

STATE FARM GENERAL INSURANCE COMPANY  
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS  
  
Po Box 2915  
Bloomington IL 61702-2915

Named Insured

AT3 M-12-0404-FB60 F V

MAMMOTH ESTATES HOMEOWNERS  
ASSOCIATION  
ATTN BUTNER HOA SERVICES  
PO BOX 5038  
MAMMOTH LAKES CA 93546-5038

RENEWAL DECLARATIONS

Policy Number	90-WG-8933-7	
Policy Period	Effective Date	Expiration Date
12 Months	DEC 10 2025	DEC 10 2026
The policy period begins and ends at 12:01 am standard time at the premises location.		

Agent and Mailing Address

DAVE EASTERBY  
PO BOX 2369  
MAMMOTH LAKES CA 93546-2369

PHONE: (760) 934-7575

Residential Community Association Policy

**Automatic Renewal** - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: ASSOCIATION/COOPERATIVE

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

POLICY PREMIUM \$ 80,532.00

Discounts Applied:  
Renewal Year  
Multiple Unit  
Claim Record

Prepared  
SEP 30 2025  
CMP-4000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

SECTION I - PROPERTY BLANKET

Coverage A - Buildings  
Coverage B - Business Personal Property

Limit of Insurance\*  
\$ 41,837,900  
\$ 280,900

Location Number	Location of Described Premises
001	UNITS 101-108 270221 CANYON BLVD MAMMOTH LAKES CA 93546
002	UNITS 109-112 270221 CANYON BLVD MAMMOTH LAKES CA 93546
003	UNITS 113-116 270221 CANYON BLVD MAMMOTH LAKES CA 93546
004	UNITS 124-127 270221 CANYON BLVD MAMMOTH LAKES CA 93546
005	UNITS 117-120 270221 CANYON BLVD MAMMOTH LAKES CA 93546
006	UNITS 121-123 270221 CANYON BLVD MAMMOTH LAKES CA 93546
007	UNITS 128-130 270221 CANYON BLVD MAMMOTH LAKES CA 93546
008	UNITS 131-135 270221 CANYON BLVD MAMMOTH LAKES CA 93546

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

Location Number	Location of Described Premises
009	UNITS 136-139 270221 CANYON BLVD MAMMOTH LAKES CA 93546
010	UNITS 140-143 270221 CANYON BLVD MAMMOTH LAKES CA 93546
011	UNITS 200-203 270221 CANYON BLVD MAMMOTH LAKES CA 93546
012	UNITS 204-207 270221 CANYON BLVD MAMMOTH LAKES CA 93546
013	UNITS 208-213 270221 CANYON BLVD MAMMOTH LAKES CA 93546
014	UNITS 214-216 270221 CANYON BLVD MAMMOTH LAKES CA 93546
015	UNITS 217-221 270221 CANYON BLVD MAMMOTH LAKES CA 93546
016	UNITS 222-224 270221 CANYON BLVD MAMMOTH LAKES CA 93546
017	UNITS 225-228 270221 CANYON BLVD MAMMOTH LAKES CA 93546
018	UNITS 229-232 270221 CANYON BLVD MAMMOTH LAKES CA 93546

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

Location Number	Location of Described Premises
019	UNITS 233-234 270221 CANYON BLVD MAMMOTH LAKES CA 93546

AUXILIARY STRUCTURES

Location Number	Description
001A	Recreation Building
001B	Pool
001C	Driveway, sidewalk, etc.
001D	SPA
001E	Fence, walls, etc.

\* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 265.0

SECTION I - DEDUCTIBLES

Basic Deductible \$10,000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

Special Deductibles:

Money and Securities	\$250	Employee Dishonesty	\$250
Equipment Breakdown	\$2,500		

Other deductibles may apply - refer to policy.

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

COVERAGE	LIMIT OF INSURANCE
Collapse	Included
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit
Debris Removal	25% of covered loss
Equipment Breakdown	Included
Fire Department Service Charge	\$5,000
Fire Extinguisher Systems Recharge Expense	\$5,000
Glass Expenses	Included
Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	\$100,000
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	\$250,000
Ordinance Or Law - Equipment Coverage	Included
Preservation Of Property	30 Days

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH COMPLEX

The coverages and corresponding limits shown below apply separately to each complex as described in the policy.

