
**CONFIRMATION OF COVERAGE BOUND
(BINDER CONFIRMATION)**

Aaron Geisler
Brown & Brown Insurance Services, Inc - Portland
601 SW 2nd Avenue
Portland, OR 97204

Jun 30, 2025

Re: Association Of Unit Owners Of Seaview Condominiums
Policy #:367501190629S00
Effective: 6/26/2025 to 6/26/2026

Dear Aaron:

We are pleased to confirm the attached **Earthquake binder** being offered with **Lloyd's of London**. This carrier is **Non-Admitted** in the state of **OR**. Please note that this binder is based on the coverage, terms and conditions as stated in the attached binder, which may be different from those requested in your original submission. As you are the representative of the Insured, it is incumbent upon you to review the terms of this binder carefully with your Insured, and reconcile any differences from the terms requested in the original submission. CRC Insurance Services, Inc. disclaims any responsibility for your failure to reconcile with the Insured any differences between the terms bound as per the attached and those terms originally requested. This coverage may not be bound without a fully executed CRC brokerage agreement.

NOTE: If insured is located outside your resident state, you must hold appropriate non-resident license prior to binding.

Mailing Address: 102 Muirfield Ct. SE
Salem, OR 97306

Physical Address: 115 N Miller St.,
Rockaway Beach, OR 97136

Coverage as bound per the attached. Premium and Commission are as follows:

Premium:	\$7,608.00
TRIA Premium:	- REJECTED
Inspection Fee - Company	\$300.00
Carrier Policy Fee	\$270.00
Surplus Contribution	\$494.52
Policy Fee	\$400.00
Surplus Lines Tax	\$181.45
Surplus Lines Service Charge	\$10.00
Fire Marshal Tax	\$27.22

Total: **\$9,291.19**

Broker Fees & Policy Fees are Fully Earned at Binding

Commission: 12%

If Non Admitted the following applies:

Oregon Tax Filings are the responsibility of: () Your Agency (X) CRC

This is evidence of insurance was procured and developed under the Oregon Surplus Lines laws. It is NOT covered by the provisions of ORS 734.510 to 734.710 relating to the Oregon Insurance Guaranty Association. If the insurer issuing this insurance becomes insolvent, the Oregon Insurance Guaranty Association has no obligation to pay claims under this evidence of insurance.

Tax Affidavit Number (If applicable):

Home State: OR

The Home State was determined based on the information provided in your submission and the completed Declaration of Home State form. Please ensure the correct Home State is listed. Incorrect information could result in additional or return taxes, fees, surcharges, penalties, interest, and assessments at a later date, and in addition to what is shown. Additionally, please note that this is the current tax calculation based on the Home State but there could be changes that result in additional or return tax - due at a later date - based on future enactments of surplus lines laws by any of the various states.

Upon requesting quotes and/or placement for the coverage listed herein, the producing retail broker hereby confirms that he/she has performed any and all diligent searches, as may be required by statute, for coverage through licensed carriers or other means of placement, and as necessary maintain proof of declination. Where allowed by governing statutes, "diligent effort" may not require an actual physical search and declination on each risk, but may be based on the retail producing broker's own experience, opinion and overall knowledge of acceptability in the admitted marketplace.

Financing Insurance Premiums

Premium financing budgets insurance payments and improves liquidity for other business objectives: working capital, business growth, building expansion.

If your clients choose to pay their insurance in monthly installments, it's fast and easy with AFCO Premium Finance. AFCO provides premium financing solutions for large, mid-size and small corporate accounts;

Find out how premium financing works and how it can expand your relationship with your clients by e-mailing AFCODirect@afco.com; or call toll- free 877-317-6437.

Should you have any questions, please feel free to contact our office.

Sincerely,

Amy Quick

AQuick@crcgroup.com
14016527

CONFIDENTIAL

Difference in Conditions Policy

Named Insured:

Association of Unit Owners of Seaview Condominiums
115 N Miller St
Rockaway Beach, OR 97136

Grand Total:

\$8,672.52

Premium:

\$7,608.00

Insurer Policy Fee:

\$270.00

Insurer Inspection Fee:

\$300.00

VIE Surplus Contribution:**

\$494.52

TRIA:

Not Purchased

Policy Period From:

06/26/2025 at 12:01 AM local time*

Policy Period To:

06/26/2026 at 12:01 AM local time*

Policy Period Term:

12 Months

Issued On:

06/30/2025

Producer Name:

CRC Group
6200 S Syracuse Way
Suite 100
Greenwood Village, CO 80111

*At the Named Insured Mailing Address shown above.

