



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/12/2025

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).

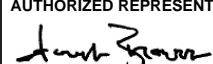
PRODUCER Hub International Mid Atlantic 1445 Research Blvd Suite 210 Rockville, MD 20850	CONTACT NAME: WHA.Nikki Fischer PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: WHA.Nikki.Fischer@hubinternational.com
	INSURER(S) AFFORDING COVERAGE
INSURED Pavion Corp 4151 Lafayette Center Drive Suite 700 Chantilly, VA 20151	INSURER A : Federal Insurance Company NAIC # 20281
	INSURER B : ACE American Insurance Company 22667
	INSURER C : Navigators Insurance Company 42307
	INSURER D : SiriusPoint Specialty Insurance Corporation 16820
	INSURER E :
	INSURER F :

COVERAGES **CERTIFICATE NUMBER:** **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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> X,C,U <input checked="" type="checkbox"/> Contractual GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Deductible = \$0			36078730	3/15/2025	3/15/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 2,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 SEXUAL ABUSE AN \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			73631641	3/15/2025	3/15/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			78198159	3/15/2025	3/15/2026	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below N / A			71836950	3/15/2025	3/15/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Excess Liability			GA24EXRZ0GPNSIV	3/15/2025	3/15/2026	10,000,000
D	Cont Prof/Poll			CPPLS0002693 01	3/15/2025	3/15/2026	5,000,000 claim/aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Cyber Liability-Homeland Insurance Company of New York- 3/15/2025 - 3/15/2026, Policy #03112025CYB, Limit \$5,000,000 (Includes Tech E&O - \$5,000,000)

CERTIFICATE HOLDER ***For Information Purposes Only***	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 

Declarations

Chubb Group of Insurance Companies
202B Hall's Mill Road
Whitehouse Station, NJ 08889

Named Insured and Mailing Address

PAVION CORP.
 1 EASTER COURT
 OWINGS MILLS, MD 21117

Policy Number 3607-87-30

Effective Date MARCH 15, 2025

Issued by the stock insurance company indicated below, herein called the company.

FEDERAL INSURANCE COMPANY

Incorporated under the laws of INDIANA

Producer No. 0050046-99999

Producer HUB INTERNATIONAL MID ATLANTIC INC
 1445 RESEARCH BLV. #210
 ROCKVILLE, MD 20850-0000

Policy Period

From: MARCH 15, 2025 To: MARCH 15, 2026
 12:01 A.M. standard time at the Named Insured's mailing address shown above.

Liability Coverage**Limit Of Insurance****GENERAL LIABILITY**

GENERAL AGGREGATE LIMIT	\$ 2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 2,000,000
EACH OCCURRENCE LIMIT	\$ 1,000,000
ADVERTISING INJURY AND PERSONAL INJURY AGGREGATE LIMIT	\$ 1,000,000
DAMAGE TO PREMISES RENTED TO YOU LIMIT	\$1,000,000
MEDICAL EXPENSES LIMIT	\$ 10,000

Policy Conditions

Endorsement

Policy Period MARCH 15, 2025 TO MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 3607-87-30

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

This Endorsement applies to the following forms:

PROPERTY DECLARATIONS
 LIABILITY DECLARATIONS
 INTERNATIONAL AUTOMOBILE LIABILITY
 INTERNATIONAL WORKERS COMP

The Named Insured is amended to include the following:

Named Insured

PAVION CORP.
 AFA PROTECTIVE SYSTEMS, INC.
 275 TECHNOLOGY SOLUTIONS, INC; SAFEWAY FIRE & PROTECTION
 COMPANY
 COLLABORATIVE TECHNOLOGY SOLUTIONS
 PAVION CORP; CORBETT TECHNOLOGY SOLUTIONS, INC.
 PAVION CORP; CORBETT TECHNOLOGY SOLUTIONS, INC. (FORMERLY
 COMMUNICATIONS SPECIALISTS, LLC)
 DAVED FIRE SYSTEMS, INC
 ELA HOLDING CORPORATION DBA TURNKEY TECHNOLOGY
 ENTERPRISE SECURITY SOLUTIONS LLC
 FIRECOM WEST INC.
 FIRECOM, INC.; FIRE SERVICE, INC.; CASEY FIRE SYSTEMS, INC.
 K & J INTEGRATED SYSTEMS, INC.
 LP NETWORK, INC.
 SECURITY SOURCE ALARMS, LLC
 NETRONIX INTEGRATION, INC.
 PHILADELPHIA PROTECTION BUREAU, INC.
 PREMIER SECURITY SOLUTIONS CORPORATION
 RFI ELECTRONICS, INC.- OREGON
 RFI ENTERPRISES, INC.
 R F I SECURITY, INC.
 SHORT CIRCUIT ELECTRONICS, INC.
 STAR ASSET SECURITY, LLC & ION247 LLC & INTERACTIVE VIDEO
 TECHNOLOGIES, LLC

Policy Conditions
(continued)

STRUCTURE WORKS, LLC; STRUCTURE WORKS, INC.
SYSTEMS ELECTRONICS, INC.
CITADEL SYSTEMS INTEGRATIONS, INC.
AUTOMATIC FIRE ALARM COMPANY, INC.
AFA (MASSACHUSETTS), INC.
AFA SOUTHEAST, INC.
ARC ELECTRONIC CONTROL SYSTEMS INC
CASEY FIRE SYSTEMS, INC.
CASEY FIRE SYSTEMS LLC
CASEY SYSTEMS INC.
CASEY SYSTEMS LLC
FT CLEARING CORP
FT CLEARING LLC
SYNERGX SYSTEMS LLC
FRCM CASE-ACME LLC
FIRE SERVICE INC.
FIRE SERVICE LLC
FIRECOM WEST, INC.
FIRECOM WEST LLC
ION247, LLC
INTERACTIVE VIDEO TECHNOLOGIES, LLC
STRUCTURE WORKS GLOBAL, INC.
43 MILLS STREET LLC
R F I SECURITY, INC. DBA THE CONTROL CENTER
RFI ELECTRONICS, INC.-OREGON DBA REECE COMPTE SECURITY
SOLUTIONS
ELA HOLDING CORPORATE DBA TURNKEY TECHNOLOGY
WORKSTRATUS, LLC
AMERICAN SENTRY ELECTRONIC SYSTEMS, INC.
CITADEL SYSTEMS INTERMEDIATE, LLC
SW SECURITY ALARM
INTEGRATED SECURITY & COMMUNICATIONS OF NEW JERSEY LLC
SECURITY SOURCE ALARMS, LLC
MULTIPLY ELECTRICAL SERVICES, INC.
SIGNET ELECTRONIC SYSTEMS, LLC
SIDEBAND SYSTEMS, INC.
CARON HOLDINGS CORPORATION
UPNINE, LLC
SIGNET, LLC
ECD SYSTEMS, LLC

All other terms and conditions remain unchanged.

Authorized Representative



Liability Insurance

Schedule of Forms

Policy Period MARCH 15, 2025 TO MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 3607-87-30

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

The following is a schedule of forms issued as of the date shown above:

<i>Form Number</i>	<i>Edition Date</i>	<i>Form Name</i>	<i>Effective Date</i>	<i>Date Issued</i>
80-02-2047	11-18	LIAB GLOBAL EXTENSION W/CONTROLLED UL INS	03/15/25	03/15/25
80-02-2322	4-94	DEFENSE OUTSIDE LIMITS	03/15/25	03/15/25
80-02-2362	4-01	CONDITION-WAIVER OF TRANS./RIGHTS OF RECOVERY	03/15/25	03/15/25
80-02-6541	3-05	CONDITION - PREMIUM AUDIT	03/15/25	03/15/25
80-02-6566	4-04	EXCLUSION - ASBESTOS	03/15/25	03/15/25
80-02-8531	1-16	EXCL - ACCESS/DISCLOSE CONFID. PERSONAL INFO.	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-2367	5-07	ADDL INSURED-SCHEDULED PERSON OR ORGANIZATION	03/15/25	03/15/25
80-02-8287	10-09	COVERAGE TERRITORY, SCHEDULED	03/15/25	03/15/25
80-02-2305	3-17	ADDL INSD - OWNER/LESS/CONT - ONGO OPS, SCHED	03/15/25	03/15/25
80-02-2305	3-17	ADDL INSD - OWNER/LESS/CONT - ONGO OPS, SCHED	03/15/25	03/15/25
80-02-2305	3-17	ADDL INSD - OWNER/LESS/CONT - ONGO OPS, SCHED	03/15/25	03/15/25
80-02-2305	3-17	ADDL INSD - OWNER/LESS/CONT - ONGO OPS, SCHED	03/15/25	03/15/25
80-02-0010	4-94	LIABILITY DECLARATIONS	03/15/25	03/15/25
80-02-0187	3-22	COV TERRITORY AMEND EXCL-DESIG COUNTRY/REGION	03/15/25	03/15/25
80-02-2000	4-01	GENERAL LIABILITY	03/15/25	03/15/25
80-02-2012	6-98	EMPLOYEE BENEFITS ERRORS OR OMISSIONS	03/15/25	03/15/25
80-02-2022	4-94	STOP GAP	03/15/25	03/15/25
80-02-2095	3-10	ABUSE OR MOLESTATION-CLAIMS MADE AND REPORTED	03/15/25	03/15/25
80-02-2371	4-01	ADD'L INSURED - LIMITED LIABILITY COMPANIES	03/15/25	03/15/25
80-02-2373	4-94	358926.1(1-23)AI/OWNER/LESSEES/CONT/SCHED	03/15/25	03/15/25
80-02-2373	4-94	358926.2(01-23)AI/OWNER/LESSEES/CONT/PCO	03/15/25	03/15/25
80-02-2373	4-94	380531.1(02/24)AI-OWNERS, LESSEES OR CONTRACT	03/15/25	03/15/25
80-02-2373	4-94	380531.2(02/24)AI-OWNERS, LESSEES OR CONTRACT	03/15/25	03/15/25
80-02-2373	4-94	358926.1(1-23)AI/OWNER/LESSEES/CONT/SCHED	03/15/25	03/15/25
80-02-2373	4-94	358926.2(01-23)AI/OWNER/LESSEES/CONT/PCO	03/15/25	03/15/25
80-02-2373	4-94	358926.1(1-23)AI/OWNER/LESSEES/CONT/SCHED	03/15/25	03/15/25
80-02-2373	4-94	358926.2(01-23)AI/OWNER/LESSEES/CONT/PCO	03/15/25	03/15/25
80-02-2653	7-09	PRIMARY NONCONTRIBUTORY-SCHEDULE PERS OR ORG	03/15/25	03/15/25
80-02-6403	1-15	CAP ON CERTIFIED TERRORISM LOSSES	03/15/25	03/15/25

continued

Schedule of Forms*(continued)*

80-02-6528	1-13	EXCL-INFO LAWS INCL UNAUTH OR UNSOLICIT COMMUN	03/15/25	03/15/25
80-02-6554	3-17	PER LOC/PROJECT LIMITS WITH COMB TOTAL AGGREG	03/15/25	03/15/25
80-02-6595	5-06	DEDUCTIBLES	03/15/25	03/15/25
80-02-8290	5-10	EXCL - INTELLECTUAL PROPERTY LAWS OR RIGHTS	03/15/25	03/15/25
80-02-8298	4-12	COND-WAIVR OF GOV'T IMMUNITY- PORT AUTH NY/NJ	03/15/25	03/15/25
80-02-8327	4-12	EXCL-ABUSE MOLESTATION-ACTUAL ALLEGED THREAT	03/15/25	03/15/25
80-02-8422	4-12	EXCLUSION - POLLUTION	03/15/25	03/15/25
80-02-8423	4-12	EXCLUSION - LOSS OF USE ELECTRONIC DATA	03/15/25	03/15/25
80-02-8425	1-14	EXCL-ALCOHOLIC BEVERAGE TYPE BUSINESSES	03/15/25	03/15/25
80-02-8446	3-17	ADDT INSD - OWNER/LESS/CONT - COMP OPS, SCHED	03/15/25	03/15/25
80-02-8446	3-17	ADDT INSD - OWNER/LESS/CONT - COMP OPS, SCHED	03/15/25	03/15/25
80-02-8446	3-17	ADDT INSD - OWNER/LESS/CONT - COMP OPS, SCHED	03/15/25	03/15/25
80-02-8446	3-17	ADDT INSD - OWNER/LESS/CONT - COMP OPS, SCHED	03/15/25	03/15/25
80-02-8535	12-16	EXCL - CONSOLIDATED (WRAP-UP) PROGRAM, SCHED	03/15/25	03/15/25
80-02-8559	3-17	EXCL-ACCESS/DISCLOSE CONFID. PERS INFO.-AI/PI	03/15/25	03/15/25
80-02-8635	11-17	COV-PROD WITHDRWL EXP & CRISIS ASSISTANCE EXP	03/15/25	03/15/25
80-02-8636	11-17	WAR - EXCLUSION	03/15/25	03/15/25

last page

Liability Insurance**Endorsement**

Policy Period MARCH 15, 2025 TO MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 3607-87-30

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

This Endorsement applies to the following forms:

GENERAL LIABILITY

Who is an Insured

**Owners, Lessees Or
Contractors -
Scheduled Person Or
Organization**

Under Who Is An Insured, the following is added.