COVERAGE	LIMIT OF INSURANCE
Accounts Receivable	
On Premises	\$50,000
Off Premises	\$15,000
Arson Reward	\$5,000
Forgery Or Alteration	\$10,000
Money And Securities (Off Premises)	\$5,000
Money And Securities (On Premises)	\$10,000
Money Orders And Counterfeit Money	\$1,000
Outdoor Property	\$5,000
Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Personal Property Off Premises	\$15,000
Pollutant Clean Up And Removal	\$10,000
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Signs	\$4,000
Valuable Papers And Records	
On Premises	\$10,000
Off Premises	\$5,000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

COVERAGE	LIMIT OF INSURANCE
Back-Up of Sewer or Drain	Included
Employee Dishonesty	\$25,000
Loss Of Income And Extra Expense	Actual Loss Sustained - 12 Months

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$1,000,000
Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$300,000
Directors And Officers Liability	\$2,000,000
AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$2,000,000
General Aggregate	\$2,000,000
Directors and Officers Aggregate	\$2,000,000

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

CMP-4101	Businessowners Coverage Form
CMP-4260.2	*Amendatory Endorsement - CA
CMP-4587	*Exclusion Silica
FE-6999.3	*Terrorism Insurance Cov Notice
CMP-4814	Directors & Officers Liability
CMP-4828	Extra Replacement Cost
CMP-4864	Building Ordinance or Law Cov
CMP-4696	Residential Community Assoc
CMP-4746.1	Hired Auto Liability
CMP-4710	Employee Dishonesty
CMP-4508	Money and Securities
CMP-4705.2	Loss of Income & Extra Expense
FD-6007	Inland Marine Attach Dec
	* New Form Attached

This policy is issued by the State Farm General Insurance Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm General Insurance Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

*Murielle Mancias*  
Secretary

*Daniel J. Krane*  
President

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

IMPORTANT NOTICE:

California law requires us to provide you with information for filing complaints with the State Insurance Department regarding the coverage and service provided under this policy.

Your agent's name and contact information are provided on the front of this document. Another option is to reach out by mail or phone directly to:

State Farm® Executive Customer Service  
PO Box 2320  
Bloomington IL 61702  
Phone # 1-800-STATEFARM (1-800-782-8332)

Department of Insurance complaints should be filed only after you and State Farm or your agent or other company representative have failed to reach a satisfactory agreement on a problem.

California Department of Insurance  
Consumer Services Division  
300 South Spring Street  
Los Angeles, CA 90013  
Phone # 1-800-927-HELP (4357) or visit [www.insurance.ca.gov/01-consumers](http://www.insurance.ca.gov/01-consumers)

NOTICE TO POLICYHOLDER:

For a comprehensive description of coverages and forms, please refer to your policy.  
Policy changes requested before the "Date Prepared", which appear on this notice, are effective on the Renewal Date of this policy unless otherwise indicated by a separate endorsement, binder, or amended declarations. Any coverage forms attached to this notice are also effective on the Renewal Date of this policy.  
Policy changes requested after the "Date Prepared" will be sent to you as an amended declarations or as an endorsement to your policy. Billing for any additional premium for such changes will be mailed at a later date.  
If, during the past year, you've acquired any valuable property items, made any improvements to insured property, or have any questions about your insurance coverage, contact your State Farm agent.  
Please keep this with your policy.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for MAMMOTH ESTATES HOMEOWNERS  
Policy Number 90-WG-8933-7

Your coverage amount....

It is up to you to choose the coverage and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your structure. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc.® using information you provide about your structure. We can accept the type of estimate you choose as long as it provides a reasonable level of detail about your structure. State Farm® does not guarantee that any estimate will be the actual future cost to rebuild your structure. Higher limits are available at higher premiums. Lower limits are also available, as long as the amount of coverage meets our underwriting requirements. We encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your structure.

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STATE FARM GENERAL INSURANCE COMPANY  
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS  
  
Po Box 2915  
Bloomington IL 61702-2915  
**Named Insured**

M-12-0404-FB60 F V

MAMMOTH ESTATES HOMEOWNERS  
ASSOCIATION  
ATTN BUTNER HOA SERVICES  
PO BOX 5038  
MAMMOTH LAKES CA 93546-5038

INLAND MARINE ATTACHING DECLARATIONS

Policy Number	90-WG-8933-7	
Policy Period	Effective Date	Expiration Date
12 Months	DEC 10 2025	DEC 10 2026
The policy period begins and ends at 12:01 am standard time at the premises location.		

