

INSURED COPY

Bear H2O, LLC
PO Box 608
Mount Vernon, IN 47620

Policy Change

CHUBB®**Policy Number: Y09427272****Policy Term: 5/9/2019 To 5/9/2020****Effective Date of Change: 6/5/2019****Agency Code, Name & Address****226233****C & L INSURANCE INC****2295 NW CORPORATE BLVD****SUITE 121****BOCA RATON, FL 33431-7326**

This is your Amended Declarations Page. Please review Policy Change Summary **MA-3857h** for a description of change(s).

The Company Providing This Insurance:

ACE AMERICAN INSURANCE COMPANY**436 Walnut Street, P.O. Box 1000****Phila, PA 19106-3703**

The Named Insured Under This Policy:

(NAME)**Bear H2O, LLC**

Address:

PO Box 608**Mount Vernon, IN 47620**

The Vessel Covered by This Policy:

(NAME)(YEAR BUILT) (LENGTH)**2008****44'**(MAKE)**Mochi**(MODEL)**44 Dolphin**(DOC. OR HULL. IDENT. NO)**XFA44M26F708****COVERAGE PROVIDED**

COVERAGES	AMOUNT OF INSURANCE	DEDUCTIBLE AMOUNT	NEW ANNUALIZED PREMIUM
Property Damage	\$ 350,000	\$ 3,500	\$ 2,566
Windstorm Deductible		\$ Not Applicable	\$ 0
Emergency Towing and Service	\$ 1,500	\$ 0	\$ 0
Liability Coverage	\$ 1,000,000	\$ 0	\$ 946
Medical Payments	\$ 25,000	\$ 0	\$ 0
Uninsured Boater	\$ 1,000,000	\$ 0	\$ 0
Trailer	\$ 5,000	\$ 250	\$ 0
Personal Property	\$ 10,000	\$ 250	\$ 0
Premium Bearing Endt(s)			\$ 90
NEW TOTAL ANNUALIZED PREMIUM			\$ 3,602

LIMITS ON USE: See Navigation Warranty **MA-7W74a****SUMMER MOORING LOCATION:** Fort Lauderdale, FL 33312**APPLICABLE FORMS AND ENDORSEMENTS: SEE FORMS SCHEDULE ON PAGE 2****LOSS PAYEE:** We will make payments for Property Damage losses to the Insured and

FORMS SCHEDULE

POLICY FORMS AND ENDORSEMENTS (Applicable to all vessels)

Form Number	Form Edition Date	Form Name
MA-35598b	11/2017	Policyholder Notice - Direct Bill
ALL-20887b	11/2017	Chubb Producer Compensation Practices & Policies
MA-10391h	10/2016	Chubb Group U.S. Privacy Notice
MA-46552a	11/2017	Policy Declarations Page - Florida
MA-37296	06/2012	Insurance Identification Card

*Denotes form is included with Insured copy

VESSEL FORMS AND ENDORSEMENTS

Form Number	Form Edition Date	Form Name
MA-21915c	11/2017	Important Notice - Windstorm Exclusion
RM100000	11/2017	Introductions and Definitions
RM130000	11/2017	Yacht Property Damage Coverage
RM180000	11/2017	Yacht Liability Coverage
RM210000	11/2017	Medical Payments Coverage
RM220000	11/2017	Uninsured Boaters Protection
RM230000	11/2017	General Policy Exclusions
RM240000	11/2017	Policy Terms
MA-7W74a	05/1997	Manuscript Navigation Warranty
MA-15385d	11/2017	Windstorm Exclusion Endorsement
MA-16119d	11/2017	Florida Amendatory Endorsement
MA-2W81f	11/2017	Charter Endorsement
MA-43825b	11/2017	Resulting Damage Endorsement
RM-5008	11/2017	Crew Members Endorsement

*Denotes form is included with Insured copy

Policy Change Summary

CHUBB®

Policy Number: YKR Y09427272

Policy Term: 5/9/2019 TO 5/9/2020

Effective Date Of Change: 6/5/2019

RENEWAL

Agency Code, Name & Address

226233

C & L INSURANCE INC

2295 NW CORPORATE BLVD

SUITE 121

BOCA RATON, FL 33431-7326

This is your Policy Change Summary page. Please read carefully. It reflects recent policy change activity to your policy.

The Named Insured Under This Policy:

(NAME)

Bear H2O, LLC

Address:

PO Box 608

Mount Vernon, IN 47620

Description of Change

It is hereby agreed and understood

Added Bear H2O, LLC as named insured.

The client's address is amended to: PO Box 608 Mount Vernon, IN 47620

The client's mooring information has been amended to:
1600 SW 24th Ave Fort Lauderdale, FL 33312 (Private Dock)

All other terms and conditions remain unchanged.

Premium Summary By Vessel

Revised premium amounts are displayed by vessel when the policy change(s) described above have resulted in an additional or return premium.

Premium Change Amount

\$

Total Premium Change Amount

\$

0