A. Persons or organizations shown in the Schedule are additional **Insureds**, but they are **Insureds** only with respect to liability for **bodily injury, property damage, advertising injury or personal injury** caused, in whole or in part, by:

1. your acts or omissions; or
2. the acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional **insured(s)** at the location(s) shown in the Schedule.

B. However, no person or organization shown in the Schedule is An **Insured** for **bodily injury or property damage** occurring after:

1. all work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the person or organization shown in the Schedule at the location of the covered operations has been

completed; or

2. that portion of your work out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

Schedule

Name of Person or Organization:

Persons or organizations whom you are required by a written contract or agreement to afford status as an additional insured for such insurance as is afforded by this policy, provided that such written contract or agreement is executed prior to the loss.

Location of Covered Operations

All other terms and conditions remain unchanged.

Authorized Representative



Liability Insurance

Endorsement

Policy Period MARCH 15, 2025 TO MARCH 15, 2026
Effective Date MARCH 15, 2025
Policy Number 3607-87-30
Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

This Endorsement applies to the following forms:

GENERAL LIABILITY

Who is an Insured

Owners, Lessees Or Contractors - Completed Operations

Under Who Is An Insured, the following is added.

Person(s) or organization(s) shown in the Schedule are **insureds**, but they are **insureds** only with respect to liability for **bodily injury** or **property damage** caused, in whole or in part, by **your work** at the location designated and described in the Schedule performed for that additional **insured** and included in the **products-completed operations hazard**.

Schedule

Name of Person or Organization :

Persons or organizations whom you are required by a written contract or agreement to afford status as an additional insured for such insurance as is afforded by this policy, provided that such written contract or agreement is executed prior to the loss.

Location

All other terms and conditions remain unchanged.

Authorized Representative

A handwritten signature in black ink, appearing to be "P. M. S.", written above a horizontal line.

Endorsement

Policy Period MARCH 15, 2025 TO MARCH 15, 2026
Effective Date MARCH 15, 2025
Policy Number 3607-87-30
Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

This Endorsement applies to the following forms:

GENERAL LIABILITY

Under Who Is An Insured, the following provision is added.

Who Is An Insured

**Additional Insured -
Scheduled Person
Or Organization**

Persons or organizations shown in the Schedule are **insureds**; but they are **insureds** only if you are obligated pursuant to a contract or agreement to provide them with such insurance as is afforded by this policy.

However, the person or organization is an **insured** only:

- if and then only to the extent the person or organization is described in the Schedule;
- to the extent such contract or agreement requires the person or organization to be afforded status as an **insured**;
- for activities that did not occur, in whole or in part, before the execution of the contract or agreement; and
- with respect to damages, loss, cost or expense for injury or damage to which this insurance applies.

No person or organization is an **insured** under this provision:

- that is more specifically identified under any other provision of the Who Is An Insured section (regardless of any limitation applicable thereto).
- with respect to any assumption of liability (of another person or organization) by them in a contract or agreement. This limitation does not apply to the liability for damages, loss, cost or expense for injury or damage, to which this insurance applies, that the person or organization would have in the absence of such contract or agreement.

Liability Endorsement
(continued)

Under Conditions, the following provision is added to the condition titled Other Insurance.

Conditions

**Other Insurance –
Primary, Noncontributory
Insurance – Scheduled
Person Or Organization**

If you are obligated, pursuant to a contract or agreement, to provide the person or organization shown in the Schedule with primary insurance such as is afforded by this policy, then in such case this insurance is primary and we will not seek contribution from insurance available to such person or organization.

Schedule

Persons or organizations that you are obligated, pursuant to a contract or agreement, to provide with such insurance as is afforded by this policy.

All other terms and conditions remain unchanged.

Authorized Representative



Conditions

(continued)

***Transfer Or Waiver Of
Rights Of Recovery
Against Others***

We will waive the right of recovery we would otherwise have had against another person or organization, for loss to which this insurance applies, provided the **insured has waived their rights** of recovery against such person or organization in a contract or agreement that is executed before such loss.

To the extent that the **insured's** rights to recover all or part of any payment made under this insurance have not been waived, those rights are transferred to us. The **insured** must do nothing after loss to impair them. At our request, the **insured** will bring **suit or transfer those rights to us** and help us enforce them.

This condition does not apply to **medical expenses**.

Policy Conditions**Endorsement**

<i>Policy Period</i>	MARCH 15, 2025 TO MARCH 15, 2026
<i>Effective Date</i>	MARCH 15, 2025
<i>Policy Number</i>	3607-87-30
<i>Insured</i>	PAVION CORP.
<i>Name of Company</i>	FEDERAL INSURANCE COMPANY
<i>Date Issued</i>	

This Endorsement applies to the following forms:

COMMON POLICY CONDITIONS

Conditions

Under Conditions, the following condition is added.

**Notice Of Cancellation
To Scheduled Persons
Or Organizations When
We Cancel**

When we cancel this policy for any reason, other than non-payment of premium, we will notify person(s) or organization(s) shown in the Schedule at least 30 days in advance of the cancellation date.

Any failure by us to notify such person(s) or organization(s) will not:

- impose any liability or obligation of any kind upon us; or
- invalidate such cancellation.

Schedule

If you are obligated, pursuant to a written contract or agreement, to provide person(s) or organization(s) with notice of cancellation, then we will notify such person(s) or organization(s) provided that within 15 days of the date we send notice of cancellation to the first named insured, the first named insured or producer of record provides us with a spreadsheet containing the name, mailing address and, if available, e-mail address of the person(s) or organization(s).

All other terms and conditions remain unchanged.

Conditions
(continued)

Authorized Representative

A handwritten signature in black ink, appearing to be "R. M. S.", written over a horizontal line.

Endorsement

Policy Period MARCH 15, 2025 TO MARCH 15, 2026
Effective Date MARCH 15, 2025
Policy Number 3607-87-30
Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

This Endorsement applies to the following forms:

GENERAL LIABILITY

Under Limits Of Insurance, the following provisions are added.

Limits Of Insurance**Per Location Or Per Project Limit Of Insurance With Combined Total Aggregate Limit**

- A. Subject to the Combined Total Aggregate Limit shown in the Schedule, the most we will pay for the sum of all damages for **bodily injury** and **property damage** and for all **medical expenses**, which can be attributed only to operations at a single **location** or at a single designated **project**, is described in paragraphs A.1. through A.4. below.
1. A separate General Aggregate Limit will apply to each **location** or **project**, and such limit is equal to the General Aggregate Limit shown in the Declarations.
 2. Subject to the Each Occurrence Limit and all other applicable limits, the separate General Aggregate Limit described in subparagraph A.1. above is the most we will pay for the sum of all damages for **bodily injury** and **property damage**, except in connection with injury or damage included in the **products-completed operations hazard**, and for all **medical expenses**, regardless of the number of:
 - a. **insureds**;
 - b. claims made or **suits** brought; or
 - c. persons or organizations making claims or bringing **suits**.

Limits Of Insurance

Per Location Or Per Project Limit Of Insurance With Combined Total Aggregate Limit (continued)

3. Any amount paid for damages or **medical expenses** will reduce the amount of the separate General Aggregate Limit described in subparagraph A.1. above available for any other payment for that **location** or **project**. Such payments will not reduce the General Aggregate Limit shown in the Declarations and they will not reduce the separate General Aggregate Limit for any other operations at a single **location** or single **project**.
 4. The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expenses continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable separate General Aggregate Limit.
- B. Subject to the Combined Total Aggregate Limit shown in the Schedule, the most we will pay for the sum of all damages for **bodily injury** and **property damage** and for all **medical expenses**, which cannot be attributed only to operations at a single **location** or a single **project**, is described in paragraphs B.1 and B.2 below.
1. Any amount paid for damages or **medical expenses** will reduce the amount of the General Aggregate Limit available for any other payment; and
 2. Payments described in subparagraph B.1. above will not reduce the separate General Aggregate Limit applicable to operations at a single **location** or a single **project**.
- C. Subject to the separate General Aggregate Limit and all other applicable limits, the Combined Total Aggregate Limit shown in the Schedule is the most we will pay for the combined sum of amounts described in paragraphs A. and B. above, regardless of the number of **locations** or **projects**.
- D. If applicable, any payments we make for **bodily injury** or **property damage** included in the **products-completed operations hazard** will reduce the Products-Completed Operations Aggregate Limit regardless of the number of **locations** or **projects**, and will not reduce the General Aggregate Limit or the separate General Aggregate Limit applicable to a single **location** or a single **project**.
- E. If the applicable **project** has been abandoned, delayed or abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the **project** will still be deemed to be the same **project**. **Project** will be deemed to include, collectively, all **locations** and sites on which you are performing operations that are called for in the applicable contracts or agreements pertaining to such **project**.
- F. The provisions of the section titled Limits Of Insurance not otherwise modified by this endorsement will continue to apply as stipulated.

As used in this endorsement, the following words and phrases have special meanings described below.

Definitions

Location

Location means premises involving the same or connecting lots, or premise whose connection is interrupted only by a street, roadway, waterway or right-of-way of a railroad.

Project

Project means a project (taking place away from premises owned by or rented to you) on which you are performing operations.

Liability Insurance

Endorsement

Effective Date MARCH 15, 2025

Policy Number 3607-87-30

Schedule

Combined Total Aggregate Limit: \$ 10,000,000

All other terms and conditions remain unchanged.

Authorized Representative



FEDERAL INSURANCE COMPANY

Incorporated under the laws of Indiana

POLICY NUMBER: (25) 7363-16-41

COMMERCIAL AUTO

BUSINESS AUTO DECLARATIONS

ITEM ONE

PRODUCER:

HUB INTERNATIONAL MID ATLANTIC INC

NAMED INSURED: PAVION CORP.

MAILING ADDRESS: 1 EASTER COURT
OWINGS MILLS, MD 21117

POLICY PERIOD: From 03-15-2025 to 03-15-2026 at 12:01 A.M. Standard Time at your mailing address shown above

PREVIOUS POLICY NUMBER: (24) 7363-16-41

FORM OF BUSINESS:

CORPORATION LIMITED LIABILITY COMPANY INDIVIDUAL
 PARTNERSHIP OTHER _____

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Premium shown is payable at inception: \$ _____

AUDIT PERIOD (IF APPLICABLE)	<input checked="" type="checkbox"/>	ANNUALLY	<input type="checkbox"/>	SEMI-ANNUALLY	<input type="checkbox"/>	QUARTERLY	<input type="checkbox"/>	MONTHLY
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ENDORSEMENTS ATTACHED TO THIS POLICY:

IL 00 17 – Common Policy Conditions (IL 01 46 in Washington)

IL 00 21 – Broad Form Nuclear Exclusion (not Applicable in New York) (IL 01 98 in Washington)

SEE SCHEDULE OF FORMS AND ENDORSEMENTS

COUNTERSIGNED _____ BY _____
(Date) (Authorized Representative)

Policy Number: (24)7363-16-41

These declarations Pages with Policy Provisions and Endorsement(s) Complete above numbered policy.

In Witness Whereof, the company issuing this policy has caused this policy to be signed by its authorized officers, but this policy shall not be valid unless also signed by a duly authorized Representative of the company.

Federal Insurance Company



President



Secretary



Authorized Representative

Policy Number
(24)7363-16-41

ENDORSEMENT

Named Insured PAVION CORP.

Effective Date: 03-15-2025
12:01 A.M., Standard Time

Agent Name HUB INTERNATIONAL MID ATLANTIC INC

Agent No. 50046-999

SCHEDULE OF NAMED INSURED(S)

Pavion Corp.
Corbett Technology Solution Inc
Communications Specialist LLC
Citadel Systems Integration Inc
Collaborative Technology Solutions LLC
AFA Protective Systems, Inc.
Automatic Fire Alarm Company, Inc.
AFA (Massachusetts), Inc.
ASA Southeast, Inc.
ARC Electrical Control Systems Inc
Daved Fire Systems, Inc.
Firecom, Inc
Casey Fire Systems Inc
Casey Fire Systems LLC
Casey Systems Inc
Casey Systems LLC
FT Clearing Corp
FT Clearing LLC
Synergx Systems LLC
FRCM Case-Acme LLC
Fire Service Inc
Fire Service LLC
Firecom West, Inc
Firecom West LLC
Multiplex Electrical Services, Inc.
Star Asset Security, LLC
ION247, LLC

Policy Number
(24)7363-16-41

ENDORSEMENT

Named Insured PAVION CORP.

