



AMERICAN STANDARD INSURANCE COMPANY OF OHIO
470 S HILL ST
BUFORD GA 30518-3220

AmFam.com

1-800-MY AMFAM® (692-6326)

January 25, 2024

CHRISTINE A PULLIAM
85 S ALEXANDER ST
BUFORD GA 30518-3001

Regarding your Businessowners Policy

Our offer to renew your insurance policy is enclosed

Your renewal bill will be sent separately

Policy number	Billing account number	Renewal Date
91002-51359-71	627-632-105-88	3/31/2024

Thank you for putting your trust in American Standard Insurance Company of Ohio! We value your business and work hard to protect what's important to you.

What is in this packet?

- **Enclosed is our offer to renew the policy noted above.**

- For a summary of the policy coverage and limits provided, please see the enclosed Renewal Declarations. If you would like a more detailed explanation of the coverage, please refer to your policy and endorsements. We have also included other important and/or state specific notices relating to this policy.

What should I do?

- **Please review all of the enclosed information carefully.** Contact your agent if you would like to make any changes to your policy.

Anything else I should know?

- To accept our renewal offer and to maintain continuous coverage, we must receive payment by the date shown on your renewal billing notice, which will be sent separately.
- This renewal offer is only available to you if the premium for the prior term has been paid in full.

American Standard Insurance Company of Ohio
1-800-MY AMFAM (1-800-692-6326) Ext. 76000

Your Agent is:

Christine Pulliam

470 S Hill St
Buford GA 30518-3220
470-202-7315

49 COLLEGE ST
Jefferson GA 30549-1037
470-202-7315

cpulliam@amfam.com

NOTICE TO POLICYHOLDERS

This notice describes changes in your insurance policy. This notice is not a part of your policy. For complete information on all coverages, terms, conditions and exclusions, please review your policy and its coverage summary. If there is any conflict between your policy and this notice, the provisions of the policy shall prevail.

EXCLUSION – BIOMETRIC DATA, IDENTIFIERS OR INFORMATION, BPF 85 26 05 22

We are adding form BPF 85 26 05 22, Exclusion – Biometric Data, Identifiers Or Information to your renewal Businessowners policy with us. This form excludes liability coverage for claims arising out of, based upon, attributable to, or in any way relating to the unauthorized or illegal use of biometric data, biometric identifiers, or biometric information on others, directly or indirectly by you. Please read the exclusion carefully.



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BUFORD GA 30518-3001

Regarding your Businessowners Policy

Important information pertaining to your Renewal

Policy number	Renewal date
91002-51359-71	3/31/2024

Thank you for choosing American Family Insurance. We truly value you as our customer and are committed to providing you the support you need to protect the things that matter most.

American Family has added Commercial Cyber Data Breach Coverage to your Businessowners Policy on the renewal date listed above.

The additional premium charge for this Cyber Data Breach Coverage is \$29.00

The Commercial Cyber Data Breach Coverage highlights are outlined as follows:

- \$25,000 liability coverage limit for:
 - “Media” loss (libel; slander; defamation; infringement of copyright, trademark; service mark, etc.)
 - “Network Security” loss (your inability to access your computer system; transmission by you of malicious software code to another’s computer or their network)
 - “Data Compromise” loss (theft, loss or unauthorized access of personally protected information from your network or computer; regulatory fines levied against you for violations of federal or state privacy information breach laws (a \$10,000 sublimit applies to the regulatory fines portion))
- \$25,000 coverage limit for:
 - “Privacy Breach” loss (expenses associated with the loss of sensitive information from your computer or system such as notification to all affected individuals as well as state and federal regulatory agencies; credit monitoring fees following the privacy information loss; investigation fees associated with the determination as to how the loss of information was permitted to happen; crisis management expenses such as appointing public relations firms to respond to public reaction to the loss of information)
 - “System Compromise” loss (expenses associated with data replacement and computer system restoration)
- \$10,000 coverage limit for an “Extortion Threat” loss (ransom demands to restore your computer software and network from a systems penetration)
- \$10,000 coverage limit for “Funds Transfer Fraud” loss (intentional deception by a hacker to convince you to transfer funds from your account to their unauthorized account)
- \$10,000 coverage limit for “Payment Card Industry” loss (your failure to comply with the federal Payment Card Industry Data Security Standards, and the accompanying fines associated with this failure to comply)

\$1,000 deductible applies.

Additional coverage is available for the loss of income and continuing expenses you incur during the reconstruction period following a cyber data breach loss. Your agent can supply you with additional details concerning this coverage.

Please review the attached Commercial Cyber Data Breach Coverage forms carefully to ensure they meet your needs. If you would like to make changes to the available limits or to add loss of income associated with Cyber Breach to your policy, please contact your agent.

If you would like to reject Commercial Cyber Data Breach Coverage, please complete the Coverage Rejection form below and return in the enclosed envelope or contact your agent prior to the renewal date listed above for full premium refund. Rejection requests received after the renewal date will be refunded on a prorated basis.