ATTACHING INLAND MARINE

**Automatic Renewal** - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

**Annual Policy Premium** Included

The above Premium Amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

Forms, Options, and Endorsements

FE-8739	Inland Marine Conditions
FE-6271	Amendatory Endorsement
FE-8745	Inland Marine Computer Prop

See Reverse for Schedule Page with Limits

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SEP 30 2025  
FD-6007

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ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

ENDORSEMENT NUMBER	COVERAGE	LIMIT OF INSURANCE	DEDUCTIBLE AMOUNT	ANNUAL PREMIUM
FE-8745	Inland Marine Computer Prop	\$ 10,000	\$ 500	Included
	Loss of Income and Extra Expense	\$ 10,000		Included

OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY

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SEP 30 2025  
FD-6007  
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**IMPORTANT NOTICE**  
**Regarding Changes to Your Policy**

**CMP-4260.2 AMENDATORY ENDORSEMENT (California)** is added to your State Farm® policy and replaces **CMP-4260.1 AMENDATORY ENDORSEMENT (California)** and **CMP-4261 AMENDATORY ENDORSEMENT (California)**.

Editorial changes have been made to the following provisions:

- **SECTION I – CONDITIONS, Mortgageholders**
- **SECTION I AND SECTION II – COMMON POLICY CONDITIONS, Cancellation**
- **SECTION I AND SECTION II – COMMON POLICY CONDITIONS, When We Do Not Renew**

The endorsement follows this notice. Please read the endorsement and place it with your policy. If you have any questions, please contact your State Farm agent.

***DISCLAIMER:** This notice only provides a general summary of changes to your State Farm policy. This notice is not a statement of contract. This notice does not change, modify, or invalidate the provisions, terms, or conditions as set forth in your State Farm policy booklet, the most recently issued declarations, and any applicable endorsements.*

**AMENDATORY ENDORSEMENT (California)**

This endorsement modifies insurance provided under the following:  
BUSINESSOWNERS COVERAGE FORM

1. **SECTION I – CONDITIONS** is amended as follows:
  - a. Paragraph 2.b.(6) and (7) under **Mortgageholders** are replaced by the following:
    - (6) If we cancel this policy, we will provide notice to the mortgageholder at least:
      - (a) 10 days before the effective date of cancellation if we cancel for your nonpayment of premium; or
      - (b) 30 days before the effective date of cancellation if we cancel for any other reason.
    - (7) If we elect not to renew this policy, we will provide notice to the mortgageholder at least 10 days before the expiration date of this policy.
  - b. Paragraph 1.e.(4)(a)ii.2 of **Loss Payment** under **Property Loss Conditions** is replaced by the following:

Within 36 months after we pay the actual cash value if the loss or damage related to a state of emergency as described in Section 8558 of the Government Code;
2. **SECTION I – EXCLUSIONS** is amended as follows:
  - a. Paragraph 2.f. **Dishonesty** is replaced by the following:
    - f. **Dishonesty**
      - (1) Dishonest or criminal acts by you, anyone else with an interest in the property, or any of your or their partners, “members”, officers, “managers”, employees, directors, trustees, or authorized representatives, whether acting alone or in collusion with each other or with any other party; or
      - (2) Theft by any person to whom you entrust the property for any purpose, whether acting alone or in collusion with any other party.

This exclusion applies whether or not an act occurs during your normal hours of operation.

This exclusion does not apply to acts of destruction by your employees; but theft by your employees is not covered.

With respect to accounts receivable and “valuable papers and records”, this exclusion does not apply to carriers for hire.