Effective Date: 03-15-2025
12:01 A.M., Standard Time

Agent Name HUB INTERNATIONAL MID ATLANTIC INC

Agent No. 50046-999

SCHEDULE OF NAMED INSURED(S)
Interactive Video Technologies, LLC
Philadelphia Protection Bureau, Inc. The Protection Bureau T/A
Structure Works, LLC
Structure Works, Inc
Structure Works Global, Inc
43 Mill Street LLC
Systems Electronics Inc
Enterprise Security Solutions LLC
275 Technology Solutions, Inc., dba Safeway Fire & Protection
K&J Integrated Systems, Inc.
Premier Security Solutions Corporation
RFI Enterprises, Inc.
R F I Security, Inc.
Workstratus, LLC
RFI Electronics, Inc. - Oregon, dba REECE Complete Security
Solutions ELA Holding Corporation dba Turnkey Technology
American Sentry Electronic Systems, Inc.
Citadel Systems Intermediate, LLC
SW Security Alarm
Integrated Security & Communications of New Jersey, LLC
Signet Electronic Systems, LLC
Sideband Systems, Inc.
Caron Holdings Corporation
UpNine, LLC
Signet, LLC
Security Source Alarms, LLC
ECD Systems, LLC

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMMERCIAL AUTOMOBILE BROAD FORM ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

This endorsement modifies the Business Auto Coverage Form.

1. EXTENDED CANCELLATION CONDITION

Paragraph A.2.b. – CANCELLATION - of the COMMON POLICY CONDITIONS form IL 00 17 is deleted and replaced with the following:

- b. 60 days before the effective date of cancellation if we cancel for any other reason.

2. BROAD FORM INSURED

A. Subsidiaries and Newly Acquired or Formed Organizations As Insureds

The Named Insured shown in the Declarations is amended to include:

1. Any legally incorporated subsidiary in which you own more than 50% of the voting stock on the effective date of the Coverage Form. However, the Named Insured does not include any subsidiary that is an "insured" under any other automobile policy or would be an "insured" under such a policy but for its termination or the exhaustion of its Limit of Insurance.
2. Any organization that is acquired or formed by you and over which you maintain majority ownership. However, the Named Insured does not include any newly formed or acquired organization:
 - (a) That is an "insured" under any other automobile policy;
 - (b) That has exhausted its Limit of Insurance under any other policy; or
 - (c) 180 days or more after its acquisition or formation by you, unless you have given us written notice of the acquisition or formation.

Coverage does not apply to "bodily injury" or "property damage" that results from an "accident" that occurred before you formed or acquired the organization.

B. Employees as Insureds

Paragraph A.1. – WHO IS AN INSURED – of SECTION II – LIABILITY COVERAGE is amended to add the following:

- d. Any "employee" of yours while using a covered "auto" you don't own, hire or

borrow in your business or your personal affairs.

C. Lessors as Insureds

Paragraph A.1. – WHO IS AN INSURED – of SECTION II – LIABILITY COVERAGE is amended to add the following:

- e. The lessor of a covered "auto" while the "auto" is leased to you under a written agreement if:
 - (1) The agreement requires you to provide direct primary insurance for the lessor; and
 - (2) The "auto" is leased without a driver. Such leased "auto" will be considered a covered "auto" you own and not a covered "auto" you hire. However, the lessor is an "insured" only for "bodily injury" or "property damage" resulting from the acts or omissions by:
 1. You;
 2. Any of your "employees" or agents; or
 3. Any person, except the lessor or any "employee" or agent of the lessor, operating an "auto" with the permission of any of 1. and/or 2. above.

D. Persons And Organizations As Insureds Under A Written Insured Contract

Paragraph A.1 – WHO IS AN INSURED – of SECTION II – LIABILITY COVERAGE is amended to add the following:

- f. Any person or organization with respect to the operation, maintenance or use of a covered "auto", provided that you and such person or organization have agreed under an express provision in a written "insured contract", written agreement or a written permit issued to you by a governmental or public authority to add such person or organization to this policy as an "insured". However, such person or organization is an "insured" only:

- (1) with respect to the operation, maintenance or use of a covered "auto"; and
- (2) for "bodily injury" or "property damage" caused by an "accident" which takes place after:
 - (a) You executed the "insured contract" or written agreement; or
 - (b) The permit has been issued to you.

3. FELLOW EMPLOYEE COVERAGE

EXCLUSION B.5. - FELLOW EMPLOYEE – of SECTION II – LIABILITY COVERAGE does not apply.

4. PHYSICAL DAMAGE – ADDITIONAL TEMPORARY TRANSPORTATION EXPENSE COVERAGE

Paragraph A.4.a. – TRANSPORTATION EXPENSES – of SECTION III – PHYSICAL DAMAGE COVERAGE is amended to provide a limit of \$50 per day for temporary transportation expense, subject to a maximum limit of \$1,000.

5. AUTO LOAN/LEASE GAP COVERAGE

Paragraph A. 4. – COVERAGE EXTENSIONS - of SECTION III – PHYSICAL DAMAGE COVERAGE is amended to add the following:

c. Unpaid Loan or Lease Amounts

In the event of a total "loss" to a covered "auto", we will pay any unpaid amount due on the loan or lease for a covered "auto" minus:

1. The amount paid under the Physical Damage Coverage Section of the policy; and
2. Any:
 - a. Overdue loan/lease payments at the time of the "loss";
 - b. Financial penalties imposed under a lease for excessive use, abnormal wear and tear or high mileage;
 - c. Security deposits not returned by the lessor;
 - d. Costs for extended warranties, Credit Life Insurance, Health, Accident or Disability Insurance purchased with the loan or lease; and
 - e. Carry-over balances from previous loans or leases.

We will pay for any unpaid amount due on the loan or lease if caused by:

1. Other than Collision Coverage only if the Declarations indicate that Comprehensive Coverage is provided for any covered "auto";
2. Specified Causes of Loss Coverage only if the Declarations indicate that Specified Causes of Loss Coverage is provided for any covered "auto"; or
3. Collision Coverage only if the Declarations indicate that Collision Coverage is provided for any covered "auto".

6. RENTAL AGENCY EXPENSE

Paragraph A. 4. – COVERAGE EXTENSIONS – of SECTION III – PHYSICAL DAMAGE COVERAGE is amended to add the following:

d. Rental Expense

We will pay the following expenses that you or any of your "employees" are legally obligated to pay because of a written contract or agreement entered into for use of a rental vehicle in the conduct of your business:

MAXIMUM WE WILL PAY FOR ANY ONE CONTRACT OR AGREEMENT:

1. \$2,500 for loss of income incurred by the rental agency during the period of time that vehicle is out of use because of actual damage to, or "loss" of, that vehicle, including income lost due to absence of that vehicle for use as a replacement;
2. \$2,500 for decrease in trade-in value of the rental vehicle because of actual damage to that vehicle arising out of a covered "loss"; and
3. \$2,500 for administrative expenses incurred by the rental agency, as stated in the contract or agreement.
4. \$7,500 maximum total amount for paragraphs 1., 2. and 3. combined.

7. EXTRA EXPENSE – BROADENED COVERAGE

Paragraph A.4. – COVERAGE EXTENSIONS – of SECTION III – PHYSICAL DAMAGE COVERAGE is amended to add the following:

e. Recovery Expense

We will pay for the expense of returning a stolen covered "auto" to you.

8. AIRBAG COVERAGE

Paragraph B.3.a. - EXCLUSIONS – of SECTION III – PHYSICAL DAMAGE COVERAGE does not apply to the accidental or unintended discharge of an airbag. Coverage is excess over any other collectible insurance or warranty specifically designed to provide this coverage.

9. AUDIO, VISUAL AND DATA ELECTRONIC EQUIPMENT - BROADENED COVERAGE

Paragraph C.1.b. – LIMIT OF INSURANCE - of SECTION III - PHYSICAL DAMAGE is deleted and replaced with the following:

- b. \$2,000 is the most we will pay for "loss" in any one "accident" to all electronic equipment that reproduces, receives or transmits audio, visual or data signals which, at the time of "loss", is:
 - (1) Permanently installed in or upon the covered "auto" in a housing, opening or other location that is not normally used by the "auto" manufacturer for the installation of such equipment;
 - (2) Removable from a permanently installed housing unit as described in Paragraph 2.a. above or is an integral part of that equipment; or
 - (3) An integral part of such equipment.

10. GLASS REPAIR – WAIVER OF DEDUCTIBLE

Under Paragraph D. - DEDUCTIBLE – of SECTION III – PHYSICAL DAMAGE COVERAGE the following is added:

No deductible applies to glass damage if the glass is repaired rather than replaced.

11. TWO OR MORE DEDUCTIBLES

Paragraph D.- DEDUCTIBLE – of SECTION III – PHYSICAL DAMAGE COVERAGE is amended to add the following:

If this Coverage Form and any other Coverage Form or policy issued to you by us that is not an automobile policy or Coverage Form applies to the same “accident”, the following applies:

1. If the deductible under this Business Auto Coverage Form is the smaller (or smallest) deductible, it will be waived; or
2. If the deductible under this Business Auto Coverage Form is not the smaller (or smallest) deductible, it will be reduced by the amount of the smaller (or smallest) deductible.

12. AMENDED DUTIES IN THE EVENT OF ACCIDENT, CLAIM, SUIT OR LOSS

Paragraph A.2.a. - DUTIES IN THE EVENT OF AN ACCIDENT, CLAIM, SUIT OR LOSS of SECTION IV - BUSINESS AUTO CONDITIONS is deleted and replaced with the following:

- a. In the event of “accident”, claim, “suit” or “loss”, you must promptly notify us when the “accident” is known to:
 - (1) You or your authorized representative, if you are an individual;
 - (2) A partner, or any authorized representative, if you are a partnership;
 - (3) A member, if you are a limited liability company; or
 - (4) An executive officer, insurance manager, or authorized representative, if you are an organization other than a partnership or limited liability company.

Knowledge of an “accident”, claim, “suit” or “loss” by other persons does not imply that the persons listed above have such knowledge. Notice to us should include:

- (1) How, when and where the “accident” or “loss” occurred;
- (2) The “insured’s” name and address; and
- (3) To the extent possible, the names and addresses of any injured persons or witnesses.

13. WAIVER OF SUBROGATION

Paragraph A.5. - TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US of SECTION IV – BUSINESS AUTO CONDITIONS is deleted and replaced with the following:

5. We will waive the right of recovery we would otherwise have against another person or organization for “loss” to which this insurance applies, provided the “insured” has waived

their rights of recovery against such person or organization under a contract or agreement that is entered into before such “loss”.

To the extent that the “insured’s” rights to recover damages for all or part of any payment made under this insurance has not been waived, those rights are transferred to us. That person or organization must do everything necessary to secure our rights and must do nothing after “accident” or “loss” to impair them. At our request, the insured will bring suit or transfer those rights to us and help us enforce them.

14. UNINTENTIONAL FAILURE TO DISCLOSE HAZARDS

Paragraph B.2. – CONCEALMENT, MISREPRESENTATION or FRAUD of SECTION IV – BUSINESS AUTO CONDITIONS - is deleted and replaced with the following:

If you unintentionally fail to disclose any hazards existing at the inception date of your policy, we will not void coverage under this Coverage Form because of such failure.

15. AUTOS RENTED BY EMPLOYEES

Paragraph B.5. - OTHER INSURANCE of SECTION IV – BUSINESS AUTO CONDITIONS - is amended to add the following:

- e. Any “auto” hired or rented by your “employee” on your behalf and at your direction will be considered an “auto” you hire. If an “employee’s” personal insurance also applies on an excess basis to a covered “auto” hired or rented by your “employee” on your behalf and at your direction, this insurance will be primary to the “employee’s” personal insurance.

