Policy Number: XXXXXXX

Item 1. Named Insured and Address:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Item 2. Additional Insureds:

Additional insured(s) means all project owner(s) and contractors and subcontractors of every tier at the insured project location and any other individual or entity, but only to the extent required by the contract document(s) or subcontract document(s) with respect to the insured project and then only as their respective interests may appear. Notwithstanding the foregoing sentence, architects, engineers, manufacturers and suppliers shall only be additional insureds with respect to their activities at the insured project location.

Item 3. Mortgagees and Loss Payees: Per Certificates of Insurance on file with the Company or any endorsement attached to and forming a part of this Policy.

Item 4. Policy Period:

A. Inception Date: DD MONTH YYYY Expiration Date: DD MONTH YYYY
   (12:01 a.m., Standard Time at the insured project location. The Expiration Date may vary in accordance with Item 4.B.) (hereinafter, the Original Policy Period)

B. The Expiration Date shall be the earliest of the following:

1. The date of formal acceptance of the entire insured project by the project owner(s);
2. The date or expiry of the Named Insured's interest in the insured project;
3. The effective date of cancellation of this Policy, or
4. The expiration date as set forth in Item 4.A.

C. Extension of the Policy Period

Provided that coverage has not ended in accordance with Items 4.B.1. through 4.B.4., this Policy will be automatically extended once for up to XXX days for a pro rata additional premium upon notification by the Named Insured to the Company. The Named Insured may request an additional extension of this Policy subject to the Company’s written approval and terms and conditions to be agreed upon.
Item 5. Insured Project:

<table>
<thead>
<tr>
<th>Location</th>
<th>XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</th>
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</thead>
<tbody>
<tr>
<td>Description</td>
<td>XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</td>
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<tr>
<td>Project Owner(s)</td>
<td>XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</td>
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Item 6. Coverage Territory:

United States, its territories and possessions and Puerto Rico, including their respective coastal waters. If any coverage is provided on a worldwide basis, such worldwide coverage shall not include any jurisdiction prohibited or restricted under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or the United States of America. Losses are only covered within the coverage territory.

Item 7. Premium:

A. Total Deposit Premium: $XXX,XXX,XXX (See Item 8. below for the calculation)

B. Terrorism Premium: $XXX,XXX,XXX (included within the Total Deposit Premium)

C. Surcharges: (If Applicable)

<table>
<thead>
<tr>
<th>Surcharges</th>
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Item 8. Deposit Premiums:

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Original Policy Period</th>
<th>Estimated Value at Inception Date</th>
<th>Annual Rate Per $100</th>
<th>Deposit Premium</th>
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<tbody>
<tr>
<td>Total Project Value</td>
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<td>$X.XXX</td>
<td>$XXX,XXX,XXX</td>
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<tr>
<td>Existing Property</td>
<td>XX.XX years</td>
<td>$XXX,XXX,XXX,XXX</td>
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<td>Contractors Equipment</td>
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<td>Delay In Completion</td>
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<td>$X.XXX</td>
<td>$XXX,XXX,XXX</td>
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<td>Terrorism</td>
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<td>$X.XXX</td>
<td>$XXX,XXX,XXX</td>
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<tr>
<td>XXXXXXXXXXXXXXXXXX</td>
<td>XX.XX years</td>
<td>$XXX,XXX,XXX,XXX</td>
<td>$X.XXX</td>
<td>$XXX,XXX,XXX</td>
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<tr>
<td>Total Deposit Premium:</td>
<td></td>
<td></td>
<td></td>
<td>$XXX,XXX,XXX</td>
</tr>
</tbody>
</table>

Item 9. Policy Limit: $XXX,XXX,XXX This is the Company’s maximum liability in any one occurrence as a result of all covered loss or damage regardless of the number of coverages or covered causes of loss under this Policy.

Item 10. Sublimits of Liability: The sublimits of liability stated in this Policy are part of and not in addition to the Policy Limit and any sublimits of liability shown in Item 10.A. below. The sublimits of liability are: (1) the maximum amount the Company will pay for all covered loss or damage arising out of the specific perils or coverages and/or (2) the maximum number of days for which the Company will pay for all covered loss or damage for a specific coverage, regardless of the number of coverages or covered causes of loss under this Policy. The sublimits of liability stated in this Policy are per occurrence unless otherwise indicated.

