simpl⁼msg-a:r49212093278055... 1 /1 Addendum H





Addendum H

7-