16. HIRED AUTO – COVERAGE TERRITORY

Paragraph B.7.b.(5). - POLICY PERIOD, COVERAGE TERRITORY of SECTION IV – BUSINESS AUTO CONDITIONS is deleted and replaced with the following:

- (5) A covered “auto” of the private passenger type is leased, hired, rented or borrowed without a driver for a period of 45 days or less; and

17. RESULTANT MENTAL ANGUISH COVERAGE

Paragraph C. of - SECTION V – DEFINITIONS is deleted and replaced by the following:

“Bodily injury” means bodily injury, sickness or disease sustained by any person, including mental anguish or death as a result of the “bodily injury” sustained by that person.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NON-CONTRIBUTORY LIABILITY INSURANCE

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Pavion Corp
Endorsement Effective Date: 3/15/25

SCHEDULE

Name(s) Of Person(s) Or Organization(s):
Blanket - all organizations with whom the insured holds a contract
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Item 5. – “**Other Insurance**” of Item B. – “**General Conditions**” under Section IV – “**Business Auto Conditions**”:

e. Regardless of the provisions of Paragraph 5.a. through d. above, for any liability arising out of the ownership, maintenance, use, rental, lease, loan, hire or borrowing by an “insured” of a covered “auto” for which an “insured” is contractually obligated to provide primary insurance coverage to a client, this Coverage Form will be primary and non-contributory with respect to the Persons or Organizations in the schedule, regardless of the availability or existence of other collectible insurance under any other Coverage Form or policy that applies on a primary basis.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**NOTICE OF CANCELLATION
(OTHER THAN NONPAYMENT OF PREMIUM)
SCHEDULED PERSON(S) OR ORGANIZATION(S)**

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
BUSINESS AUTO PHYSICAL DAMAGE COVERAGE FORM
GARAGE COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to the coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

SCHEDULE

Name of Person(s) or Organization(s):

IF YOU ARE OBLIGATED, PURSUANT TO A WRITTEN CONTRACT OR AGREEMENT, TO PROVIDE PERSON(S) OR ORGANIZATION(S) WITH NOTICE OF CANCELLATION, THEN WE WILL NOTIFY SUCH PERSON(S) OR ORGANIZATION(S) PROVIDED THAT WITHIN 15 DAYS OF THE DATE WE SEND NOTICE OF CANCELLATION TO THE FIRST NAMED INSURED, THE FIRST NAMED INSURED OR THE PRODUCER OF RECORD PROVIDES US WITH A SPREADSHEET CONTAINING THE NAME, MAILING ADDRESS AND, IF AVAILABLE, E-MAIL ADDRESS OF THE PERSON(S) OR ORGANIZATION(S) .

Address:

Under Common Policy Conditions the following condition is added:

**NOTICE OF CANCELLATION (OTHER THAN NONPAYMENT OF PREMIUM)
SCHEDULED PERSON(S) OR ORGANIZATION(S)**

When we cancel this policy for any reason other than nonpayment of premium, we will notify the person(s) or organization(s) described in the SCHEDULE at least 30 days in advance of the cancellation date.

Any failure by us to notify such person(s) or organization(s) will not:

- Impose any liability or obligation of any kind upon us; or
- Invalidate such cancellation.

ISSUING COMPANY
ACE AMERICAN INSURANCE COMPANY
NCCI CARRIER CODE
12165

**Workers' Compensation
and Employers Liability
Insurance Policy
Information Page**

POLICY NUMBER
Symbol: WLR Number: (26)7183-69-50
PREVIOUS POLICY NO.
Symbol: WLR Number: (25)7183-69-50

New Renewal Rewrite
 Individual Partnership Association
 Corporation Joint Venture Other Legal Entity

Item 1. Named Insured
PAVION CORP.
1 EASTER COURT
OWINGS MILLS MD 21117

Inter/Intrastate ID No.: 917617546

Federal Employer ID No.: 542054948

Mailing Address

Employer's ID No.:
PIIC CODE: 7373

For other named insured see Extension of Information Page – Schedule of Named Insured, WC 99 99 99 A
For other workplaces see Extension of Information Page – Schedule of Other Workplaces, WC 99 99 99 B

Item 2. Policy period: From 03-15-2025 To 03-15-2026 12:01 A.M., standard time at the named insured's mailing address.

Item 3A. Workers' Compensation Insurance: Part One of the policy applies to the Workers' Compensation Law of the states listed here:
AK,AL,AR,AZ,CA,CO,CT,DC,DE,FL,GA,IL,IN,KS,KY,LA,MA,MD,MI,MN,MO,MS,NC,NE,NH
NJ,NM,NV,NY,OR,PA,RI,SC,SD,TN,TX,UT,VA,VT,WV

Item 3B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3A.
The limits of our liability under Part Two are:
Bodily Injury by Accident \$ 1,000,000 each accident
Bodily Injury by Disease \$ 1,000,000 policy limit
Bodily Injury by Disease \$ 1,000,000 each employee

Item 3C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here:
ALL STATES EXCEPT
ND,OH,WA,WY,
AND STATES DESIGNATED IN ITEM 3.A

Item 3D. This Policy includes these endorsements and schedules:
See schedule of Forms and Endorsements WC999999D

Item 4. The premium for this policy will be determined by our Manual of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.
SEE EXTENSION OF INFORMATION PAGE –CLASSIFICATIONS

If indicated here, interim adjustments of premium will be made:
 Semi-Annually Quarterly Monthly


Minimum Premium collected in NJ \$
Total Estimated Premium \$
Deposit Premium \$

PRODUCER NAME AND MAILING ADDRESS
HUB INTERNATIONAL MID
ATLANTIC INC
1445 RESEARCH BOULEVARD
SUITE 210
ROCKVILLE MD 20850

Target Risk No:
Fac. Reins. Yes No

PRODUCER CODE: 278962 52-0337120 ALO
COMMISSION: Percent: 8.00 Amount: 60503.92

MARKETING OFFICE: ALL OTHER
ISSUE DATE:



Authorized Representative

EXTENSION OF INFORMATION PAGE

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

SCHEDULE OF NAMED INSURED

ITEM 1., NAMED INSURED, OF THE INFORMATION PAGE IS EXTENDED AS FOLLOWS:

NAMED INSURED	FEIN
PAVION CORP.	542054948
DOING BUSINESS AS:	
CORBETT TECHNOLOGY SOLUTIONS INC	
AFA (MASSACHUSETTS), INC.	132875005
AFA PROTECTIVE SYSTEMS, INC.	131805009
AFA SOUTHEAST, INC.	582172208
AMERICAN SENTRY ELECTRONIC SYSTEMS INC	481187993
ARC ELECTRICAL CONTROL SYSTEMS INC	582172208
AUTOMATIC FIRE ALARM COMPANY, INC.	132643164
CASEY FIRE SYSTEMS LLC	270931685
DOING BUSINESS AS:	
CASEY FIRE SYSTEMS INC	
CASEY SYSTEMS INC	131935238
CASEY SYSTEMS TECHNOLOGIES	270931988
CASEY SYSTEMS LLC	112067521

For the state of CA refer to state specific endorsement.

Authorized Representative

EXTENSION OF INFORMATION PAGE

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

SCHEDULE OF NAMED INSURED

ITEM 1., NAMED INSURED, OF THE INFORMATION PAGE IS EXTENDED AS FOLLOWS:

NAMED INSURED

FEIN



CITADEL SYSTEMS INTEGRATION, INC. 845176942

CITADEL SYSTEMS INTERMEDIATE, LLC 934140751

COLLABORATIVE TECHNOLOGY SOLUTIONS LLC 474875660

COMMUNICATIONS SPECIALISTS, LLC 541992252

CORBETT TECHNOLOGY SOLUTIONS INC 542054948

DAVED FIRE SYSTEMS, INC. 222419393

ELA HOLDING CORPORATION 452476093

ENTERPRISE SECURITY SOLUTIONS LLC 465101939

FIRE SERVICE, LLC 112518327

DOING BUSINESS AS:


FIRE SERVICE INC

FIRECOM WEST, INC. 223670334

FIRECOM WEST, LLC

FIRECOM, INC 132934531

For the state of CA refer to state specific endorsement.



Authorized Representative

EXTENSION OF INFORMATION PAGE

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

SCHEDULE OF NAMED INSURED

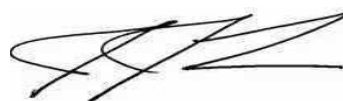
ITEM 1., NAMED INSURED, OF THE INFORMATION PAGE IS EXTENDED AS FOLLOWS:

NAMED INSURED

FEIN

DOING BUSINESS AS:	
FRCM CASE-ACME LLC	113160937
FT CLEARING CORP	113240518
DOING BUSINESS AS:	
FT CLEARING LLC	
INTERACTIVE VIDEO TECHNOLOGIES, LLC	260255741
ION247, LLC	473205111
K&J INTEGRATED SYSTEMS, INC.	272226942
LP NETWORK, INC.	202560380
DOING BUSINESS AS:	
SECURITY SOURCE ALARMS, LLC	
MULTIPLEX ELECTRICAL SERVICES, INC.	132898641
NETRONIX INTEGRATION, INC	208714619
PHILADELPHIA PROTECTION BUREAU, INC.	208714619
PREMIER SECURITY SOLUTIONS CORPORATION	770480428
	930846490
RFI ELECTRONICS, INC. - OREGON	

For the state of CA refer to state specific endorsement.



Authorized Representative

EXTENSION OF INFORMATION PAGE

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

SCHEDULE OF NAMED INSURED

ITEM 1., NAMED INSURED, OF THE INFORMATION PAGE IS EXTENDED AS FOLLOWS:

NAMED INSURED

FEIN

DOING BUSINESS AS:

REECE COMPTE SECURITY SOLUTIONS

RFI ENTERPRISES, INC.

770062511

RFI SECURITY, INC.

942863114

DOING BUSINESS AS:

THE CONTROL CENTER

SAFEWAY FIRE @ PROTECTION COMPANY

205669900

SECURITY SOURCE ALARMS, LLC

202560380

SHORT CIRCUIT ELECTRONICS, INC.

431617241

STAR ASSET SECURITY, LLC

570985679

STRUCTURE WORKS GLOBAL, INC.

830407511

STRUCTURE WORKS, LLC

830407511

DOING BUSINESS AS:

DOVER STATION LLC

STRUCTURE WORKS GLOBAL, INC.

STRUCTURE WORKS INC.

SW SECURITY ALARM

For the state of CA refer to state specific endorsement.



Authorized Representative

EXTENSION OF INFORMATION PAGE

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

SCHEDULE OF NAMED INSURED

ITEM 1., NAMED INSURED, OF THE INFORMATION PAGE IS EXTENDED AS FOLLOWS:

NAMED INSURED	FEIN
SW SECURITY ALARM	830407511
SYNERGX SYSTEMS LLC	112941299
SYSTEMS ELECTRONICS INC.	561279294
THE CONTROL CENTER	942863114
THE PROTECTION BUREAU	232249529
WORKSTRATUS, LLC	588016700
275 TECHNOLOGY SOLUTIONS, INC.	205669900
DOING BUSINESS AS:	
SAFEWAY FIRE & PROTECTION COMPANY	
43 MILL STREET LLC	830407516
SIGNET ELECTRONIC SYSTEMS, LLC	042547398
UPNINE, LLC	883725705
CARON HOLDINGS CORPORATION	883464347
SIDEBAND SYSTEMS, INC	043225721
ECD SYSTEMS, LLC	421749880

For the state of CA refer to state specific endorsement.



Authorized Representative

Workers' Compensation and Employers' Liability Policy

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

Schedule


ANY PERSON OR ORGANIZATION AGAINST WHOM YOU HAVE AGREED TO WAIVE YOUR RIGHT OF RECOVERY IN A WRITTEN CONTRACT, PROVIDED SUCH CONTRACT WAS EXECUTED PRIOR TO THE DATE OF LOSS.

For the states of CA, UT, TX, refer to state specific endorsements.

This endorsement is not applicable in KY, NH, and NJ.

The endorsement does not apply to policies in Missouri where the employer is in the construction group of code classifications. According to Section 287.150(6) of the Missouri statutes, a contractual provision purporting to waive subrogation rights against public policy and void where one party to the contract is an employer in the construction group of code classifications.

For Kansas, use of this endorsement is limited by the Kansas Fairness in Private Construction Contract Act(K.S.A.. 16-1801 through 16-1807 and any amendments thereto) and the Kansas Fairness in Public Construction Contract Act(K.S.A 16-1901 through 16-1908 and any amendments thereto). According to the Acts a provision in a contract for private or public construction purporting to waive subrogation rights for losses or claims covered or paid by liability or workers compensation insurance shall be against public policy and shall be void and unenforceable except that, subject to the Acts, a contract may require waiver of subrogation for losses or claims paid by a consolidated or wrap-up insurance program.



Authorized Agent

Workers' Compensation and Employers' Liability Policy

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

CALIFORNIA WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because California is shown in Item 3.A. of the Information Page.

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule, but this waiver applies only with respect to bodily injury arising out of the operations described in the Schedule, where you are required by a written contract to obtain this waiver from us.

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

Schedule

1. () Specific Waiver

Name of person or organization:

(X) Blanket Waiver

Any person or organization for whom the Named Insured has agreed by written contract to furnish this waiver.

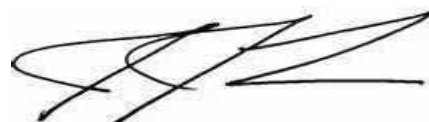
2. Operations:

ALL CALIFORNIA OPERATIONS

3. Premium:

The premium charge for this endorsement shall be 1.0 percent of the California premium developed on payroll in connection with work performed for the above person(s) or organization(s) arising out of the operations described.

