



5280 CORPORATE DR SUITE A270
Frederick, MD 21703-8502
(301) 663-9522 | (800) 544-8737
www.FrederickMutual.com

New Policy

Policy ID: CU202610089
Active - Status

DECLARATION, ISO Commercial Umbrella

Mail To: TRP Bowers Building, LLC PO Box 5160 Glen Allen, VA 23058	Named Insured(s): TRP Bowers Building, LLC PO Box 5160 Glen Allen, VA 23058	Agency: Towne Insurance Agency, LLC (234) 3 Commercial Place Suite 1000 Norfolk, VA 23510 Work: (757) 468-6100
Policy Term Effective Date: 06/01/2026, 12:01AM Standard Time	Policy Term Expiration Date: 06/01/2027, 12:01AM Standard Time	

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

Location 1 Building 1 - 104 Shockoe Slip - Richmond VA 23219 - Richmond County

Property: 1 of 2

Section I	COVERAGE LIMIT	PREMIUM
Primary CU	\$5,000,000	\$3,796.00
Terrorism Portion of Premium	***	\$56.00

Location 2 Building 1 - 1206 Shockoe Ln - Richmond VA 23219 - Richmond County

Property: 2 of 2

Coverage Premium:	\$3,796.00
Fees:	\$0.00
Total:	\$3,796.00

RATING INFORMATION:

■ Rating Information: *Location 1 Building 1*

Total Square footage of properties: *24180*

Business Type: *Apartment*

Gross Receipts: *Gross Receipts of less than equal to \$500,000*

■ Rating Information: *Location 2 Building 1*

Total Square footage of properties: *20349*

Business Type: *Apartment*

Gross Receipts: *Gross Receipts of less than equal to \$500,000*

■ Primary CU

BOP Policy Number: *BP202600614*

BOP Effective Date: *06/01/2026*

BOP Limit of Insurance: *1000000*

Include Commercial Auto: *No*

Include Terrorism: *Yes*

Are any risks located in these locations: *N/A*

Underlying Employers Liability: *No*

BOP Carrier: *Frederick Mutual*

General Aggregate: *2 x Occurrence*

Products/Completed Operations Aggregate Limit: *2 x Occurrence*

Cannabis Exclusion Options: *CANNABIS EXCLUSION*

Additional BOP Policies

BOP Policy Number: *No answer provided*

BOP Effective Date: *No answer provided*

BOP Limit of Insurance: *No answer provided*

Hired/Non-Owned Auto Coverage Limits

Hired/Non-Owned Auto Coverage Limits - BOP Policy Number: *BP202600614*

Hired/Non-Owned Auto Coverage Limits - BOP Effective Date: *06/01/2026*

Hired/Non-Owned Auto Coverage Limits - BI each person: *No answer provided*

Hired/Non-Owned Auto Coverage Limits - BI each occurrence: *No answer provided*

Hired/Non-Owned Auto Coverage Limits - PD each occurrence: *No answer provided*

Hired/Non-Owned Auto Coverage Limits - CSL each occurrence: *1000000*

■ General Application

Policy Subject to the Following Forms and Endorsements:

CU 00 01 04 13 COMMERCIAL LIABILITY UMBRELLA COVERAGE FORM
CU 04 00 09 00 COVERAGE FOR INJURY TO LEASED WORKERS
CU 21 05 11 16 EXCLUSION - EMPLOYEES AND VOLUNTEER WORKERS AS INSURED
CU 21 08 04 13 EXCLUSION - INTERCOMPANY PRODUCTS SUITS
CU 21 12 09 00 ABUSE OR MOLESTATION EXCLUSION
CU 21 23 02 02 NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT
CU 21 24 11 016 EXCLUSION - NON-OWNED AIRCRAFT
CU 21 26 04 13 EXCLUSION - CROSS SUITS LIABILITY
CU 21 27 12 04 FUNGI OR BACTERIA EXCLUSION
CU 21 42 12 04 EXCLUSION - EXTERIOR INSULATION AND FINISH SYSTEMS
CU 21 50 03 05 SILICA OR SILICA-RELATED DUST EXCLUSION
CU 21 58 05 09 COMMUNICABLE DISEASE EXCLUSION
CU 21 71 06 15 EXCLUSION - UNMANNED AIRCRAFT
CU 21 75 04 13 EXCLUSION - INSURANCE AND RELATED OPERATIONS
CU 22 05 12 01 EXCLUSION - HOUSING PROJECTS SITES
CU 22 27 12 07 LEASING OR RENTAL CONCERNS - EXCL OF CERTAIN LEASED AUTOS
CU 22 28 12 01 LEASING/RENTAL CONCERNS - RENT IT THERE/LEAVE IT HERE AUTOS
CU 24 29 04 13 BUSINESSOWNERS LIABILITY CHANGES
FM ASBESTOS 12 18 EXCLUSION - ASBESTOS
FM EXCL LEAD 12 18 EXCLUSION - LEAD
IL 00 17 11 98 COMMON POLICY CONDITIONS
IL 09 98 01 15 DISCLOSURE PREM THRU EOY FOR CERTIFIED ACTS OF TERRORISM COV
CU 21 72 06 15 EXCLUSION - UNMANNED AIRCRAFT (COVERAGE A ONLY)
CU 21 73 06 15 EXCLUSION - UNMANNED AIRCRAFT (COVERAGE B ONLY)
CU 01 57 03 18 VIRGINIA CHANGES
CU 02 25 11 16 VIRGINIA CHANGES - CANCELLATION AND NONRENEWAL
FMIC Privacy Statement FREDERICK MUTUAL INSURANCE COMPANY PRIVACY POLICY
FM CU CTE 10 2022 Clinical Trial Exclusion
FMIC HSE Policyholder Notice Home-Sharing Host Activities Exclusion Commercial Umbrella
FMIC CTE Policyholder Notice Clinical Trial Exclusion Commercial Umbrella
FM CU HSE 06 22 Home Sharing Exclusion Commercial Umbrella
CU 34 54 05 23 EXCLUSION-PERFLUOROALKYL AND POLYFLUOROALKYL SUBSTANCES (PFAS)
CU 00 05 12 23 EXCLUSION-VIOLATION OF LAW ADDRESSING DATA PRIVACY
CU 21 86 12 23 EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL MATERIAL OR INFORMATION
CU 34 55 12 23 EXCLUSION-ELECTRONIC DATA-DELETION OF BODILY INJURY EXCEPTION
PJ-MD-CU 01 25 POLICY JACKET
CU 21 31 01 15 EXCL OTH ACTS TERRORISM COMMITTED OUTSIDE US; CAP ON LOSSES
CU 21 36 01 15 EXCL PUNITIVE DAMAGES RELATED TO CERTIFIED ACT OF TERRORISM
CU 21 45 01 15 CONDTL EXCL TERRORISM INVOLVING NUCLEAR, BIO, CHEM TERRORISM
CU 34 22 12 20 CANNABIS EXCLUSION

IMPORTANT NOTICE TO POLICYHOLDERS REGARDING ADDITIONAL OR RETURN PREMIUM OF \$10.00 OR LESS

Additional or Return Premium of \$10.00 or less will be waived by the Company. Return Premium of \$10.00 or less will be returned at the request of the policyholder.

AUTHORIZED SIGNATURE 	DATE 05/29/2026
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