- b. Under Paragraph i. **Fungi, Virus Or Bacteria**, the reference to **23. Fungi, Wet Or Dry Rot** is changed to **24. Fungi, Wet Or Dry Rot**.
- 3. Paragraph **24. d. under Fungi, Wet Or Dry Rot And Bacteria** of **SECTION I – EXTENSIONS OF COVERAGE** does not apply.
- 4. **SECTION II – LIABILITY** is amended as follows:
  - a. When used in this policy, the words “his or her” are replaced with “that person’s”.
  - b. **Section II – Exclusions** is amended as follows:
    - (1) Paragraphs **17.b.** and **17.c.** under **Personal And Advertising Injury** are replaced by the following:
      - b. Arising out of oral or written publication of material, in any manner, if done by or at the direction of the insured with knowledge of its falsity;
      - c. Arising out of oral or written publication of material, in any manner, whose first publication took place before the beginning of the policy period;
    - c. Under **SECTION II – MEDICAL EXPENSES**, Paragraph **1.d.(2)** under **Coverage M – Medical Expenses** is replaced by the following:
      - (2) Executes authorization to allow us to obtain copies of medical bills, medical records, and any other information we deem necessary to substantiate the claim.  
Such authorizations must not:
        - (a) Restrict us from performing our business functions in:
          - i. Obtaining records, bills, information, and data; or
          - ii. Using or retaining records, bills, information, and data collected or received by us;
        - (b) Require us to violate federal or state laws or regulations;
        - (c) Prevent us from fulfilling our data reporting and data retention obligations to insurance regulators; or
        - (d) Prevent us from disclosing claim information and data:
          - i. To enable performance of our business functions;
          - ii. To meet our reporting obligations to insurance regulators;
          - iii. To meet our reporting obligations to insurance data consolidators; and
          - iv. As otherwise permitted by law.If the holder of the information refuses to provide it to us despite the authorization, then at our request the person making claim or his or her legal representative must obtain the information and promptly provide it to us; and
    - d. **SECTION II – DEFINITIONS**, is amended as follows:
      - (1) Paragraphs **18.f.** and **18.g** are replaced by the following:
        - f. The use of another’s advertising idea in your “advertisement”; or
        - g. Infringing upon another’s copyright, trade dress or slogan in your “advertisement”.
      - (2) Paragraph **18.h.** is deleted.
  - 5. **SECTION I AND SECTION II – COMMON POLICY CONDITIONS** is amended as follows:
    - a. Paragraph **1.** is replaced by the following:
      - 1. **Cancellation**
        - a. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.

**b. All Policies In Effect For 60 Days Or Less**

If this policy has been in effect for 60 days or less, and is not a renewal of a policy we have previously issued, we may cancel this policy by providing to the first Named Insured and to the producer of record, advance notice of cancellation, stating the reason for cancellation, at least:

- (1) 10 days before the effective date of cancellation if we cancel for a reason listed in Paragraph c.(1)(a) or c.(1)(b) below regardless of how long this policy has been in effect; or
- (2) 30 days before the effective date of cancellation if we cancel for any other reason.

**c. All Policies In Effect For More Than 60 Days**

- (1) If this policy has been in effect for more than 60 days, or is a renewal of a policy we issued, we may cancel this policy only upon the occurrence, after the effective date of the policy, of one or more of the following:

- (a) Nonpayment of premium, including payment due on a prior policy we issued and due during the current policy term covering the same risks.
  - (b) Discovery of fraud or material misrepresentation by:
    - i. Any insured or his or her representative in obtaining this insurance; or
    - ii. You or your representative in pursuing a claim under this policy.
  - (c) A judgment by a court or an administrative tribunal that you have violated a California or Federal law, having as one of its necessary elements an act which materially increases any of the risks insured against.
  - (d) Discovery of willful or grossly negligent acts or omissions, or of any violations of state laws or regulations establishing safety standards, by you or your representative, which materially increase any of the risks insured against.
  - (e) Failure by you or your representative to implement reasonable loss control requirements, agreed to by you as a condition of policy issuance, or which were conditions precedent to our use of a particular rate or rating plan, if that failure materially increases any of the risks insured against.
  - (f) A determination by the Commissioner of Insurance that the:
    - i. Loss of, or changes in, our reinsurance covering all or part of the risk would threaten our financial integrity or solvency; or
    - ii. Continuation of the policy coverage would:
      - 1) Place us in violation of California law or the laws of the state where we are domiciled; or
      - 2) Threaten our solvency.
  - (g) A change by you or your representative in the activities or property of the commercial or industrial enterprise, which results in a materially added, increased or changed risk, unless the added, increased or changed risk is included in the policy.
- (2) We will provide advance notice of cancellation, stating the reason for cancellation, to the first Named Insured and to the producer of record, at least:
    - (a) 10 days before the effective date of cancellation if we cancel for a reason listed in Paragraph c.(1)(a) or c.(1)(b) above; or
    - (b) 30 days before the effective date of cancellation if we cancel for any other reason listed in Paragraph c.(1) above.

d. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.

e. If this policy is cancelled, we will send the first Named Insured any premium refund due. The refund will be pro rata. The cancellation will be effective even if we have not made or offered a refund.

f. If this policy insured more than one named insured:

- (1) The first named insured may effect cancellation for the account of all insureds; and

- (2) Our notice of cancellation to the first named insured is notice to all insureds. Payment of unearned premium to the first named insured is for the account of all interests therein.

