EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY): 8/1/2025

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Brown & Brown Insurance Services, Inc. 900 North Point Parkway, Suite 300 Alpharetta, GA 30005 PHONE (A/C, No, Ext): (770) 373-5840	COMPANY NAME AND ADDRESS American Alternative Insurance Corp 555 College Road East - P.O. Box 5241 Princeton NJ 08543 NAIC NO: 19720 IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH
FAX (A/C, No): (770) 824-8899 — E-MAIL ADDRESS: associationcoi@bbrown.com	POLICY TYPE: Package
CODE: — SUB CODE:	
AGENCY CUSTOMER ID #: TARAT-1	
NAMED INSURED AND ADDRESS Tara Townhouses Condominium Association, Inc. C/O Carter Communities, Inc. 711 Cedar Creek Way Woodstock GA 30189	LOAN NUMBER: — POLICY NUMBER: CAU531170-2 EFFECTIVE DATE: 7/18/2025 — EXPIRATION DATE: 7/18/2026 — ☐ CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)	THIS REPLACES PRIOR EVIDENCE DATED:

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) ☐ BUILDING OR ☐ BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION

10 bldgs
50 Units
3050 Margaret Mitchell Drive, Atlanta, Fulton County, GA 30327.

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

PERILS INSURED: ☐ BASIC ☐ BROAD ✓ SPECIAL

COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: $ 24,122,447 — DED: $10,000

	YES	NO	N/A	
☐ BUSINESS INCOME ☐ RENTAL VALUE			✓	If YES, LIMIT: — ☐ Actual Loss Sustained; # of months:
BLANKET COVERAGE	✓			If YES, indicate value(s) reported on property identified above: $ 24,122,447
TERRORISM COVERAGE	✓			Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	✓			
IS DOMESTIC TERRORISM EXCLUDED?	✓			
LIMITED FUNGUS COVERAGE	✓			If YES, LIMIT: 15,000 — DED: 10,000
FUNGUS EXCLUSION (If "YES", specify organization's form used)	✓			CAU 3600 GA 07/17
REPLACEMENT COST	✓			Guaranteed Replacement Cost
AGREED VALUE			✓	
COINSURANCE			✓	If YES, %
EQUIPMENT BREAKDOWN (If Applicable)	✓			If YES, LIMIT: Building Limit — DED:
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	✓			If YES, LIMIT: Building Limits — DED:
- Demolition Costs	✓			If YES, LIMIT: 300,000 Combined B&C — DED:
- Incr. Cost of Construction	✓			If YES, LIMIT: 300,000 Combined B&C — DED:
EARTH MOVEMENT (If Applicable)		✓		If YES, LIMIT: — DED:
FLOOD (If Applicable)		✓		If YES, LIMIT: — DED:
WIND / HAIL INCL ☑ YES ☐ NO Subject to Different Provisions:	✓			If YES, LIMIT: Building Limit — DED:
NAMED STORM INCL ☑ YES ☐ NO Subject to Different Provisions:	✓			If YES, LIMIT: Building Limit — DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS	✓			

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

☐ CONTRACT OF SALE ☐ LENDER'S LOSS PAYABLE ☐ LOSS PAYEE ☐ MORTGAGEE

NAME AND ADDRESS

For File purposes only
Tara Townhouses Condominium Association, Inc.
C/O Carter Communities, Inc
711 Cedar Creek Way
Woodstock GA 30189

LENDER SERVICING AGENT NAME AND ADDRESS

AUTHORIZED REPRESENTATIVE

Tim Soriano

AGENCY CUSTOMER ID: TARAT-1
LOC #:

ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY		NAMED INSURED
Brown & Brown Insurance Services, Inc.		Tara Townhouses Condominium Association, Inc. C/O Carter Communities, Inc. 711 Cedar Creek Way Woodstock GA 30189
POLICY NUMBER		
CAU531170-2		
CARRIER	NAIC CODE	
American Alternative Insurance Corp		EFFECTIVE DATE: 7/18/2025

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 28 **FORM TITLE:** Evidence of Commercial Property (03/16)

ADDITIONAL INTEREST: Tara Townhouses Condominium Association, Inc. C/O Carter Communities, Inc
ADDRESS: 711 Cedar Creek Way Woodstock GA 30189

Water Damage Deductible - $20,000 P/ Unit
Difference in Condition - Wind Hail deductible - Eff 08/01/2025-07/18/2026 - Certain Underwriters At Lloyds, London - buying down from 1% to $10,000 per Occ.

This certificate cancels and supersedes ALL previously issued certificates.

