



Nationwide®

FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

BILL INFO

Account Number: ACP 3200695012

BILLING INFORMATION

Agency Number: 30758	Billing Method: Direct Bill
Agency Name: GOLDENWEST INSURANCE SERVICES	Down Payment Amount: \$1,472.50
Producer: 112 - LYNETTE DURRANT	Payment Plan: Monthly 12-Pay
	Flex Check: No

ACCOUNT SUMMARY

Line of Business	Company	Premium
Businessowners	Nationwide General Insurance Company	\$8,835.00
Total Account Premium:		\$8,835.00

Notice for all states not otherwise specified

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.

By signing below, the applicant affirms as an authorized representative of the Named Insured that he/she has read, understands, and agrees to abide by the terms and conditions expressed in this application for insurance. The applicant is further aware that there are other terms and conditions in the insurance policies he/she will receive and is expected to observe them. If there any questions about those terms and conditions, contact the agent.

The applicant certifies that reasonable inquiry has been made to obtain the answers to questions on this application. He/She certifies that the answers are true, correct and complete to the best of his/her knowledge.

Brenda Veresh

Brenda Veresh (Feb 18, 2022 12:53 MST)

Applicant's Signature

Feb 18, 2022

Date

Braden Gray
Braden Gray (Feb 18, 2022 12:53 MST)

Feb 18, 2022



Contact us with questions: GOLDENWEST INSURANCE SERVICES, (888) 853-8992,
MSMITH@GWCU.ORG



Nationwide®

FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Practice Area

Assigned: No Practice Area

Override: None

NAMED INSUREDS

ADDRESSES

FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION
Entity Type: Association
5300 ADAMS AVE PKWY STE 8
OGDEN, UT 84405-6955
Work Phone: (801) 786-8094
Address Type:

5300 ADAMS AVE PKWY STE 8
OGDEN, UT 84405-6955
Work Phone: (801) 786-8094
Address Type:

488 E 200 S
CLEARFIELD, UT 84015-1000
Work Phone: (801) 786-8094
Address Type:

ACCOUNT CONTACTS

Insured Contact: FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION
Work Phone: (801) 786-8094

Producer Contact: LYNETTE DURRANT
Work Phone: (888) 853-8992

APPLICANT PROFILE

Has any policy been cancelled or non-renewed for loss history,
non-compliance with policy conditions, ineligible exposures,
non-compliance with loss control, or material misrepresentation within the
past three years? ☐ Yes ☒ No

Is the applicant's total annual payroll less than \$500,000? ☒ Yes ☐ No

Does the applicant own less than \$1.5 million in combined Building and
Business Personal Property values? ☐ Yes ☒ No

Has the applicant operated without insurance coverage for 6 months or
more since the business started? ☐ Yes ☒ No

Does the applicant own fewer than 5 vehicles (not including trailers)? ☒ Yes ☐ No

NAICS Code: 813990



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

APPLICANT PROFILE

Nature of Business:

Condominiums--Residential--(Associati
on Risk Only)--Condominiums,
Cooperatives or Time-Shares

LOSS HISTORY

Total number of losses

0



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PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

OPERATIONS

Please select all operations that apply:

- | | | |
|----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Office | <input type="checkbox"/> Wholesale | <input type="checkbox"/> Food Service |
| <input type="checkbox"/> Service | <input type="checkbox"/> Auto Service | <input checked="" type="checkbox"/> Habitational |
| <input type="checkbox"/> Retail | | |

POLICYWIDE CHARACTERISTICS

- | | | |
|--|---|--|
| Are accepted control methods actively used? This includes: Periodic audits by CPA or public accountant; Countersignature of checks over \$500; Reconciliation of bank accounts by someone not authorized to deposit or withdraw. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are any of the buildings more than 50% vacant? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Do builders, developers or real estate agents have financial interest in the applicant or representatives on the board? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Do any directors or officers have knowledge or information of any negligent act, error, omission, or breach of duty which might give rise to claims against them? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Are certified audits obtained at least every three years? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do employees use their personal auto for the delivery of food or other goods? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Is there an active contract with a Property Management Company? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 001

County: DAVIS

Premises Address: 488 E 200 S
CLEARFIELD, UT 84015-1000

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING A

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanket Limit	\$10,000	\$7,932,800	\$5,008.00
Replacement Cost			
Business Personal Property		Not Provided	



