

EFFECTIVE DATE: 07/07/2011

Policy Number: BOP1087251	Prior Policy: 1087251
Billing Type: DIRECT BILL	
Coverage Is Provided In PEERLESS INDEMNITY INSURANCE COMPANY	
Named Insured and Mailing Address: WOLF PARK CONDOMINIUM ASSOCIATION C/O SEQUEL MANAGEMENT 2 KNIGHTS BRIDGE DRIVE NASHUA NH 03063	Agent: BROWN & BROWN OF NH INC 309 DWH PO BOX 1510 MERRIMACK NH 03054 Agent Code: 8110668 Agent Phone: (603)-424-9901

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

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

POLICY PERIOD: From: 07/07/2011 To: 07/07/2012 at 12:01 AM Standard Time at your mailing address shown above.

FORM OF BUSINESS: ASSOCIATION

BUSINESS DESCRIPTION: CONDOMINIUM-ASSOCIATION-RESIDENTIAL

DESCRIPTION OF PREMISES

Prem. No.	Bldg. No.	Location Occupancy, Construction/Fire Protection
001	001	2 KNIGHTS BRIDGE DRIVE HILLSBOROUGH NASHUA NH 03063 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME
001	002	2 KNIGHTS BRIDGE DRIVE HILLSBOROUGH NASHUA NH 03063 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME
001	003	2 KNIGHTS BRIDGE DRIVE HILLSBOROUGH NASHUA NH 03063 CONDOMINIUM-ASSOCIATION-RESIDENTIAL FRAME

RENEWAL

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

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

Table with columns: Prem. No., Bldg. No., Coverage, Limits of Insurance. Includes entry for BUILDING (REPLACEMENT COST) with a limit of \$2,921,360.

DEDUCTIBLE: \$ 5,000 In Any One Occurrence
\$ 500 Optional Coverage Deductible (Section I, D. Deductibles 2.)

AUTOMATIC INCREASE: Building Coverage Shall Be Increased 6% Annually.
Personal Property Coverage Shall Be Increased Annually.

MORTGAGE HOLDERS: NONE

PROPERTY OPTIONAL COVERAGES

Coverage COMMERCIAL PROTECTOR COVERAGE EXTENSION PLUS Additional Limits of Insurance INCLUDED

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

Table with columns: Prem. No., Bldg. No., Coverage, Additional Limits of Insurance. Includes entry for EMPLOYEE DISHONESTY with a limit of \$10,000.

LIABILITY AND MEDICAL PAYMENTS COVERAGE

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

Table with columns: Coverage, Limits of Insurance. Includes entries for LIABILITY AND MEDICAL EXPENSES, MEDICAL EXPENSES, DAMAGE TO PREMISES RENTED TO YOU, and AGGREGATE LIMITS.

LIABILITY OPTIONAL COVERAGES

Table with columns: Coverage, Limits of Insurance. Includes entries for HIRED AUTO LIABILITY and NON-OWNED AUTO LIABILITY, both marked as INCLUDED.

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY:

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

Table with columns: Form Number, Description. Includes entry for 17-357 - 0108 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM.

44-98 (06/04)