4. Minimum Premium: \$0



Authorized Representative

Workers' Compensation and Employers' Liability Policy

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.	

TEXAS WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because Texas is shown in item 3.A. of the Information Page.

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule, but this waiver applies only with respect to bodily injury arising out of the operations described in the Schedule, where you are required by a written contract to obtain this waiver from us.

This endorsement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

The premium for this endorsement is shown in the schedule.

Schedule

1. () Specific Waiver

Name of person or organization:

(X) Blanket Waiver

Any person or organization for whom the Named Insured has agreed by written contract to furnish this waiver.

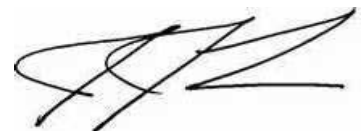
2. Operations:

ALL TEXAS OPERATIONS

3. Premium:

The premium charge for this endorsement shall be 2.0 percent of the premium developed on payroll in connection with work performed for the above person(s) or organization(s) arising out of the operations described.

4. Advance Premium: \$944



Authorized Representative

Workers' Compensation and Employers' Liability Policy

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

UTAH WAIVER OF SUBROGATION ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because Utah is shown in Item 3.A. of the Information Page.

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from u s.)

This agreement shall not operate directly or indirectly to benefit anyone not named in the schedule. Our waiver of rights does not release your employees' rights against third parties and does not release our authority as trustee of claims against third parties.

Schedule

ANY PERSON OR ORGANIZATION AGAINST WHOM YOU HAVE AGREED TO WAIVE YOUR RIGHT OF RECOVERY IN A WRITTEN CONTRACT, PROVIDED SUCH CONTRACT WAS EXECUTED PRIOR TO THE DATE OF LOSS.



Authorized Representative

Workers' Compensation and Employers' Liability Policy

Named Insured PAVION CORP. 1 EASTER COURT OWINGS MILLS MD 21117	Endorsement Number
	Policy Number Symbol: WLR Number: 7183-69-50
Policy Period 03-15-2025 TO 03-15-2026	Effective Date of Endorsement 03-15-2025
Issued By (Name of Insurance Company) ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy. This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.	

NOTICE OF CANCELLATION OR NON-RENEWAL TO SPECIFIED PERSONS OR ORGANIZATIONS

The following Condition is added to **PART SIX - CONDITIONS**:

Notice Of Cancellation Or Non-Renewal To Specified Persons Or Organizations

1. If we cancel or non-renew this policy for any reason other than non-payment, we will deliver notice of the cancellation or non-renewal to any Person(s) or Organization(s) shown in the Schedule 30 days prior to the effective date of cancellation or non-renewal.
2. If we cancel this policy for non-payment, we will deliver notice of the cancellation to any Person(s) or Organization(s) shown in the Schedule 10 days prior to the effective date of cancellation.
3. If notice is mailed, proof of mailing will be sufficient proof of notice.
4. Any failure by us to notify such person(s) or organization(s) will not invalidate such cancellation or non-renewal with respect to any other person(s) or organization(s).

SCHEDULE

Name(s) and Address(es):

IF YOU ARE OBLIGATED, PURSUANT TO A WRITTEN CONTRACT OR AGREEMENT, TO PROVIDE PERSONS OR ORGANIZATIONS WITH NOTICE OF CANCELLATION, THEN WE WILL NOTIFY SUCH PERSONS OR ORGANIZATIONS PROVIDED THAT WITHIN 15 DAYS OF THE DATE WE SEND NOTICE OF CANCELLATION TO THE FIRST NAMED INSURED, THE FIRST NAMED INSURED OR PRODUCER OF RECORD PROVIDES US WITH A SPREADSHEET CONTAINING THE NAME, MAILING ADDRESS AND, IF AVAILABLE, E-MAIL ADDRESS OF THE PERSONS OR ORGANIZATIONS.



Authorized Representative

Declarations

Chubb Group of Insurance Companies
202B Hall's Mill Road
Whitehouse Station, NJ 08889

Named Insured and Mailing Address

PAVION CORP.
 1 EASTER COURT
 OWINGS MILLS, MD 21117

Policy Number 7819-81-59

Issued by the stock insurance company indicated below, herein called the company.

FEDERAL INSURANCE COMPANY

Incorporated under the laws of INDIANA

Producer No. 278962 / 0050046

Producer HUB INTERNATIONAL MID ATLANTIC INC
 1445 RESEARCH BLV. #210
 ROCKVILLE, MD 20850-0000

Policy Period

From: MARCH 15, 2025 To: MARCH 15, 2026
 12:01 A.M. standard time at the Named Insured's mailing address shown above.

Premium**Limits Of Insurance**

Excess Coverage Other Aggregate Limit (as applicable)	\$15,000,000
Umbrella Coverages Aggregate Limit	\$15,000,000
Products Completed Operations Aggregate Limit	\$15,000,000
Advertising Injury and Personal Injury Aggregate Limit	\$15,000,000
Each Occurrence Limit	\$15,000,000

Authorization

In Witness Whereof, the company issuing this policy has caused this policy to be signed by its authorized officers, but this policy shall not be valid unless also signed by a duly authorized representative of the company.

FEDERAL INSURANCE COMPANY



Secretary



President

Authorized Representative



Chubb. Insured.™

Endorsement

Policy Period MARCH 15, 2025 To MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 7819-81-59

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

Who Is An Insured

Named Insured

The Named **Insured** shown in the Declarations is completed to read as follows:

AFA Protective Systems, Inc.
 Pavion Corp
 275 Technology Solutions, Inc; Safeway Fire & Protection Company
 Collaborative Technology Solutions
 Pavion Corp; Corbett Technology Solutions, Inc.
 Pavion Corp; Corbett Technology Solutions, Inc.
 (formerly Communications Specialists, LLC)
 DavEd Fire Systems, Inc.
 ELA Holding Corporation dba Turnkey Technology
 Enterprise Security Solutions LLC
 Firecom West, Inc.
 Firecom, Inc.; Fire Service, Inc.; Casey Fire Systems, Inc.
 K&J Integrated Systems, Inc.
 LP Network, Inc.; Security Source Alarms, LLC
 Multiplex Electrical Services, Inc.
 Netronix Integration, Inc.
 Philadelphia Protection Bureau, Inc.
 Premier Security Solutions Corporation
 RFI Electronics, Inc.-Oregon
 RFI Enterprises, Inc.
 RFI Security, Inc.
 Short Circuit Electronics, Inc.
 Star Asset Security LLC & ION247 LLC & Interactive Video Technologies, LLC
 Structure Works, LLC; Structure Works, Inc.
 Systems Electronics, Inc.
 Citadel Systems Integrations, Inc.
 Automatic Fire Alarm Company, Inc.
 AFA (Massachusetts), Inc.
 AFA Southeast Inc.
 ARC Electronic Control Systems Inc
 Casey Fire Systems, Inc.
 Casey Fire Systems, LLC
 Casey Systems Inc.
 Casey Systems, LLC
 FT Clearing Corp

FT Clearing LLC
Synergx Systems LLC
FRCM Case-Acme LLC
Fire Service Inc.
Fire Service LLC
Firecom West, Inc.
Firecom West, LLC
ION247, LLC
Interactive Video Technologies, LLC
Structure Works Global, Inc.
43 Mills Street LLC
RFI Security, Inc. dba The Control Center
RFI Electronics, Inc.-Oregon dba REECE Compte Security
Solutions ELA Holding Corporate dba Turnkey Technology
Workstratus, LLC
American Sentry Electronic Systems, Inc.
Citadel Systems Intermediate, LLC
SW Security Alarm
Integrated Security & Communications of New Jersey, LLC
Signet Electronic Systems, LLC
Sideband Systems, Inc.
Caron Holdings Corporation
UpNine, LLC
Signet, LLC
ECD Systems, LLC

All Other Terms and Conditions Remain Unchanged

Authorized Representative

A handwritten signature in black ink, appearing to be "P. Williams", written over a horizontal line.

Schedule Of Forms

Policy Period MARCH 15, 2025 To MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 7819-81-59

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

Form Number

As of the effective date printed above, this is the Schedule Of Forms applicable to this policy:

PREMIUM BILL	07-10-0542	(10/06)
PREMIUM BILL	07-10-0542I	(10/06)
IMPORTANT NOTICE TO POLICYHOLDERS-TRIA 2002	99-10-0732	(01/15)
IMPORTANT NOTICE - OFAC	99-10-0792	(09/04)
AOD IMPORTANT POLICYHOLDER NOTICE	99-10-0872	(06/07)
COMMERCIAL EXCESS AND UMBRELLA DECLARATIONS	07-02-2267	(02/09)
SCHEDULE OF UNDERLYING INSURANCE	07-02-0922	(07/01)
CHUBB COMMERCIAL EXCESS & UMBRELLA INSURANCE	07-02-0815	(07/01)
COMPLIANCE WITH APPLICABLE TRADE SANCTIONS	07-02-1988	(02/04)
COVERAGE-CRISIS ASSISTANCE EXCESS AND UMB	07-02-2440	(12/10)
COND - CIVIL UNIONS OR DOMESTIC PARTNERSHIPS	07-02-2483	(03/12)
CARE, CONTROL OR CUSTODY - POLICY EXCLUSION	07-02-0837	(07/01)
FOREIGN LIABILITY EXCL. BI/PD/AI/PI COV. B	07-02-0861	(07/01)
POLLUTION EXCL. - EXCESS FOLLOW-FORM COV. A	07-02-0885	(07/01)
CONDITIONS – PREMIUM INSTALLMENTS	07-02-0950	(02/21)
NAMED INSURED	07-02-1477	(07/01)
CAP ON CERTIFIED TERRORISM LOSSES	07-02-1961	(01/15)
POL EXCL-INFO LAWS INCL UNAUT OR UNSOL COMMUN	07-02-2172	(01/13)
CONDITIONS - OTHER INSURANCE	07-02-2291	(03/10)
COV B EXCL-INTELLECTUAL PROP LAWS OR RIGHTS	07-02-2420	(05/10)
CRISIS ASSISTANCE SERVICE PROVIDERS	07-02-2455	(12/10)
NOTICE OF CANCEL SCHED PERSONS/ORG EXCPT NP	07-02-2472	(03/11)
POLICY EXCLUSION - WAR	07-02-2741	(03/17)
COVERAGE A EXCLUSION – ACCESS OR DISCLOSURE AND ELECTRONIC DATA-RELATED LIABILITY WITH EXCEPTIONS COVERAGE B EXCLUSION – ACCESS OR DISCLOSURE AND ELECTRONIC DATA-RELATED LIABILITY	07-02-2853	(03/21)
POLICY EXCLUSION – MOLESTATION OR ABUSE – TOTAL	07-02-2861	(06/21)

Schedule Of Underlying Insurance

Effective Date: MARCH 15, 2025

Policy Number: 7819-81-59

Insured: PAVION CORP.

Description	Limits
Employers Liability	
<i>Insurer:</i> ACE AMERICAN INSURANCE COMPANY	
<i>Policy No.:</i> 7183-69-50	<i>Coverage B - Employer's Liability</i>
<i>Policy Period:</i> 03/15/2025	<i>Bodily Injury By Accident</i>
<i>to:</i> 03/15/2026	\$1,000,000 <i>Each Accident</i>
	<i>Bodily Injury By Disease</i>
	\$1,000,000 <i>Policy Limit</i>
	\$1,000,000 <i>Each Employee</i>

Employers Liability	
<i>Insurer:</i> ACE FIRE UNDERWRITERS INSURANCE COMPANY	
<i>Policy No.:</i> 7184-07-82	<i>Coverage B - Employer's Liability</i>
<i>Policy Period:</i> 03/15/2025	<i>Bodily Injury By Accident</i>
<i>to:</i> 03/15/2026	\$1,000,000 <i>Each Accident</i>
	<i>Bodily Injury By Disease</i>
	\$1,000,000 <i>Policy Limit</i>
	\$1,000,000 <i>Each Employee</i>

Commercial General Liability	
<i>Insurer:</i> FEDERAL INSURANCE COMPANY	
<i>Policy No.:</i> 3607-87-30	\$1,000,000 <i>Each Occurrence</i>
<i>Policy Period:</i> 03/15/2025	\$2,000,000 <i>General Aggregate</i>
<i>to:</i> 03/15/2026	\$2,000,000 <i>Products/Completed Operations Aggregate</i>
<i>Occurrence</i>	\$1,000,000 <i>Personal and Advertising Injury (aggregate when applicable)</i>

Schedule Of Underlying Insurance

Effective Date: MARCH 15, 2025

Policy Number: 7819-81-59

Insured: PAVION CORP.