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ASSOCIATION****COMMERCIAL INSURANCE APPLICATION****PREMIER BUSINESSOWNERS**

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 001

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	\$139.00
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 001

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/001 Total Premium				\$978.00

ADDITIONAL INFORMATION

Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No

Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No

Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012 Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 002

County: DAVIS

Premises Address: 488 E 200 S
CLEARFIELD, UT 84015-1000

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING B

Protection Class: 4

GENERAL INFORMATION

Program: Habitational
Class Code: 11142
Class Description: Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type: Building Owner - Lessors risk
Original Year Built: 1997
Occupancy Recertified Year: 1997
Construction Type: Frame
Percentage of Masonry Veneer: 20%
Number of Stories: 3
Total Area (Square feet): 5,480
Building Code Effectiveness Grade: 6
BCEG Individually Graded: No
Premise Used Entirely for Storage: No
Automatic Sprinkler System: No
Burglar Alarm: No
Central Station Fire Alarm: No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 002

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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PREMIER BUSINESSOWNERS

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Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 002

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/002 Total Premium				\$978.00

ADDITIONAL INFORMATION

Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No

Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No

Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012 Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 003

County: DAVIS

Premises Address: 268 S 500 E
CLEARFIELD, UT 84015-4052

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING C

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 003

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 003

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/003 Total Premium				\$978.00

ADDITIONAL INFORMATION

Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No

Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No

Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

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PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 004

County: DAVIS

Premises Address: 268 S 500 E
CLEARFIELD, UT 84015-4052

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING D

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

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Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 004

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
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Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 004

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/004 Total Premium				\$978.00

ADDITIONAL INFORMATION

Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No

Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No

Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**



Contact us with questions: GOLDENWEST INSURANCE SERVICES, (888) 853-8992,
MSMITH@GWCU.ORG



Nationwide®

FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012 Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 005

County: DAVIS

Premises Address: 248 S 500 E
CLEARFIELD, UT 84015-4051

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING E

Protection Class: 4

GENERAL INFORMATION

Program: Habitational
Class Code: 11142
Class Description: Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type: Building Owner - Lessors risk
Original Year Built: 1997
Occupancy Recertified Year: 1997
Construction Type: Frame
Percentage of Masonry Veneer: 20%
Number of Stories: 3
Total Area (Square feet): 5,480
Building Code Effectiveness Grade: 6
BCEG Individually Graded: No
Premise Used Entirely for Storage: No
Automatic Sprinkler System: No
Burglar Alarm: No
Central Station Fire Alarm: No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 005

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 005

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/005 Total Premium				\$978.00

ADDITIONAL INFORMATION

- Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No
- Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No
- Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / **Building:** 006

County: DAVIS

Premises Address: 248 S 500 E
CLEARFIELD, UT 84015-4051

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING F

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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**Nationwide®****FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION**

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 006

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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**Nationwide®****FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION****COMMERCIAL INSURANCE APPLICATION****PREMIER BUSINESSOWNERS**

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 006

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/006 Total Premium				\$978.00

ADDITIONAL INFORMATIONDoes the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ NoDoes your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ NoAre any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No**PROTECTIVE SAFEGUARDS**

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**

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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012 Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 007

County: DAVIS

Premises Address: 288 S 500 E
CLEARFIELD, UT 84015-4000

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING G

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 007

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 007

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/007 Total Premium				\$978.00

ADDITIONAL INFORMATION

Does the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ No

Does your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ No

Are any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No

PROTECTIVE SAFEGUARDS

Based on information you and/or your agent provided, this premises has Protective Safeguards as identified below. A Protective Safeguards endorsement will be added to your policy based on this information, and you risk the loss of insurance if you fail to maintain, or knew or should have known of any suspension or impairment of any Protective Safeguard(s) identified below. Note that Protective Safeguard(s) must be: in place, operational, and maintained in good working order and you must notify us immediately (at Commercial Lines Service Center by calling (866) 322-3214) in the event of any known or planned disablement of any Protective Safeguard(s).

APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 008

County: DAVIS

Premises Address: 288 S 500 E
CLEARFIELD, UT 84015-4000

Territory: 135

ISO Territory: 701

Building Unique ID: BUILDING H

Protection Class: 4

GENERAL INFORMATION

Program:	Habitational
Class Code:	11142
Class Description:	Condominium Association - Multiple Buildings - 1-4 Unit Buildings (No Mercantile or Office)
Occupancy Type:	Building Owner - Lessors risk
Original Year Built:	1997
Occupancy Recertified Year:	1997
Construction Type:	Frame
Percentage of Masonry Veneer:	20%
Number of Stories:	3
Total Area (Square feet):	5,480
Building Code Effectiveness Grade:	6
BCEG Individually Graded:	No
Premise Used Entirely for Storage:	No
Automatic Sprinkler System:	No
Burglar Alarm:	No
Central Station Fire Alarm:	No

WE PROVIDE INSURANCE ONLY FOR THOSE COVERAGES INDICATED BY A LIMIT OR BY "INCLUDED".
Property Coverage is subject to a **\$10,000 Deductible**, unless otherwise stated.

Coverages	Deductible	Limit	Premium
Building - Blanketed	\$10,000	Included	Included
Replacement Cost			
Business Personal Property		Not Provided	



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FALCON RIDGE ESTATES HOMEOWNERS ASSOCIATION

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 008

Coverages	Deductible	Limit	Premium
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Additional Coverages - The Coverage Form includes other Additional Coverages not shown

Business Income		Included	Included
Actual Loss Sustained		3 Months	
Waiting Period		0 Hours	
Ordinary Payroll		60 Days	
Extended Period Of Indemnity		60 Days	
Equipment Breakdown	No Separate Deductible	Included	\$24.00
Back Up Of Sewer And Drain Water			\$161.00
Per Building Limit		\$25,000	
Back Up Aggregate Limit		\$25,000	

Optional Coverages - Other frequently purchased coverage options

Employee Dishonesty Per Occurrence		\$150,000	Included
Ordinance Or Law Coverage			
Loss To The Undamaged Portion Of The Building (Coverage Equal To Building Limit)		Not Provided	
Demolition Cost And Broadened Increased Costs Of Construction		Not Provided	
Ordinance Or Law Broadened Coverage		\$250,000	\$128.00
Windstorm/Hail Deductible	No Separate Deductible		

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Accounts Receivable	\$25,000		\$25,000	Included
Valuable Papers and Records (At the Described Premises)	\$25,000		\$25,000	Included
Forgery Or Alteration	\$10,000		\$10,000	Included



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ASSOCIATION****COMMERCIAL INSURANCE APPLICATION****PREMIER BUSINESSOWNERS**

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Premises: 001 / Building: 008

Optional Increased Limits	Included Limit	Additional Limit	Total Limit	Premium
Money And Securities				
Inside the Premises	\$10,000		\$10,000	Included
Outside the Premises (Limited)	\$10,000		\$10,000	Included
Outdoor Signs	\$2,500		\$2,500	Included
Outdoor Trees, Shrubs, Plants And Lawns	\$10,000		\$10,000	Included
Business Personal Property Off Premises				
Property Away From Premises	\$15,000		\$15,000	Included
Property Away From Premises - Transit	\$15,000		\$15,000	Included
Electronic Data	\$10,000		\$10,000	Included
Interruption Of Computer Operations	\$10,000		\$10,000	Included
Computer Fraud And Funds Transfer	\$10,000		\$10,000	Included
Premises 001/008 Total Premium				\$978.00

ADDITIONAL INFORMATIONDoes the insured's building contain a wood burning stove or wood burning fireplace? ☐ Yes ☒ NoDoes your location have any lakes, ponds, rivers, piers or streams, (other than a retention pond required by local ordinance or decorative water features)? ☐ Yes ☒ NoAre any of the buildings occupied by a full cooking restaurant or a bar? ☐ Yes ☒ No**PROTECTIVE SAFEGUARDS**

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APPLICABLE PROTECTIVE SAFEGUARDS: **NOT APPLICABLE**

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**Nationwide®****FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION****COMMERCIAL INSURANCE APPLICATION****PREMIER BUSINESSOWNERS**

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Limits Of Insurance		Limit	Premium
Each Occurrence Limit of Insurance	Per Occurrence	\$2,000,000	\$312.00
Medical Payments Sub Limit	Per Person	\$10,000	Included
Tenants Property Damage Legal Liability Sublimit	Per Covered Loss	\$300,000	Included
Personal And Advertising Injury	Per Person Or Organization	\$2,000,000	Included
Products-Completed Operations Aggregate Limit	All Occurrences	\$4,000,000	Included
General Aggregate (Other Than Products-Completed Operations)	All Occurrences	\$4,000,000	Included