**The Surplus Contribution goes toward the policyholder surplus of Victor Insurance Exchange (VIE). ICAT does not make any money off of or take a percentage of this contribution. Additional details are available in your Subscription Agreement.

This insurance policy is issued by International Catastrophe Insurance Managers, LLC ("ICAT"), on behalf of the insurers identified within the policy and in accordance with the limited authorization granted to ICAT as Correspondent / Program Administrator for such insurers. The identified insurers bind themselves severally and not jointly, each for its own part and not one for another, their Executors and Administrators. ICAT is not an insurer under this policy and is not liable to indemnify the insured under the terms of this policy.

Any inquiries regarding this policy should be addressed to ICAT at the following address:

International Catastrophe Insurance Managers, LLC
385 Interlocken Crescent, Suite 1100
Broomfield, CO 80021

COMMON POLICY CONDITIONS

In return for the payment of the premium and fees, and subject to all the terms of this Policy, We agree with You to provide the insurance as stated in this Policy.

Easily submit a claim 24 hours a day, 7 days a week for policy number 36-7501190629-S-00 using the information below:

Online: www.icat.com/claims/report-a-claim

Phone: 1-866-789-4228

Fax: 1-866-325-2142

Email: newclaims@icat.com

Policy Forms and Endorsements

This policy is comprised of the following Forms and Endorsements:

ICAT DICNA 50(d) (01 20)	Declarations Page	ICAT DICNA 404 (10 07)	Earthquake Deductible by Line of Coverage
ICAT 50SCH (01 23)	Insurer Participation Schedule	ICAT DICNA 500 (10 06)	Replacement Cost Endorsement
LMA5096 (03 08)	Several Liability Clause	DICNA 600 (08 22)	Cancellation Provisions
ICAT 51 SUBNOT (02 22)	Subscription Policy Notice	ICAT DICNA 601 (10 06)	Minimum Earned Fees
ICAT DICNA 100 (07 18)	Difference in Conditions Coverage	ICAT DICNA 602 (10 06)	Minimum Earned Premium
ICAT DICNA 200 (10 08)	Earthquake Coverage	ICAT DICNA 603 (01 07)	Electronic Date Recognition
ICAT DICNA 201(WL) (07 18)	Earthquake Water Loss	ICAT NMA 2920 (01 20)	Terrorism Exclusion
ICAT DICNA 207 (01 09)	Pollutant Clean Up Coverage	ICAT SS (01 23)	Authorized Signatures, Service of Process, and Consumer Service
DICNA 221 (08 23)	Coverage Extension for Unscheduled Additional Property	VIE SOS (04 23)	Victor Insurance Exchange Authorized Signature and Service of Suit
ICAT DICNA 241 (10 19)	Cyber Event Exclusion	VIE PRV 04 23	Victor Insurance Exchange Privacy Policy
ICAT DICNA 301 (05 15)	Condominium Association Changes	IL P 001 01 04	Office of Foreign Assets Control Advisory to Policyholders
ICAT DICNA 303 (01 07)	Electronic Data Processing Endorsement		
ICAT DICNA 309 (10 06)	Foundations Extension		

Schedule A: Coverages, Limits and Deductibles

Your Deductibles			
20% Earthquake Deductible by building, by line of coverage			
\$25,000 All Other Causes of Loss Deductible by building, by line of coverage			
Location 1 – Building 1 115 N Miller St Rockaway Beach, OR 97136	Total Insured Value	Limit of Insurance	Earthquake Deductible
Coverage A: Building	\$6,340,960	\$6,340,960	20% (\$1,268,192)
Coverage B: Business Personal Property (BPP)	\$29,400	\$29,400 (Combined Limit of Insurance)	20% (\$5,880)
Coverage C: Tenant's Improvements and Betterments (TIB)			
Location 1 Covered Property	Total Insured Value	Limit of Insurance	Earthquake Deductible
Coverage D: Additional Property Coverage (APC)	None	None	No coverage
Location 1	Total Insured Value	Limit of Insurance	Earthquake Deductible
Coverage E: Business Income and Extra Expense including Rental Value (BI)			No coverage
Monthly Limit of Indemnity: N/A	None	None	
Total Limit of Insurance		\$6,370,360	

Schedule A: Coverages, Limits and Deductibles

continued

Coinsurance	Waived
Coverage Basis	Replacement Cost
Coverage Extensions	Sublimit
Debris Removal	25% of loss within limit, up to an additional \$10,000 per location in addition to limit
Preservation of Property	30 Days
Earthquake-Induced Water Loss	Included
Pollutant Clean-up And Removal	\$10,000
Unscheduled Additional Property	\$10,000, subject to a \$2,500 deductible
Foundations	Included in Building Limit