Description	Limits
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Automobile Liability

Insurer: FEDERAL INSURANCE COMPANY

<i>Policy No.:</i> 7363-16-41	\$2,000,000	<i>Each Accident</i>
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Policy Period: 03/15/2025

to: 03/15/2026

Employee Benefits Liability

Insurer: FEDERAL INSURANCE COMPANY

<i>Policy No.:</i> 3607-87-30	\$1,000,000	<i>Each Claim</i>
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Policy Period: 03/15/2025

<i>to:</i> 03/15/2026	\$1,000,000	<i>Aggregate</i>
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Occurrence

Foreign Automobile Liability

Insurer: FEDERAL INSURANCE COMPANY

<i>Policy No.:</i> 3607-87-30	\$1,000,000	<i>Each Accident</i>
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Policy Period: 03/15/2025

to: 03/15/2026

Occurrence

Schedule Of Underlying Insurance

Effective Date: MARCH 15, 2025

Policy Number: 7819-81-59

Insured: PAVION CORP.

Description	Limits
--------------------	---------------

Foreign Employer's Liability

Insurer: FEDERAL INSURANCE COMPANY

Policy No.: 3607-87-30	\$1,000,000	Each Accident
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Policy Period: 03/15/2025		
to: 03/15/2026	\$1,000,000	Each Policy

	\$1,000,000	Each Employee
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Occurrence

Non-Owned & Hired Auto Liability

Insurer: FEDERAL INSURANCE COMPANY

Policy No.: 7363-16-41	\$2,000,000	Each Accident
------------------------	-------------	---------------

Policy Period: 03/15/2025		
to: 03/15/2026		

Occurrence

Stop Gap Coverage

Insurer: FEDERAL INSURANCE COMPANY

Policy No.: 3607-87-30	\$1,000,000	Each Accident
------------------------	-------------	---------------

Policy Period: 03/15/2025		
to: 03/15/2026	\$1,000,000	Aggregate

Occurrence	\$1,000,000	Each Employee
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Schedule Of Underlying Insurance

Effective Date: MARCH 15, 2025

Policy Number: 7819-81-59

Insured: PAVION CORP.

Description

Limits

Authorization

All other terms and conditions remain unchanged.

Authorized Representative



Contract

Please read the entire policy carefully. The terms and conditions of this insurance include the various sections of this contract: Coverages; Investigation, Defense And Settlements; Supplementary Payments; Coverage Territory; Who Is An Insured; Limits Of Insurance; When Excess Follow-Form Coverage A Applies (Drop Down); Exclusions; Conditions and Definitions, as well as the Declarations and any Endorsements and Schedules made a part of this insurance.

Throughout this contract the words "you" and "your" refer to the Named **Insured** shown in the Declarations and other persons or organizations qualifying as a Named **Insured** under this contract. The words "we," "us" and "our" refer to the Company providing this insurance.

In addition to the Named **Insured**, other persons or organizations may qualify as **insureds**. Those persons or organizations and the conditions under which they qualify are identified in the Who Is An Insured section of this contract.

Words and phrases that appear in **bold** print have special meanings and are defined in the Definitions section of this contract.

**Coverage/
Excess Follow-Form
Coverage A**

Subject to all of the terms and conditions applicable to Excess Follow-Form Coverage A, we will pay, on behalf of the **insured**, that part of **loss** to which this coverage applies, which exceeds the applicable **underlying limits**.

This coverage applies only if the triggering event that must happen during the policy period of the applicable **underlying insurance** happens during the policy period of this insurance.

This coverage will follow the terms and conditions of **underlying insurance** described in the Schedule Of Underlying Insurance, unless a term or condition contained in this coverage:

- differs from any term or condition contained in the applicable **underlying insurance**; or
- is not contained in the applicable **underlying insurance**.

With respect to such exceptions described above, the terms and conditions contained in this coverage will apply, to the extent that such terms and conditions provide less coverage than the terms and conditions of the applicable **underlying insurance**.

This coverage does not apply to any part of **loss** within **underlying limits**, or any related costs or expenses.

We have no obligation under this insurance with respect to any claim or **suit** settled without our consent.

Other than as provided under the Investigation, Defense And Settlements and Supplementary Payments sections of this contract, we have no other obligation or liability to pay sums or perform acts or services under this coverage.

**Coverages/
Umbrella Coverage B**
**Bodily Injury And
Property Damage
Liability Coverage**

Subject to all of the terms and conditions applicable to Umbrella Coverage B, we will pay, on behalf of the **insured**, **loss** by reason of liability:

- imposed by law; or
- assumed in an **insured contract**;

**Coverages/
Umbrella Coverage B**

***Bodily Injury And
Property Damage
Liability Coverage
(continued)***

for **bodily injury** or **property damage** caused by an **occurrence** to which this coverage applies.

This coverage applies only to such **bodily injury** or **property damage** that occurs during the policy period.

Damages for **bodily injury** include damages claimed by a person or organization for care or loss of services resulting at any time from the **bodily injury**.

This coverage does not apply to any part of:

- A. **loss** to which **underlying insurance** would apply, regardless of whether or not:
 - 1. **underlying insurance** is available; and
 - 2. the applicable **underlying limits** have been exhausted;
- B. **loss** to which **underlying limits** apply; or
- C. any costs or expenses related to **loss** as described in paragraphs A. or B. above.

We have no obligation under this insurance with respect to any claim or **suit** settled without our consent.

Other than as provided under the Investigation, Defense And Settlements and Supplementary Payments sections of this contract, we have no other obligation or liability to pay sums or perform acts or services under this coverage.

***Advertising Injury And
Personal Injury
Liability Coverage***

Subject to all of the terms and conditions applicable to Umbrella Coverage B, we will pay, on behalf of the **insured, loss** because of liability:

- imposed by law; or
- assumed in an **insured contract**;

for **advertising injury** or **personal injury** to which this coverage applies.

This coverage applies only to such **advertising injury** or **personal injury** caused by an offense that is first committed during the policy period.

This coverage does not apply to any part of:

- A. **loss** to which **underlying insurance** would apply, regardless of whether or not:
 - 1. **underlying insurance** is available; and
 - 2. the applicable **underlying limits** have been exhausted;
- B. **loss** to which **underlying limits** apply; or
- C. any costs or expenses related to **loss** as described in paragraphs A. or B. above.

We have no obligation under this insurance with respect to any claim or **suit** settled without our consent.

Other than as provided under the Investigation, Defense And Settlements and Supplementary Payments sections of this contract, we have no other obligation or liability to pay sums or perform acts or services under this coverage.

**Investigation, Defense
And Settlements**

Subject to all of the terms and conditions of this insurance, we will have the right and duty to defend the **insured**:

- under Excess Follow-Form Coverage A, against a **suit** in connection with **loss** to which such coverage applies, if the applicable **underlying limits** have been exhausted by payment of judgments, settlements or related costs or expenses (if such costs or expenses reduce such limits); or
- under Umbrella Coverage B, against a **suit** to which such coverage applies, even if such **suit** is false, fraudulent or groundless.

We have no duty to defend any person or organization against any claim or **suit**:

- to which this insurance does not apply; or
- if any other insurer has a duty to defend.

When we have the duty to defend, we may, at our discretion, investigate any occurrence or offense and settle any claim or **suit**. In all other cases, we may, at our discretion, participate in the investigation, defense and settlement of any occurrence, offense, claim or **suit**.

Our duty to defend any person or organization ends when we have used up the applicable Limit Of Insurance.

**Supplementary
Payments**

Subject to all of the terms and conditions of this insurance, under Excess Follow-Form Coverage A or Umbrella Coverage B:

- A. we will pay, with respect to a claim we investigate or settle, or a **suit** against an **insured** we defend:
1. the expenses we incur.
 2. the cost of:
 - a. bail bonds; or
 - b. bonds required to:
 - (1) appeal judgments; or
 - (2) release attachments;but only for bond amounts within the available Limit Of Insurance. We do not have to furnish these bonds.
 3. reasonable expenses incurred by the **insured** at our request to assist us in the investigation or defense of such claim or **suit**, including actual loss of earnings up to \$1000 a day because of time off from work.
 4. costs taxed against the **insured** in the **suit**, except any:
 - a. attorney fees or litigation expenses; or
 - b. other loss, cost or expense;in connection with any injunction or other equitable relief.
 5. prejudgment interest awarded against the **insured** on that part of a judgment we pay. If we make an offer to pay the applicable Limit Of Insurance, we will not pay any prejudgment interest based on that period of time after the offer.

**Supplementary
Payments**
(continued)

6. interest on the full amount of a judgment that accrues after entry of the judgment and before we have paid, offered to pay or deposited in court the part of the judgment that is within the applicable Limit Of Insurance.
- B. Supplementary Payments does not include any fine or other penalty.
- C. Supplementary Payments will not reduce the Limits Of Insurance.
- Our obligation to make these payments ends when we have used up the applicable Limit Of Insurance.

Coverage Territory

**Excess Follow-Form
Coverage A**

With respect to Excess Follow-Form Coverage A, this insurance applies anywhere that the applicable **underlying insurance** applies.

Umbrella Coverage B

With respect to Umbrella Coverage B, this insurance applies anywhere.

**Who Is An Insured/
Excess Follow-Form
Coverage A**

With respect to Excess Follow-Form Coverage A, the following persons and organizations qualify as **insureds**:

- the Named **Insured** shown in the Declarations; and
- other persons or organizations qualifying as an insured in **underlying insurance**, but not beyond the extent of any limitation imposed under any contract or agreement.

**Who Is An Insured/
Umbrella Coverage B**

With respect to Umbrella Coverage B, the following persons and organizations qualify as **insureds**.

Sole Proprietorships

If you are an individual, you and your spouse are **insureds**; but you and your spouse are **insureds** only with respect to the conduct of a business of which you are the sole owner.

If you die:

- persons or organizations having proper temporary custody of your property are **insureds**; but they are **insureds** only with respect to the maintenance or use of such property and only for acts until your legal representative has been appointed; and
- your legal representatives are **insureds**; but they are **insureds** only with respect to their duties as your legal representatives. Such legal representatives will assume your rights and duties under this insurance.

**Partnerships Or Joint
Ventures**

If you are a partnership (including a limited liability partnership) or a joint venture, you are an **insured**. Your members, your partners and their spouses are **insureds**; but they are **insureds** only with respect to the conduct of your business.

**Who Is An Insured/
Umbrella Coverage B**
(continued)

Limited Liability Companies If you are a limited liability company, you are an **insured**. Your members and their spouses are **insureds**; but they are **insureds** only with respect to the conduct of your business. Your managers are **insureds**; but they are **insureds** only with respect to their duties as your managers.

Other Organizations If you are an organization (including a professional corporation) other than a partnership, joint venture or limited liability company, you are an **insured**. Your directors and **officers** are **insureds**; but they are **insureds** only with respect to their duties as your directors or **officers**. Your stockholders and their spouses are **insureds**; but they are **insureds** only with respect to their liability as your stockholders.

Employees Your **employees** are **insureds**; but they are **insureds** only for acts within the scope of their employment by you or while performing duties related to the conduct of your business.

Volunteers Persons who are volunteer workers for you are **insureds**; but they are **insureds** only for acts within the scope of their activities for you and at your direction.

Real Estate Managers Persons (other than your **employees**) or organizations while acting as your real estate managers are **insureds**; but they are **insureds** only with respect to their duties as your real estate managers.

Lessors Of Equipment Persons or organizations from whom you lease equipment are **insureds**; but they are **insureds** only with respect to the maintenance or use by you of such equipment and only if you are contractually obligated to provide them such insurance as is afforded by this contract.

However, no such person or organization is an **insured** with respect to any:

- damages arising out of their sole negligence; or
- **occurrence** that occurs, or offense that is committed, after the equipment lease ends.

Lessors Of Premises Persons or organizations from whom you lease premises are **insureds**; but they are **insureds** only with respect to the ownership, maintenance or use of that particular part of such premises leased to you and only if you are contractually obligated to provide them with such insurance as is afforded by this contract.

However, no such person or organization is an **insured** with respect to any:

- damages arising out of their sole negligence;
- **occurrence** that occurs, or offense that is committed, after you cease to be a tenant in the premises; or
- structural alteration, new construction or demolition operations performed by or on behalf of them.

Who Is An Insured/ Umbrella Coverage B

(continued)

Subsidiary Or Newly Acquired Or Formed Organizations

If there is no other insurance available, the following organizations will qualify as named **insureds**:

- a subsidiary organization of the first named **insured** shown in the Declarations of which, at the beginning of the policy period and at the time of loss, such first named **insured** controls, either directly or indirectly, more than fifty (50) percent of the interests entitled to vote generally in the election of the governing body of such organization; or
- a subsidiary organization of the first named **insured** shown in the Declarations that such first named **insured** acquires or forms during the policy period, if at the time of loss such first named **insured** controls, either directly or indirectly, more than fifty (50) percent of the interests entitled to vote generally in the election of the governing body of such organization.