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

17-366	- 1202	WAR LIABILITY EXCLUSION
17-98	- 0604	EXCLUSION - ASBESTOS
44-105	- 0604	QUICK REFERENCE - COMMERCIAL PROTECTOR COVERAGE FORM
44-115	- 0604	COMMERCIAL PROTECTOR COVERAGE FORM
44-146	- 0604	COMMERCIAL PROTECTOR EXTENSION PLUS ENDORSEMENT
44-148	- 0604	COMMERCIAL PROTECTOR LIABILITY EXTENSION ENDORSEMENT
44-175	- 0108	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
44-190	- 0108	EXCLUSION OF PUNITIVE DAMAGES OF CERT ACTS OF TERROR
44-192	- 0604	WAR LIABILITY EXCLUSION
44-200	- 0204	EXCLUSION - SILICA
44-207	- 0305	EXCLUSION-VIOLATION OF STATUTES
44-222	- 0108	IDENTITY THEFT EXPENSE COVERAGE
44-223	- 0808	WATER EXCLUSION ENDORSEMENT
44-234	- 0111	LIMITED CYBER LIAB AMENDMENT OF COV B-PERS & ADV INJURY
44-235	- 1010	ADDITIONAL COVERAGES & EXTENSION OF COVERAGE DEDUCTIBLE
44-50	- 0604	HIRED AUTO AND NON-OWNED AUTO LIABILITY
BP0113	- 0108	NEW HAMPSHIRE CHANGES
BP0122	- 0702	NH BUSINESSOWNERS STANDARD FIRE POLICY PROVISION
BP0417	- 0702	EMPLOYMENT-RELATED PRACTICES EXCLUSION
BP0501	- 0702	CALCULATION OF PREMIUM
BP0576	- 1102	LIMITED FUNGI OR BACTERIA COVERAGE
BP0577	- 1102	FUNGI OR BACTERIA EXCLUSION
BP0601	- 0107	EXCLUSION OF LOSS DUE TO BACTERIA
BP1701	- 0702	CONDOMINIUM ASSOCIATION COVERAGE
17-59	- 0694	DECLARATIONS EXTENSION

PREMIUM

Terrorism Risk Insurance Act of 2002 and 2005 Coverage	\$	0.00
Total Policy Premium	\$	3,344.00

Countersigned: By

By

[Handwritten Signature]

Authorized Representative

7/2011

Date

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Date Issued: 05/24/2011

Policy Number: BOP 1087251

Coverage Is Provided In PEERLESS INDEMNITY INSURANCE COMPANY

Named Insured:

WOLF PARK CONDOMINIUM
ASSOCIATION

Agent:

BROWN & BROWN OF NH INC

Agent Code: 8110668

Agent Phone: (603)-424-9901

**COMMERCIAL PROTECTOR SUPPLEMENTAL DECLARATIONS
EMPLOYMENT PRACTICES LIABILITY COVERAGE PART**

THIS INSURANCE PROVIDES CLAIMS MADE AND REPORTED COVERAGE. DEFENSE COSTS APPLY AGAINST THE LIMITS OF INSURANCE AND ARE SUBJECT TO THE DEDUCTIBLE. READ YOUR COVERAGE FORM CAREFULLY.

LIMITS OF INSURANCE

a.

LIMITS OF INSURANCE

Aggregate Limit \$ 100,000
Each "Claim" Limit \$ 100,000

DEDUCTIBLE

<u>Amount</u>	<u>Basis of Deductible</u>
\$5,000	Each "Claim"

RETROACTIVE DATE

Retroactive Date: 07/07/09

FORMS AND ENDORSEMENTS

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

Form Number	Description
17-341 - 0604	NEW HAMPSHIRE CHANGES
17-357 - 0108	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
17-363 - 0108	EXCLUSION OF PUNITIVE DAMAGES OF CERT. ACTS OF TERROR
17-404 - 0107	EMPLOYMENT PRACTICES LIABILITY COVERAGE FORM
17-405 - 0106	QUICK REFERENCE EMPLOYMENT PRACTICES LIABILITY COV PART
17-468 - 1107	NEW HAMPSHIRE CHANGES - CIVIL UNION
IL0017 - 1198	COMMON POLICY CONDITIONS

Forming a part of

Policy Number: BOP 1087251	
Coverage Is Provided In PEERLESS INDEMNITY INSURANCE COMPANY	
Named Insured: WOLF PARK CONDOMINIUM ASSOCIATION	Agent: BROWN & BROWN OF NH INC Agent Code: 8110668 Agent Phone: (603)-424-9901

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

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

LIMIT OF INSURANCE

Aggregate Limit \$ 2,000,000

RETROACTIVE DATE

This insurance does not apply to "loss" arising from "wrongful acts" that occur before the Retroactive Date, if any, shown here:
07/07/2009
(Enter Date or "None" if no Retroactive Date applies)

FORMS AND ENDORSEMENTS

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

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

Date Issued: 05/24/2011