Regardless of the number of occurrences: (1) any Term Aggregate in this Policy is the maximum amount payable for all covered loss or damage for the applicable coverage or covered cause of loss that is applicable to the entire policy period regardless of the length of the policy period, and (2) any Annual Aggregate in this Policy is the maximum amount payable for all covered loss or damage for the applicable coverage or covered cause of loss that is applicable to each annual period with respect to the policy period.
If any Annual Aggregate applies and the policy period is longer than one year, at the end of each twelve (12) month period (hereinafter, the annual anniversary date), such Annual Aggregate shown below shall be reinstated in full, but only with respect to an occurrence which first commences on or after 12:01 a.m., Standard Time on such annual anniversary date. If the final period is less than twelve (12) months, then such Annual Aggregate shall be reinstated in full for that final period.

If the words NOT COVERED are shown instead of a limit, sublimit amount or number of days, or if a specified amount or number of days is not shown corresponding to any coverage or Covered Cause of Loss, then no coverage is provided for that coverage or Covered Cause of Loss. If the words, NOT APPLICABLE (or N/A) are shown, instead of a limit, sublimit amount or number of days, then the Company shall not apply the limit, sublimit amount or number of days.

A. Sublimits Applicable to Specified Covered Causes of Loss - Each of these sublimits is part of and not in addition to the Policy Limit:

1. Earth Movement: $XXX,XXX,XXX per occurrence, subject to a ☐ Term Aggregate or ☐ Annual Aggregate of $XXX,XXX,XXX, for all covered loss or damage arising out of earth movement.

2. Flood: $XXX,XXX,XXX per occurrence, subject to a ☐ Term Aggregate or ☐ Annual Aggregate of $XXX,XXX,XXX, for all covered loss or damage arising out of flood.

3. Named Storm: $XXX,XXX,XXX per occurrence, subject to a ☐ Term Aggregate or ☐ Annual Aggregate of $XXX,XXX,XXX, for all covered loss or damage arising out of named storm.

For the purpose of the above sublimits of liability, named storm includes, but is not limited to, loss or damage from wind, hail, lightning, tornado, rain or water (whether driven by wind or not), flood, or any wind driven objects or debris.

In the event that loss or damage by flood occurs concurrently or in any sequence with a named storm, regardless of whether any flood sublimit or remaining aggregate flood sublimit shown in Item 10.A.2. (hereinafter, the applicable flood sublimit) is greater or less than the applicable Named Storm sublimit, the maximum amount the Company will pay per occurrence for all such covered loss or damage by flood shall be the applicable flood sublimit, subject always to the maximum applicable Named Storm sublimit. However, if flood is not covered, the maximum amount the Company will pay per occurrence for all such covered loss or damage arising out of named storm shall exclude loss or damage by flood.

4. Terrorism: $XXX,XXX,XXX for all covered loss or damage arising out of terrorism.

5. Additional Sublimits:

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

B. Sublimits of Liability

Each of the following sublimits is part of, and not in addition to the Policy Limit and any other sublimits shown in Item 10.A. of the Declarations:

Physical Damage Sublimit of Liability $XXX,XXX,XXX applicable to physical damage to covered property at the insured project

1. Inland Transit $XXX,XXX,XXX
2. Offsite Temporary Storage $XXX,XXX,XXX any one location
3. Arson, Theft or Vandalism and Malicious Mischief Reward $XXX,XXX,XXX
4. Claims Preparation Costs $XXX,XXX,XXX
5. Crane Re-Erection Expenses $XXX,XXX,XXX
6. Crisis Management XXX days, subject to a maximum Term Aggregate of $XXX,XXX,XXX
7. Cyber Coverage
  The following sublimits of liability 7.a. through 7.d., inclusive, are subject to the Cyber Coverage sublimit of liability shown above:
  a. Electronic Data $XXX,XXX,XXX Term Aggregate
  b. Building or Other Systems $XXX,XXX,XXX Term Aggregate
  c. Plans and Drawings $XXX,XXX,XXX Term Aggregate
  d. Cyber Extra Expense $XXX,XXX,XXX Term Aggregate
8. Debris Removal $XXX,XXX,XXX or XX% of direct physical loss or damage to all insured property, whichever is less
9. Demolition and Increased Cost of Construction
   Demolition Coverage A: $XXX,XXX,XXX
   Demolition Coverage B: $XXX,XXX,XXX
   Demolition Coverage C: $XXX,XXX,XXX
10. Expediting Expense and Extra Expense $XXX,XXX,XXX
11. Owner’s Extra Expense $XXX,XXX,XXX
    The following expenses 11.a. through 11.d., inclusive, are subject to the Owner’s Extra Expense sublimit of liability shown above:
    a. Advertising and Marketing Expenses $XXX,XXX,XXX
    b. Legal and Accounting Fees $XXX,XXX,XXX
    c. License and Permit Fees $XXX,XXX,XXX
    d. Project Management Fees $XXX,XXX,XXX
12. Fine Arts $XXX,XXX,XXX
13. Fire Brigade, Extinguishing Expenses and Police Charges $XXX,XXX,XXX
14. Fungus, Mold or Spore $XXX,XXX,XXX
15. Maximum Hot Testing Period XXX days
16. Landscaping Materials $XXX,XXX,XXX any one item, subject to a maximum of $XXX,XXX,XXX per occurrence
17. Logistics Extra Costs $XXX,XXX,XXX
18. Plans and Drawings $XXX,XXX,XXX
19. Pollution and Contamination Coverage $XXX,XXX,XXX Term Aggregate
20. Preservation of Property $XXX,XXX,XXX
21. Professional Design Fees $XXX,XXX,XXX
22. Additional Sublimits $XXX,XXX,XXX