General Provisions

1. Correspondent / Program Administrator Not Insurer. ICAT is the Correspondent / Program Administrator issuing this insurance policy. ICAT is not an insurer of the insurance described herein and neither is nor shall be liable for any loss or claim whatsoever. The insurers of this policy are identified on the Insurer Participation Schedule (ICAT 50 SCH) attached to and part of this policy. Where such insurers are identified or referred to as "Underwriters at Lloyd's, London," the term includes incorporated as well as unincorporated persons or entities that are Underwriters at Lloyd's, London.
2. Insurer(s) Policy and Inspection Fees. All Policy and Inspection Fees charged under this policy and identified on this Commercial Property Insurance Policy Jacket or in the Declarations Page are fully earned as of the policy inception date and are not refundable.
3. Cancellation. If this insurance policy or any part of the insurance provided under this policy is cancelled after the inception date of the policy, earned premium must be paid for the time the insurance has been in force. Cancellation and premium earnings shall be as provided in the policy and as may be modified by endorsement issued by ICAT, including endorsements which specify minimum earned premium. You should read this policy carefully to determine how premium is earned before you decide to cancel this policy.
4. Assignment. The insurance described herein shall not be assigned either in whole or in part without the written consent of ICAT.
5. Attached Conditions Incorporated. The insurance described in this Commercial Property Policy is subject to all provisions, conditions, and warranties set forth herein, attached, or endorsed, all of which are to be considered incorporated herein as further descriptive of the insurance.

Insurer Participation Schedule

Pro rata shares applicable to this policy. Coverage under this Policy is provided by the subscribing insurers listed below:			
Perils	Insurers	Contract Number	Percent Participation
AP	Victor Insurance Exchange	VIE	65 %
AP	Lloyd's 510	B0509BOWFN2550006	8.4675 %
AP	Lloyd's 2121	B0509BOWFN2550006	8.4675 %
AP	Lloyd's 1856	B0509BOWFN2550006	8.065 %
AP	Lloyd's 1458	B0509BOWFN2550000	10 %

Perils	Premium by Peril
AP	\$7,608.00

Definitions

AP: All perils covered under the policy not otherwise specifically defined in this Insurer Participation Schedule.

The liability of an insurer under this policy is several and not joint with other insurers party to this policy, pursuant to the terms and conditions of the Several Liability Clause attached to this policy.



CRC - Scottsdale

Pay Online: <https://apps.crcgroup.com/pay>

P.O. Box 664062
Dallas, TX 75266

Accounting Customer Service Number | 844-530-0089

Accounting Site: <https://www.crcgroup.com/More/Accounting>

Bill To: AGT23762
Brown & Brown Insurance Services, Inc - Portland
PO Box 29018
Portland, OR 97296

Attn: Aaron Geisler

Submission No: 14016527

Agent:	CSR: Amy Quick	Producer: Abby Daugherty
AGT23762	AQuick@crcgroup.com	AbDaugherty@crcgroup.com

INVOICE

Invoice Date:	Invoice Number:	Page:
06/30/2025	7074093	1

Insured: Association Of Unit Owners Of Seaview Condominiums	INVOICE PAYMENT Payment Due On: 07/20/2025
DBA:	

Insurance Company:	Policy Number:	Effective:	Expires:
Lloyd's of London	367501190629S00	06/26/2025	06/26/2026

Type of Transaction	Line of Business	Comp ID	Amount	Comm(\$)	Net Due
Premium - New Business	PROPERTY - EARTHQUAKE	M2095	\$7,608.00	\$912.96	\$6,695.04
Inspection Fee - Company	PROPERTY - EARTHQUAKE	M2095	\$300.00	\$0.00	\$300.00
Carrier Policy Fee	PROPERTY - EARTHQUAKE	M2095	\$270.00	\$0.00	\$270.00
Surplus Contribution	PROPERTY - EARTHQUAKE	M2095	\$494.52	\$0.00	\$494.52
Policy Fee	PROPERTY - EARTHQUAKE	AZSC	\$400.00	\$0.00	\$400.00
Surplus Lines Tax	PROPERTY - EARTHQUAKE	ORTAX	\$181.45	\$0.00	\$181.45
Surplus Lines Service Charge	PROPERTY - EARTHQUAKE	ORSER	\$10.00	\$0.00	\$10.00
Fire Marshal Tax	PROPERTY - EARTHQUAKE	ORTAX	\$27.22	\$0.00	\$27.22

Amount Invoiced:	Comm %	Commission	Total Net Due
\$ 9,291.19	12.00	\$ 912.96	\$ 8,378.23

Note: CRC GROUP TO FILE TAXES! THANK YOU FOR THE ORDER!