**g. Residential Property**

This provision applies to coverage on real property which is used predominantly for residential purposes and consisting of not more than four dwelling units, and to coverage on tenants' household personal property in a residential unit. If such coverage has been in effect for 60 days or less and is not a renewal of coverage we previously issued, we may cancel this coverage for any reason, except that we may not cancel this policy solely because:

- (1) Corrosive soil conditions exist on the premises; or
- (2) The first Named Insured has:
  - (a) Accepted an offer of earthquake coverage; or
  - (b) Cancelled or did not renew a policy issued by the California Earthquake Authority (CEA) that included an earthquake policy premium surcharge.

However, we shall cancel this policy if the first Named Insured has accepted a new or renewal policy issued by the CEA that includes an earthquake policy premium surcharge but fails to pay the earthquake policy premium surcharge authorized by the CEA.

- b. Paragraph 13. is replaced by the following:

**13. When We Do Not Renew**

- a. Subject to the provisions of Paragraphs b. and c. below, if we elect not to renew this policy, we will provide notice stating the reason for nonrenewal to the first Named Insured shown in the Declarations and to the producer of record, at least 60 days, but not more than 120 days, before the expiration or anniversary date.

**b. Residential Property**

This provision applies to coverage on real property used predominantly for residential purposes and consisting of not more than four dwelling units, and to coverage on tenants' household property contained in a residential unit.

We may elect not to renew such coverage for any reason, except that we will not refuse to renew such coverage solely because:

- (1) The first Named Insured has accepted an offer of earthquake coverage.

However, the following applies only to insurers who are associate participating insurers as established by Cal. Ins. Code Section 10089.16. We may elect not to renew such coverage after the first Named Insured has accepted an offer of earthquake coverage, if one or more of the following reasons applies:

- (a) The nonrenewal is based on sound underwriting principles that relate to the coverages provided by this policy and that are consistent with the approved rating plan and related documents filed with the Department of Insurance as required by existing law;
- (b) The Commissioner of Insurance finds that the exposure to potential losses will threaten our solvency or place us in a hazardous condition. A hazardous condition includes, but is not limited to, a condition in which we make claims payments for losses resulting from an earthquake that occurred within the preceding two years and that required a reduction in policyholder surplus of at least 25% for payment of those claims; or
- (c) We have:
  - i. Lost or experienced a substantial reduction in the availability or scope of reinsurance coverage; or
  - ii. Experienced a substantial increase in the premium charged for reinsurance coverage of our residential property insurance policies; and



the Commissioner has approved a plan for the nonrenewals that is fair and equitable, and that is responsive to the changes in our reinsurance position.

- (2) The first Named Insured has cancelled or did not renew a policy, issued by the California Earthquake Authority that included an earthquake policy premium surcharge.
- (3) Corrosive soil conditions exist on the premises.
- c. We are not required to provide notice of nonrenewal in the following situations:
  - (1) If the transfer or renewal of a policy, without any changes in terms, conditions, or rates, is between us and a member of our insurance group.
  - (2) If the policy has been extended for 90 days or less, provided that notice has been given in accordance with Paragraph a.
  - (3) If you have obtained replacement coverage, or if the first Named Insured has agreed, in writing, within 60 days of the termination of the policy, to obtain that coverage.
  - (4) If the policy is for a period of no more than 60 days and you are notified at the time of issuance that it will not be renewed.
  - (5) If the first Named Insured requests a change in the terms or conditions or risks covered by the policy within 60 days of the end of the policy period.
  - (6) If we have made a written offer to the first Named Insured, in accordance with the timeframes shown in Paragraph a., to renew the policy under changed terms or conditions or at an increased premium rate, when the increase exceeds 25%.