Item 11. Deductibles: The deductibles shown below apply per occurrence unless otherwise stated.

A. Policy Deductible $XXX,XXX,XXX Applicable to all covered loss or damage unless otherwise stated below or in this Policy.

B. Earth Movement
   1. $XXX,XXX,XXX, or
   2. XX% of total project value at risk at the time of the loss or damage, subject to a minimum of $XXX,XXX,XXX for any one occurrence and a maximum of $XXX,XXX,XXX for any one occurrence, for all loss or damage arising out of earth movement.
Other Earth Movement Deductible:

C. Flood
1. $XXX,XXX,XXX, or
2. XX% of total project value at risk at the time of the loss or damage, subject to a minimum of $XXX,XXX,XXX for any one occurrence and a maximum of $XXX,XXX,XXX for any one occurrence, for all loss or damage arising out of flood.

Other Flood Deductible:

D. Named Storm
1. $XXX,XXX,XXX, or
2. XX% of total project value at risk at the time of the loss or damage, subject to a minimum of $XXX,XXX,XXX for any one occurrence and a maximum of $XXX,XXX,XXX for any one occurrence, for all loss or damage arising out of named storm.

Other Named Storm Deductible:

E. Water Damage: $XXX,XXX,XXX

Other Water Damage Deductible:

F. Hot Testing: $XXX,XXX,XXX

Other Hot Testing Deductible:

G. Additional Deductibles

Special Deductible for Owner's Extra Expense: $XXX,XXX,XXX

In each case of loss or damage covered by this Policy, the Company shall not be liable unless the Insured sustains covered loss or damage in a single occurrence greater than any applicable deductible described in this Policy and then only for the amount in excess of such deductible. As used above, “at risk” includes all covered property at the location (including inland transit) where the loss occurs, whether such covered property sustains damage or not.

If an amount is not shown (or if NOT APPLICABLE or N/A is shown) for any deductible, then that deductible shall not apply. Also, if an amount is not shown (or if NOT APPLICABLE or N/A is shown) with respect to a part of a deductible, then such part shall not apply, but the rest of the deductible shall apply.

If two or more deductible amounts provided in this Policy apply to a single occurrence, the total to be deducted shall not exceed the largest deductible applicable unless otherwise stated in this Policy. If a Delay in Completion Coverage Endorsement is attached to and made a part of this Policy, then the specified deductible period stated in such endorsement shall be applied in addition to the applicable deductible shown in Item 11.A. through 11.G. above, inclusive. The Special Deductible for owner's extra expense shall apply in addition to the applicable deductible shown in Item 11.A. through 11.G. above, inclusive.
Item 12. Margin Clause:

If there is any increase in the total project value, the Policy Limit and the Physical Damage Sublimit of Liability shall be automatically increased by the same percentage of such increase in the total project value, subject to a maximum increase of XX.XX% regardless of the number of increases in the total project value. If the cumulative increases in the total project value exceed the maximum percentage set forth above, then the Named Insured shall report such changes in writing to the Company.

This provision does not apply to any other sublimits of liability, including any other sublimit of liability shown in Item 10.A. or Item 10.B. and/or sublimits of liability for any coverage added by endorsement.

Item 13. Special Terms and Conditions:

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Producer: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Address: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

IN WITNESS WHEREOF, the Company has caused this Policy to be signed on the Declarations by the President and Secretary of the Company and its duly authorized representative.

___________________________________ ____________________________________  
President Secretary

This Policy shall not be valid unless signed at the time of issuance by the Company’s authorized representative.

___________________________________  
Authorized Representative

__________________________ ___________________ 
Countersignature (if applicable) Date Countersigned At