For File purposes only

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 8/1/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Brown & Brown Insurance Services, Inc.
900 North Point Parkway, Suite 300
Alpharetta, GA 30005

CONTACT NAME:
PHONE (A/C, No, Ext): (770) 373-5840 — FAX (A/C, No): (770) 824-8899
E-MAIL ADDRESS: associationcoi@bbrown.com

INSURED
Tara Townhouses Condominium Association, Inc.
C/O Carter Communities, Inc.
711 Cedar Creek Way
Woodstock GA 30189

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : American Alternative Insurance Corp	19720
INSURER B : Continental Casualty Company	20443
INSURER C : Travelers Casualty and Surety Co of Amer	31194
INSURER D :	
INSURER E :	
INSURER F :	

COVERAGES — **CERTIFICATE NUMBER:** 86564359 — **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	✓ COMMERCIAL GENERAL LIABILITY			CAU531170-2	7/18/2025	7/18/2026	EACH OCCURRENCE	$ 5,000,000
	☐ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 5,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ Unlimited
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	$ 5,000,000
	OTHER:						Hired and Non-Owned	$
A	AUTOMOBILE LIABILITY			CAU531170-2	7/18/2025	7/18/2026	COMBINED SINGLE LIMIT (Ea accident)	$ 5,000,000
	☐ ANY AUTO						BODILY INJURY (Per person)	$
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	✓ HIRED AUTOS ONLY ✓ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						☐ PER STATUTE ☐ OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
B	Directors & Officers Liability			619024575	7/18/2025	7/18/2026	$1,000,000 Limit - $1,000 Retention	
C	Fidelity Bond			105793751	7/18/2025	7/18/2026	$400,000 Limit - $2,500 Retention	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

THIS CERTIFICATE CONFERS NO ADDITIONAL INSURED RIGHTS UPON THE CERTIFICATE HOLDER.

CERTIFICATE HOLDER

For File purposes only

Tara Townhouses Condominium Association, Inc.
c/o Carter Communities, Inc.
711 Cedar Creek Way
Woodstock GA 30189

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Tim Soriano

This certificate cancels and supersedes ALL previously issued certificates.

Master Policy Information:

The Master Policy covers the entire condominium building inside and out including the interior of the units **EXCEPT for additions or improvements made by owners**. The Master Policy only covers damage sustained by covered causes of loss including, but not limited to, fire, lightning, windstorm, hail, vandalism, and water damage occurring from a sudden and accidental discharge of water from plumbing or mechanicals such as a frozen pipe bursting, a washing machine hose malfunctioning, etc. The Policy is not designed to cover losses resulting from maintenance issues such as wear and tear, settling or faulty construction issues. **In the event of a covered loss, the applicable Master Policy deductible is the responsibility of the party outlined by the association's covenants.**

Common Deductible Examples (amounts below are for example purposes only)

Per Unit - **each affected party is responsible for the deductible amount in damage, and any damage equaling less than the deductible will not be included in a Master Policy claim.**
Example – If the water deductible is $30,000: Unit A has a pipe burst causing $70,000 in damage to it, and $20,000 in damage to the neighboring Unit B. Unit A is responsible for $30,000 of their damage, and the Master Policy should cover the remaining damage to their unit. Unit B is responsible for their full loss of $20,000 since the damage did not reach the deductible limit.

Per Occurrence - **each affected party is responsible for a portion of the deductible proportionate to their share of the loss**
Example - Unit A has a fire causing $12,000 in damage to it and $3,000 damage to the neighboring Unit B. Unit A has 80% of the total damage making them responsible for 80% of the deductible, and the Master Policy should cover the remaining damage to their unit. Unit B has 20% of the total damage making them responsible for 20% of the deductible, and the Master Policy should cover the remaining damage to their unit.

Per Building - **each affected party is responsible for a portion of the deductible proportionate to their share of the loss**
Example – Building 1 has a pipe burst causing $40,000 in damage across four units. Each of the four units has the same amount of damage; therefore, each unit is responsible for their share of the deductible (the deductible divided by four units equally). The Master Policy should cover the remaining amount.

Unit owners should carry a Condominium Unit Owner's 'HO6' Policy (or a Dwelling Fire policy if the owner rents out the unit) to insure their responsibility for applicable Master Policy deductibles as well any additions and improvements, losses to the unit not covered by the Master, personal belongings within the unit, and liability for their personal exposure. The personal policy should also include Loss Assessment coverage to protect against a special assessment by the Association to all owners equally for their share of an uninsured/underinsured loss to common property. Coverage for the applicable Master Policy deductible(s), as outlined by the association's covenants, can usually found under the Dwelling coverage on an HO6.

If we can be of further assistance to you or your personal insurance agent in answering any questions, we can be reached at 770-512-5000.

Instructions to order a Cerficate of Insurance for your Lender:

Please access the website at www.ecertsonline.com. Click on "Register with your Lender/ Mortgagees code" hyperlink below the Email address box. The system will request Your Name, Email Address & Registration Code which is CAD24COI.