Limitations On Who Is An Insured

With respect to Umbrella Coverage B, the following limitations apply to Who Is An Insured.

- A. Except to the extent provided under the Subsidiary Or Newly Acquired Or Formed Organizations provision, no person or organization is an **insured** with respect to the conduct of any person or organization that is not shown as a named **insured** in the Declarations.
- B. No person or organization is an **insured** with respect to the:
 - 1. ownership, maintenance or use of any assets; or
 - 2. conduct of any person or organization whose assets, business or organization; you acquire, either directly or indirectly, for any:
 - **bodily injury** or **property damage** that occurred; or
 - **advertising injury** or **personal injury** arising out of an offense first committed; in whole or in part, before you, directly or indirectly, acquired such assets, business or organization.
- C. No person or organization is an **insured** with respect to the conduct of any partnership (including any limited liability partnership), joint venture or limited liability company that is not shown as a named **insured** in the Declarations.

Limits Of Insurance

With respect to all coverages under this contract, the Limits Of Insurance shown in the Declarations and the rules below fix the most we will pay, regardless of the number of:

- **insureds**;
- claims made or **suits** brought;
- persons or organizations making claims or bringing **suits**;
- vehicles involved; or
- coverages provided in this contract.

Limits Of Insurance*(continued)*

The aggregate limits apply separately to each consecutive annual period and to any remaining period of less than twelve (12) months (starting with the beginning of the policy period shown in the Declarations), provided the applicable aggregate limits in **underlying insurance** apply in such manner. If the aggregate limits in **underlying insurance** do not so apply, the applicable aggregate limits of this insurance will apply to the entire policy period and not separately to any portion (whether annual or otherwise) thereof.

If the policy period is extended after issuance, the additional period will be deemed part of the last preceding period for purposes of determining the Limits Of Insurance.

Excess Coverage Other Aggregate Limit

Subject to the Each Occurrence Limit, the Excess Coverage Other Aggregate Limit is the most we will pay for the sum of **loss** under Excess Follow-Form Coverage A, except **loss**:

- included in the products-completed operations hazard;
- arising out of advertising injury or personal injury; or
- otherwise covered by **underlying insurance**, but to which no aggregate limit in such **underlying insurance** applies.

The Excess Coverages Other Aggregate Limit will apply separately to **loss** in the same manner as each aggregate limit so applies in each coverage or policy described in the Schedule Of Underlying Insurance.

Umbrella Coverages Aggregate Limit

Subject to the Each Occurrence Limit, the Umbrella Coverages Aggregate Limit is the most we will pay for the sum of **loss** under Umbrella Coverages, except **loss**:

- included in the **products-completed operations hazard**; or
- arising out of **advertising injury** or **personal injury**.

Products-Completed Operations Aggregate Limit

Subject to the Each Occurrence Limit, the Products-Completed Operations Aggregate Limit is the most we will pay for the sum of **loss** included in the products-completed operations hazard, even if such **loss** is or otherwise would be covered in whole or in part under more than one coverage.

Advertising Injury And Personal Injury Aggregate Limit

The Advertising Injury And Personal Injury Aggregate Limit is the most we will pay for the sum of **loss** for advertising injury and personal injury, even if such **loss** is or otherwise would be covered in whole or in part under more than one coverage.

Each Occurrence Limit

The Each Occurrence Limit is the most we will pay for the sum of **loss** arising out of any one occurrence, even if such **loss** is or otherwise would be covered in whole or in part under more than one coverage.

Any amount paid for **loss** will reduce the amount of the applicable aggregate limit available for any other payment.

If the applicable aggregate limit has been reduced to an amount that is less than the Each Occurrence Limit, the remaining amount of such aggregate limit is the most that will be available for any other payment.

When Excess Follow-Form Coverage A Applies (Drop Down)

Subject to all of the terms and conditions of this insurance, with respect to Excess Follow-Form Coverage A, if the applicable **underlying limits** are:

- reduced by payment of judgments, settlements or related costs or expenses (if such costs or expenses reduce such limits), Excess Follow-Form Coverage A will drop down to apply in excess of the remaining amount of the applicable **underlying limits**; or
- exhausted by payment of judgments, settlements or related costs or expenses (if such costs or expenses reduce such limits), Excess Follow-Form Coverage A will apply in the same manner as the applicable **underlying insurance** would have applied but for such exhaustion.

Exclusions/ Excess Follow-Form Coverage A

With respect to Excess Follow-Form Coverage A, the following exclusions apply.

Pollution

- A. This insurance does not apply to any liability or loss, cost or expense arising out of the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of **pollutants**, other than as described in paragraph C. below.
- B. Paragraph A. above does not apply to:
 - 1. bodily injury or property damage included in the products-completed operations hazard;
 - 2. bodily injury or property damage:
 - a. caused by the escape of operating fluids which are needed to perform the normal electrical, hydraulic or mechanical functions necessary for the operation of mobile equipment or its parts;
 - b. if sustained within a building and caused by the release of gaseous irritants or contaminants from materials brought into that building, in connection with operations being performed by you or on your behalf by a contractor or subcontractor; or
 - c. resulting from your other ongoing contracting operations;
 - 3. bodily injury if sustained within a building and caused by the escape of gaseous irritants or contaminants from equipment used to heat that building;
 - 4. bodily injury or property damage caused by heat, smoke or fumes from a **hostile fire**; or
 - 5. bodily injury or property damage resulting from the ownership, maintenance or use of an auto.
- C. This insurance does not apply to any liability or loss, cost or expense arising out of the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of **pollutants**:
 - 1. which are or were at any time transported, handled, stored, disposed of, processed or treated as waste by or for any:
 - a. **insured**; or
 - b. person or organization for whom any **insured** may be legally responsible.
 - 2. at or from any premises, site or location:
 - a. which is or was at any time used by or for any **insured** or others for the handling, storage, disposal, processing or treatment of waste; or

**Exclusions/
Excess Follow-Form
Coverage A**

*Pollution
(continued)*

- b. on which any **insured** or any contractor or subcontractor working directly or indirectly on any **insured's** behalf is performing operations, if the operations are to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of **pollutants**.

- D. This insurance does not apply to any loss, cost or expense arising out of any:
 - 1. request, demand, order, or regulatory or statutory requirement that any **insured** or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of **pollutants**; or
 - 2. claim or proceeding by or on behalf of any governmental authority or others for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of **pollutants**.

Paragraph D. above does not apply to the liability for damages, for property damage, that the **insured** would have in the absence of such request, demand, order or regulatory or statutory requirement, or such claim or proceeding by or on behalf of a governmental authority.

This exclusion applies regardless of whether or not the pollution was accidental, expected, gradual, intended, preventable or sudden.

*Obligations Of Underlying
Insurance*

This insurance does not apply to any liability or loss, cost or expense for which the liability or obligation under **underlying insurance** is by law unlimited.

*Underlying Insurance
Exclusions*

Notwithstanding anything to the contrary set forth in any other provision of this contract, this insurance does not apply to any liability or loss, cost or expense to which the terms and conditions of **underlying insurance** do not apply.

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage**

With respect to Umbrella Coverage B, Bodily Injury And Property Damage Liability Coverage, the following exclusions apply.

*Aircraft: Owned Or Rented
Without Crew*

This insurance does not apply to **bodily injury** or **property damage** arising out of the ownership, maintenance, use (use includes operation and **loading or unloading**) or entrustment to others of any aircraft owned or operated by or loaned or rented to any **insured**.

This exclusion does not apply to an aircraft that is:

- loaned or rented to you with a paid, trained crew; and
- not owned, in whole or in part, by any **insured**.

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage**
(continued)

**Autos: U.S.A., Canada Or
Puerto Rico**

This insurance does not apply to **bodily injury** or **property damage** arising out of the ownership, maintenance, use (use includes operation and **loading or unloading**) or entrustment to others of any **auto** owned or operated by or loaned or rented to any **insured**.

This exclusion does not apply to **bodily injury** or **property damage** caused by an **occurrence** that takes place outside of the United States of America (including its possessions or territories), Canada and Puerto Rico.

**Damage To Impaired
Property Or Property Not
Physically Injured**

This insurance does not apply to **property damage** to:

- **impaired property**; or
- property that has not been physically injured;

arising out of any:

- defect, deficiency, inadequacy or dangerous condition in **your product** or **your work**; or
- delay or failure by you or anyone acting on your behalf to perform a contract or agreement in accordance with its terms and conditions.

This exclusion does not apply to the loss of use of other tangible property resulting from sudden and accidental physical injury to **your product** or **your work** after it has been put to its intended use.

**Damage To Insureds
Property**

This insurance does not apply to **property damage** to any property:

- owned by you; or
- of any **insured**, that is in the care, control or custody of any other **insured**.

Damage To Your Product

This insurance does not apply to **property damage** to **your product** arising out of it or any part of it.

**Damage To Your Work Or
Related Property**

This insurance does not apply to **property damage** to:

- **your work** arising out of it or any part of it;
 - that particular part of real property on which you or any contractor or subcontractor working directly or indirectly on your behalf is performing operations, if the **property damage** arises out of those operations; or
 - that particular part of any property that must be restored, repaired or replaced because your **work** was incorrectly performed on it.
-

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage**
(continued)

**Expected Or Intended
Injury**

This insurance does not apply to **bodily injury** or **property damage** arising out of an act that:

- is intended by the **insured**; or
- would be expected from the standpoint of a reasonable person in the circumstances of the **insured**;

to cause **bodily injury** or **property damage**, even if the actual **bodily injury** or **property damage** is of a different degree or type than intended or expected.

This exclusion does not apply to **bodily injury** or **property damage** resulting from the use of reasonable force to protect persons or tangible property.

Loss In Progress

This insurance does not apply to **bodily injury** or **property damage** that is a change, continuation or resumption of any **bodily injury** or **property damage** known by you, prior to the beginning of the policy period, to have occurred.

Bodily injury or **property damage** will be deemed to be known by you:

- A. if such injury or damage is known by, or should have been known from the standpoint of a reasonable person in the circumstances of:
 - 1. you;
 - 2. any of your directors, managers, members, **officers** (or their designees) or partners (whether or not an **employee**); and
- B. when any person described in paragraph A. above:
 - 1. reports all, or any part, of any such injury or damage to us or any other insurer;
 - 2. receives a claim or a demand for damages because of any such injury or damage; or
 - 3. becomes aware that any such injury or damage has occurred or has begun to occur.

Watercraft: Owned

This insurance does not apply to **bodily injury** or **property damage** arising out of the ownership, maintenance, use (use includes operation and **loading or unloading**) or entrustment to others of any watercraft owned or operated by or loaned or rented to any **insured**.

This exclusion does not apply to a watercraft:

- while ashore on premises owned by or rented to you; or
 - that is not owned, in whole or in part, by any **insured**.
-

**Exclusions/
Umbrella Coverage B
Advertising Injury/
Personal Injury**

With respect to Umbrella Coverage B, Advertising Injury And Personal Injury Liability Coverage, the following exclusions apply.

Breach Of Contract

This insurance does not apply to **advertising injury** or **personal injury** arising out of breach of contract.

Continuing Offenses

This insurance does not apply to **advertising injury** or **personal injury** that arises out of that part of an offense that continues or resumes after the later of the end of the policy period of:

- A. this insurance; or
- B. a subsequent, continuous renewal or replacement of this insurance, that:
 - 1. is issued to you by us or by an affiliate of ours;
 - 2. remains in force while the offense continues; and
 - 3. would otherwise apply to **advertising injury** and **personal injury**.

Crime Or Fraud

This insurance does not apply to **advertising injury** or **personal injury** arising out of any criminal or fraudulent conduct committed by or with the consent or knowledge of the **insured**.

**Expected Or Intended
Injury**

This insurance does not apply to **advertising injury** or **personal injury** arising out of an offense, committed by or behalf of the **insured**, that:

- is intended by such **insured**; or
- would be expected from the standpoint of a reasonable person in the circumstances of such **insured**;

to cause injury.

**Failure To Conform To
Representations Or
Warranties**

This insurance does not apply to **advertising injury** or **personal injury** arising out of the failure of goods, products or services to conform with any electronic, oral, written or other representation or warranty of durability, fitness, performance, quality or use.

Internet Activities

This insurance does not apply to **advertising injury** or **personal injury** arising out of:

- controlling, creating, designing or developing of another's Internet site;
- controlling, creating, designing, developing, determining or providing the content or material of another's Internet site;
- controlling, facilitating or providing, or failing to control, facilitate or provide, access to the Internet or another's Internet site; or
- publication of content or material on or from the Internet, other than material developed by you or at your direction.

Prior Offenses

This insurance does not apply to **advertising injury** or **personal injury** arising out of any offense first committed before the beginning of the policy period.

