



# PROVIDENCE MUTUAL

The Providence Mutual Fire Insurance Company  
P.O. Box 6066  
Providence, Rhode Island 02940-6066

## BUSINESSOWNERS DECLARATION

Policy Number: BOP 0092834 01
Named Insured: GLATZ, JOEL
Agent: BRM ASSOCIATES, LLC 0001207

Construction Type 1	Sprinkler N	Territory 701	Prot. Class 02	Rate No. 17	Rate Group 31	Type of Business DELI
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### DESCRIBED PREMISES:

Prem 1 Bldg 1

Location Description  
22 MONUMENT SQ  
PORTLAND ME 04101-4082

Policy Interests  
Additional Insured  
CITY OF PORTLAND  
389 CONGRESS STREET  
PORTLAND ME 04101

REFER TO FORM BP0448

See attached for additional Policy Interests

Business Description: DELI

### PROPERTY COVERAGE LIMITS OF INSURANCE:

#### BUILDINGS

Actual Cash Value - Buildings Option (Y/N)	N
Automatic Increase - Building Limit (%)	8%
Deductible	1,000

Limits	Premiums
30,000	308.00

#### BUSINESS PERSONAL PROPERTY

Deductible

### ADDITIONAL COVERAGES

	Limits	Premiums
Terror or Fire Following Only		2.00
Water Backup and Sump Overflow	5,000	Included
Increased Bus Inc Depend Prop.	10,000	Included
Increased Interrupt Comp Oper	10,000	Included
Add Ins - Designated Persons	1	30.00
Equipment Breakdown Endt		22.00
Increased Electronic Data	10,000	Included
Fire Ext Recharge	10,000	Included
Liability and Medical Exp		151.00
Medical Expenses		Included
Money Ord & Counterfeit	5,000	Included
Money & Securities On Premise	15,000	Included
Money & Securities Off Premise	5,000	Included
Outdoor Property	5,000	Included
Signs	5,000	Included
Increased Valuable Papers		Included
Valuable Papers Off Premise	10,000	Included
<b>Total Premium for this location</b>		<b>\$ 513.00</b>

### Forms and Endorsements applicable to this location

BPNP04 (05/11)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

CITY OF PORTLAND  
389 CONGRESS STREET  
PORTLAND ME 04101

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Liability is amended as follows:

A. The following is added to Paragraph C. Who Is An Insured:

3. Any person(s) or organization(s) shown in the Schedule is also an additional insured, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf in the performance of your ongoing operations or in connection with your premises owned by or rented to you.

However:

- a. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- b. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Paragraph D. Liability And Medical Expenses Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits Of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits Of Insurance shown in the Declarations.