Liability Deductible	Deductible
None	

Optional Coverages	Deductible	Limit	Premium
Hired Auto Liability		Included	\$52.00
Non-Owned Auto Liability		Included	\$52.00
Directors & Officers With Non-Monetary Relief	Per Wrongful Act	\$2,000,000	\$219.00
	Aggregate Limit	\$2,000,000	
Retroactive Date	03-01-2022		
Employment Practices Liability Insurance			\$299.00
Each Claim & Aggregate Limits - Damages and Defense Expense		\$250,000	
Deductible Amount	\$5,000		
Retroactive Date	03-01-2022		
Limitation Of Coverage To Designated Premises			



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Nationwide®

**FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION**

COMMERCIAL INSURANCE APPLICATION

PREMIER BUSINESSOWNERS

Policy Number: ACP BP013200695012

Policy Period: From 03-01-2022 To 03-01-2023

Expense Constant Premium

\$250.00



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**FALCON RIDGE ESTATES HOMEOWNERS
ASSOCIATION**

COMMERCIAL INSURANCE APPLICATION

ACCOUNT SUMMARY

Account Number: ACP 3200695012

FOR INTERNAL USE ONLY

ACCOUNT SUMMARY

Account Origin: ClearQuote

Serviced By: Agency

Current Policy Number(s): ACP BP013200695012

PRICING MODIFICATIONS SUMMARY

Line of Business	Pricing Modification	Credit	Debit	Final Premium
Businessowners	Individual Risk Premium Modification	Yes		\$8,835.00
Total Account Premium:				\$8,835.00



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MSMITH@GWCU.ORG



I have reviewed the coverages offered to me by Goldenwest Insurance Services. I know that there are higher limits and additional coverages available. I am choosing to accept the limits and coverages outlined in the quote.

BV
BV

Initials

If Applicable

I am aware that my insurance coverage has certain limitations. These limits include but are not limited to Earthquake, Flood, Landslide, Animals, Mold and Fungus coverages. I understand that it is my duty to review my policy and understand the exclusions and limitations.

BV
BV

Initials

Rates quoted reflect the rates in effect as of the date of this application and are subject to revision. The Insurance Carriers reserves the right to accept, reject or modify this application after investigation, review of the application and review of all other underwriting information. The undersigned represents and warrants that he/she has applied for the insurance coverage(s) as set forth in the attached quote pursuant to an application entered into the insured's computer records, and hereby confirms that he/she supplied information so entered and warrants and represents that all such information is true and correct.

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 and subjects the person to criminal and civil penalties.

Brenda Veresh

Brenda Veresh (Feb 18, 2022 12:53 MST)

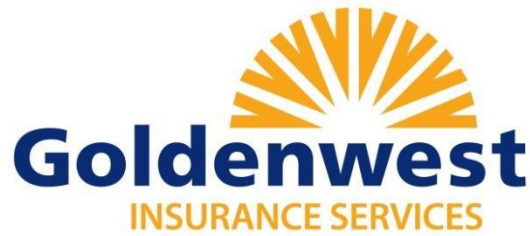
Named Insured's Signature

Feb 18, 2022

Date

Brenda Veresh

Named Insured's Printed Name



MEMBER ACKNOWLEDGEMENT

The undersigned member of Goldenwest Federal Credit Union acknowledges receipt of these disclosures related to insurance services provided by Goldenwest Insurance Services:

Insurance products are not deposits of Goldenwest Credit Union and are not protected by the NCUA. They are not an obligation of nor guaranteed by the Credit Union, and may be subject to risk. Any insurance required as a condition of an extension of credit by the Credit Union need not be purchased from the Credit Union and may be purchased from an agent or insurance company of the member's choice. Goldenwest Insurance Services is a division of Goldenwest Federal Credit Union. Goldenwest Credit Union finds insurance companies that will issue insurance policies to eligible members. Insurance policies are issued by and are the responsibility of the insurance company named in the policies and not by Goldenwest Credit Union.

Dated this _____ day of Feb 18, 2022, 2022

Brenda Veresh

Brenda Veresh (Feb 18, 2022 12:53 MST)

Signature

Brenda Veresh

Print Name

GOLDENWEST INSURANCE SERVICES USE ONLY