6. The following are added to **SECTION I AND SECTION II – COMMON POLICY CONDITIONS:**

**Our Rights Regarding Claim Information**

- a. We will collect, receive, obtain, use, and retain all the items described in Paragraph b.(1) below and use and retain the information described in Paragraph b.(3)(b) below, in accordance with applicable federal and state laws and regulations and consistent with the performance of our business functions.
- b. Subject to Paragraph a. above, we will not be restricted in or prohibited from:
  - (1) Collecting, receiving, or obtaining records, receipts, invoices, medical bills, medical records, wage information, salary information, employment information, data, and any other information;
  - (2) Using any of the items described in Paragraph b.(1) above; or
  - (3) Retaining:
    - (a) Any of the items in Paragraph b.(1) above; or
    - (b) Any other information we have in our possession as a result of our processing, handling, or otherwise resolving claims submitted under this policy.
- c. We may disclose any of the items in Paragraph b.(1) above and any of the information described in Paragraph b.(3)(b) above:
  - (1) To enable performance of our business functions;
  - (2) To meet our reporting obligations to insurance regulators;
  - (3) To meet our reporting obligations to insurance data consolidators;
  - (4) To meet other obligations required by law; and
  - (5) As otherwise permitted by law.
- d. Our rights under Paragraphs a., b., and c. above shall not be impaired by any:
  - (1) Authorization related to any claim submitted under this policy; or
  - (2) Act or omission of an insured or a legal representative acting on an insured's behalf.

All other policy provisions apply.

CMP-4260.2

**IMPORTANT NOTICE**  
**Regarding Changes to Your Policy**

**CMP-4587 EXCLUSION – SILICA OR SILICA-RELATED DUST** is added to your State Farm® policy.  
The following changes to your policy are effective with this policy term:

- **SECTION II – LIABILITY, Section II – Exclusions**
  - **Silica or Silica-Related Dust:** There is no coverage for “bodily injury”, “property damage” and “personal and advertising injury” losses related to “silica” or “silica-related dust”, including any loss, cost or expense arising out of abating, testing for, monitoring, cleaning up, or other related activities, of “silica” or “silica-related dust”, by any insured or by any other person or entity.
- **SECTION II – DEFINITIONS:** “Silica” or “Silica-related dust” is added.

The endorsement follows this notice. Please read the endorsement and place it with your policy. If you have any questions, please contact your State Farm agent.

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*DISCLAIMER: This notice only provides a general summary of changes to your State Farm policy. This notice is not a statement of contract. This notice does not change, modify, or invalidate the provisions, terms, or conditions as set forth in your State Farm policy booklet, the most recently issued declarations, and any applicable endorsements.*

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**EXCLUSION – SILICA OR SILICA-RELATED DUST**

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This endorsement modifies insurance provided under the following:  
BUSINESSOWNERS COVERAGE FORM

- A. The following is added to Section II – Exclusions:**
- Silica or Silica-Related Dust**
1. “Bodily injury”, “property damage” or “personal and advertising injury” arising, in whole or in part, out of the actual, alleged, threatened, or suspected inhalation of, ingestion, absorption, consumption, discharge, dispersal, seepage, migration, release or escape of, contact with, exposure to, existence of, or presence of, “silica” or “silica-related dust”.
  2. Any loss, cost or expense arising, in whole or in part, out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to or assessing the effects of, “silica” or “silica-related dust”, by any insured or by any other person or entity.
- B. The following definitions are added to SECTION II – DEFINITIONS:**
1. “Silica” means silicon dioxide (occurring in crystalline, amorphous and impure forms), silica particles, silica dust or silica compounds.
  2. “Silica-related dust” means a mixture or combination of silica and other dust or particles.

All other policy provisions apply.  
CMP-4587

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(CONTINUED)

In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2019, this disclosure is part of your policy.

**POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE**

Coverage for acts of terrorism is not excluded from your policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act. The term “act of terrorism” means any act that is 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. Under this policy, any covered losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. Under the formula, the United States Government generally reimburses 80% beginning on January 1,

2020 of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance 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 exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

There is no separate premium charged to cover insured losses caused by terrorism. Your insurance policy establishes the coverage that exists for insured losses. This notice does not expand coverage beyond that described in your policy.

THIS IS YOUR NOTIFICATION THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER YOUR POLICY MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COVERAGE.



**IMPORTANT NOTICE**  
**Anti-Fraud Disclosure**

For your protection California law requires notification of the following disclosure:

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

553-4370 CA