Your agent has received a copy of this notice. If you have questions about this notice, please contact your agent listed below or call us at 1-800-MY AMFAM (1-800-692-6326) ext. 76000.

Commercial - Farm/Ranch Division
1-800-MY AMFAM (1-800-692-6326)

AMERICAN STANDARD INSURANCE COMPANY OF OHIO

Your American Family Agent is:

Christine Pulliam

cpulliam@amfam.com

470 S Hill St
Buford GA 30518-3220
470-202-7315

49 COLLEGE ST
Jefferson GA 30549-1037
470-202-7315

Coverage Rejection Form - Commercial Cyber Data Breach Coverage

If you wish to reject the Commercial Cyber Data Breach Coverage, please review, sign, and return this form in the enclosed envelope provided.

I choose to reject **Commercial Cyber Data Breach Coverage** and understand and agree that this coverage will not be added to my Businessowners Policy 91002-51359-71 on the policy Effective Date 3/31/2024. If I choose to add this coverage, I will contact my American Family agent.

Insured or Authorized Representative

Date

Please keep a copy of this waiver of Commercial Cyber Data Breach Coverage for your records.

Renewal Declarations Businessowners Policy

Please read your policy



American Standard Insurance Company of Ohio
6000 American Parkway
Madison WI 53783

For customer service and claims service
24 hours a day, 7 days a week

1-800-MY AMFAM (1-800-692-6326)
amfam.com

Named Insured And Mailing Address

Christine A Pulliam
85 S Alexander St
Buford GA 30518-3001

Policy Information

Policy number	Policy period	Billing account number
91002-51359-71	3/31/2024 to 3/31/2025 12:01 A.M. Standard Time at your mailing address shown above.	627-632-105-88

Business and Operations Information

Year Started: 2022
Description of Business and Operations: Landlord
Form of Business: Individual

Insurance applies only for coverages for which a limit of insurance or the word "Included" is shown unless coverage is provided by an endorsement. Blanket Insurance applies only for coverages for which a Blanket Limit of Insurance is shown.

As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

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

Policy Number: 91002-51359-71

Premium Information**Total Advance Premium Per Term (Excluding Surcharges and Terrorism):****Cyber Claim Support and Risk Management Surcharge:****Certified Acts of Terrorism Premium:****Total Advance Premium Per Term:****Premium with Customer Full Pay Discount
(not available on policies billed to a Third Party):**

This premium may be subject to adjustment. You may be charged a fee when: (a) you pay less than the full amount due; (b) your payment is late; and/or (c) when your bank does not honor your check or electronic payment. Refer to your Billing Notice for fee amounts.

Policy Level Coverages**Property Causes Of Loss**

Causes Of Loss Risks of Direct Physical Loss

General Liability

Liability And Medical Expense Limit \$1,000,000 Per Occurrence

Medical Expense Limit \$1,000

Other Than Products/Completed Operations Aggregate..... \$2,000,000

Products/Completed Operations Aggregate \$2,000,000

Cyber Data Breach Coverage Refer to BPF 84 76

Without Business Interruption

Vandalism Deductible - Residential Occupancies Refer to BP 83 02**Third Party Interest Information**

Name	Mailing Address
AMERIS BANK ITS SUCCESSORS AND/OR ASSIGNS	PO BOX 961292 FORT WORTH TX 76161-0292

Associated Buildings and Structures

Loan/Lease Number	Interest Type	Location Number	Building Number	Description Of Property
7166311858	First Mortgagee	1	1	Single Family Dwelling (1 Unit) - single family

Agent Information

Christine Pulliam

cpulliam@amfam.com

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 470-202-7315

49 COLLEGE ST
 Jefferson GA 30549-1037
 470-202-7315

AUTHORIZED
 REPRESENTATIVE

William B. West
 President

Rec
 Secretary

Policy Number: 91002-51359-71

Location 1 - Location Level Coverages**Location 1 - Location Details****Program:** Rental Dwelling**Location Address:** 79 CHURCH ST BUFORD GA 30518-3005**Location Description:****Per Location Property Deductible (Apply Per Location, Per Occurrence)**

Deductible \$5,000

Windstorm Or Hail Deductible

Deductible \$2,500

Policy Number: 91002-51359-71

Location 1 Building 1 - Building Level Coverages**Location 1 Building 1 - Building Level Details****Building Address:** 79 CHURCH ST BUFORD GA 30518-3005**Occupancy:** Single Family Dwelling (1 Unit)**Building Interest:** Owner - Leased to Other**Building Description:** single family**Building**

Limit Of Insurance \$458,500

Replacement Cost Coverage applies.

Business Income Options

Extended Number of Days For Ordinary Payroll Expense 60 Days - Included

Extended Number of Days For Extended Business Income 60 Days - Included

Business Income From Dependent Properties

Limit Of Insurance \$5,000

Business Income And Extra Expense - Revised Period of

Indemnity - Number Of Consecutive Days 12-Months

72 Hour Waiting Period applies.