**Exclusions/
Umbrella Coverage B
Advertising Injury/
Personal Injury**
(continued)

*Publications With
Knowledge Of Falsity*

This insurance does not apply to **advertising injury** or **personal injury** arising out of any electronic, oral, written or other publication of material by or with the consent of the **insured**:

- with knowledge of its falsity; or
- if a reasonable person in the circumstances of such **insured** would have known such material to be false.

*Wrong Description Of
Prices*

This insurance does not apply to **advertising injury** or **personal injury** arising out of the wrong description of the price of goods, products or services.

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage/
Advertising Injury/
Personal Injury**

With respect to Umbrella Coverage B, Bodily Injury And Property Damage Liability Coverage and Advertising Injury And Personal Injury Liability Coverage, the following exclusions apply.

*Employee Or Worker
Injury*

- A. This insurance does not apply to **bodily injury, property damage, advertising injury** or **personal injury** sustained by an **employee** or **temporary worker** of the **insured** arising out of and in the course of:
 - 1. employment by the **insured**; or
 - 2. performing duties related to the conduct of the **insured's** business.
- B. This insurance does not apply to **bodily injury, property damage, personal injury** or **advertising injury** sustained by the brother, child, parent, sister or spouse of such injured person, as a consequence of any injury or damage described in paragraph A. above.

This exclusion applies:

- whether the **insured** may be liable as an employer or in any other capacity; and
- to any obligation to share damages with or repay someone else who must pay damages because of any injury or damage described in paragraphs A. or B. above.

*Enhancement,
Maintenance Or Prevention
Expenses*

This insurance does not apply to any loss, cost or expense incurred by you or others for any:

- A. enhancement or maintenance of any property; or
- B. prevention of any injury or damage to any:
 - 1. person or organization; or
 - 2. property you own, rent or occupy.

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage/
Advertising Injury/
Personal Injury**
(continued)

**Intellectual Property Laws
Or Rights**

This insurance does not apply to any actual or alleged **bodily injury, property damage, advertising injury** or **personal injury** arising out of, giving rise to or in any way related to any actual or alleged:

- assertion; or
- infringement or violation;

by any person or organization (including any **insured**) of any **intellectual property law or right**, regardless of whether this insurance would otherwise apply to all or part of any such actual or alleged injury or damage in the absence of any such actual or alleged assertion, infringement or violation.

This exclusion applies, unless such injury:

- is caused by an offense described in the definition of **advertising injury**; and
- does not arise out of, give rise to or in any way relate to any actual or alleged assertion, infringement or violation of any **intellectual property law or right**, other than one described in the definition of **advertising injury**.

Pollution

- A. This insurance does not apply to **bodily injury, property damage, advertising injury** or **personal injury** arising out of the actual, alleged or threatened discharge, dispersal, seepage, migration, release or escape of **pollutants**.
- B. This insurance does not apply to any loss, cost or expense arising out of any:
1. request, demand, order or regulatory or statutory requirement that any **insured** or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of **pollutants**; or
 2. claim or proceeding by or on behalf of a governmental authority or others for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of **pollutants**.

This exclusion applies regardless of whether or not the pollution was accidental, expected, gradual, intended, preventable or sudden.

**Recall Of Products, Work
Or Impaired Property**

This insurance does not apply to damages claimed for any loss, cost or expense incurred by you or others for the loss of use, withdrawal, recall, inspection, repair, replacement, adjustment, removal or disposal of:

- **your product**;
- **your work**; or
- **impaired property**;

**Exclusions/
Umbrella Coverage B
Bodily Injury/
Property Damage/
Advertising Injury/
Personal Injury**

Recall Of Products, Work Or Impaired Property (continued) if such product, work or property is withdrawn or recalled from the market or from use by any person or organization because of a known or suspected defect, deficiency, inadequacy or dangerous condition in it.

Policy Exclusions With respect to all coverages under this contract, the following exclusions apply.

- Asbestos**
- A. This insurance does not apply to any liability or loss, cost or expense arising out of the actual, alleged or threatened contaminative, pathogenic, toxic or other hazardous properties of **asbestos**.
 - B. This insurance does not apply to any loss, cost or expense arising out of any:
 - 1. request, demand, order or regulatory or statutory requirement that any **insured** or others test for, monitor, clean up, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of **asbestos**; or
 - 2. claim or proceeding by or on behalf of a governmental authority or others for damages because of testing for, monitoring, cleaning up, removing, containing, treating, detoxifying or neutralizing, or in any way responding to, or assessing the effects of **asbestos**.

-
- Coverages/ Laws, Various** This insurance does not apply to any liability or loss, cost or expense or obligation of any **insured** under any:
- medical expenses or payments coverage;
 - no-fault law;
 - personal injury protection coverage;
 - underinsured or uninsured financial responsibility law;
 - workers' compensation, disability benefits or unemployment compensation law; or
 - similar coverage or law.

Employee Retirement Income Security Laws This insurance does not apply to any liability or loss, cost or expense or obligation of any **insured** under the United States of America Employees' Retirement Income Security Act (E.R.I.S.A.) of 1974 or any similar law, as now constituted or hereafter amended.

-
- Employment-Related Practices**
- A. This insurance does not apply to any liability or loss, cost or expense in connection with any damages sustained at any time by any person, whether or not sustained in the course of employment by any **insured**, arising out of any employment-related act, omission, policy, practice or representation directed at such person, occurring in whole or in part at any time, including any:
 - 1. arrest, detention or imprisonment;

Policy Exclusions

Employment-Related Practices (continued)

2. breach of any express or implied covenant;
 3. coercion, criticism, humiliation, prosecution or retaliation;
 4. defamation or disparagement;
 5. demotion, discipline, evaluation or reassignment;
 6. discrimination, harassment or segregation;
 7.
 - a. eviction; or
 - b. invasion or other violation of any right of occupancy;
 8. failure or refusal to advance, compensate, employ or promote;
 9. invasion or other violation of any right of privacy or publicity;
 10. termination of employment; or
 11. other employment-related act, omission, policy, practice, representation or relationship in connection with any **insured** at any time.
- B. This insurance does not apply to any liability or loss, cost or expense in connection with any damages sustained at any time by the brother, child, parent, sister or spouse of such person at whom any employment-related act, omission, policy, practice or representation is directed, as described in paragraph A. above, as a consequence thereof.

This exclusion applies:

- whether the **insured** may be liable as an employer or in any other capacity; and
- to any obligation to share damages with or repay someone else who must pay damages because of any of the foregoing.

Nuclear Energy

- A. This insurance does not apply to any liability or loss, cost or expense:
1. with respect to which any **insured** under this policy also has status as an insured under a nuclear energy liability policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters, Nuclear Insurance Association of Canada or any of their successors, or would have had status as an insured under any such policy but for its termination upon exhaustion of its limit of insurance; or
 2. arising out of the **nuclear hazardous properties of nuclear material** and with respect to which:
 - a. any person or organization is required to maintain financial protection pursuant to the United States of America Atomic Energy Act of 1954, or any law amendatory thereof; or
 - b. the **insured** is, or had this policy not been issued would be, entitled to indemnity from the United States of America, or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
- B. This insurance does not apply to any liability or loss, cost or expense arising out of the **nuclear hazardous properties of nuclear material**:
1. if the **nuclear material**:
 - a. is at any **nuclear facility** owned by, or operated by or on behalf of, any **insured**;

Policy Exclusions

Nuclear Energy
(continued)

- b. has been discharged or dispersed therefrom; or is contained in **nuclear spent fuel** or **nuclear waste** at any time transported, handled, stored, disposed of, processed, treated, possessed or used by or on behalf of any **insured**; or
- 2. in any way related to the furnishing by any **insured** of services, materials, parts or equipment in connection with the planning, construction, maintenance, operation or use of any **nuclear facility**. But if such facility is located within the United States of America (including its possessions or territories) or Canada, this subparagraph 2. applies only to **nuclear property damage** to such **nuclear facility** and any property thereat.

Conditions

With respect to all coverages under this contract, the following conditions apply.

Appeals

We may, at our discretion, initiate or participate in an appeal of a judgment, if such judgment may result in a payment under this insurance.

If we initiate or participate in an appeal, we will pay our costs of the appeal. But in no case will the amount we pay for **loss** exceed the Limits Of Insurance.

Audit Of Books And Records

We may audit your books and records as they relate to this insurance at any time during the term of this policy and up to three years afterwards.

Bankruptcy

Bankruptcy or insolvency of the **insured** or of the **insured's** estate will not relieve us of our obligations under this insurance.

Cancellation

The first named **insured** may cancel this policy or any of its individual coverages at any time by sending us a written request or by returning the policy and stating when thereafter cancellation is to take effect.

We may cancel this policy or any of its individual coverages at any time by sending to the first named **insured** a notice sixty (60) days, or twenty (20) days in the event of non-payment of premium, in advance of the cancellation date. Our notice of cancellation will be mailed to the first named **insured's** last known address and will indicate the date on which coverage is terminated. If notice of cancellation is mailed, proof of mailing will be sufficient proof of notice.

The earned premium will be computed on a pro rata basis. Any unearned premium will be returned as soon as practicable.

Changes

This policy can only be changed by a written endorsement that becomes part of this policy. The endorsement must be signed by one of our authorized representatives.

Compliance By Insureds

We have no duty to provide coverage under this policy unless you and any other involved **insured** have fully complied with all of the terms and conditions of the policy.

Conditions

(continued)

Conformance

Any terms of this insurance which are in conflict with the applicable statutes of the State in which this policy is issued are amended to conform to such statutes.

Disclosures And Representations

We have issued this insurance:

- Based upon representations you made to us; and
- in reliance upon your representatives.

Unintentional failure of an employee of the **insured** to disclose a hazard or other material information will not violate this condition, unless an officer (whether or not an employee) of any **insured** or an officer's designee knows about such hazard or other material information.

Duties In The Event Of Occurrence, Offense, Claim Or Suit

A. You must see to it that we and any insurers of **underlying insurance** are notified as soon as practicable of any occurrence or offense that may result in a claim, if the claim may involve us or other insurers. To the extent possible, notice should include:

1. how, when and where the occurrence or offense happened;
2. the names and addresses of any injured persons and witnesses; and
3. the nature and location of any injury or damage arising out of the occurrence or offense.

Notice of an occurrence or offense is not notice of a claim.

B. If a claim is made or **suit** is brought against any **insured**, you must:

1. immediately record the specifics of the claim or **suit** and the date received;
2. notify us and any other insurers as soon as practicable; and
3. see to it that we receive written notice of the claim or **suit** as soon as practicable.

C. You and any other involved **insured** must:

1. immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or **suit**;
2. authorize us to obtain records and other information;
3. cooperate with us and any other insurers in the:
 - a. investigation or settlement of the claim; or
 - b. defense against the **suit**; and
4. assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the **insured** because of loss to which this insurance may also apply.

D. No **insureds** will, except at that **insured's** own cost, make any payment, assume any obligation or incur any expense without our consent.

E. Notice given by or on behalf of:

1. the **insured**;

Conditions

Duties In The Event Of Occurrence, Offense, Claim Or Suit (continued)

- 2. the injured person; or
 - 3. any other claimant;
- to a licensed agent of ours with particulars sufficient to identify the **insured** shall be deemed notice to us.
- F. Knowledge of an occurrence or offense by an agent or employee of the **insured** will not constitute knowledge by the **insured**, unless an officer (whether or not an employee) of any **insured** or an officer's designee knows about such occurrence or offense.
 - G. Failure of an agent or employee of the **insured**, other than an officer (whether or not an employee) of any **insured** or an officer's designee, to notify us of an occurrence or offense which such person knows about will not affect the insurance afforded to you.
 - H. If a claim or loss does not reasonably appear to involve either this insurance or any **underlying insurance**, but it later develops into a claim or loss to which this insurance applies, the failure to report it to us will not violate this condition, provided the **insured** gives us immediate notice as soon as the **insured** is aware that this insurance may apply to such claim or loss.

First Named Insured

The person or organization first named in the Declarations is primarily responsible for payment of all premiums. The first named **insured** will act on behalf of all other named **insureds** for the giving and receiving of notice of cancellation or nonrenewal and the receiving of any return premiums that become payable under this policy.

Inspections And Surveys

We may:

- make inspections and surveys at any time;
- give you reports on the conditions we find; and
- recommend changes.

Any inspections, surveys, reports or recommendations relate only to insurability and the premiums to be charged. We do not make safety inspections. We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public. And we do not warrant that conditions:

- are safe or healthful; or
- comply with laws, regulations, codes or standards.

This condition applies not only to us, but also to any rating, advisory, rate service or similar organization, which makes insurance inspections, surveys, reports or recommendations for us.

Joint Duties In Non-Admitted Jurisdictions

With respect to an occurrence, offense, claim or **suit**, to which this insurance applies, that arises in a **non-admitted jurisdiction**:

- A. we have no duty to defend any person or organization against any claim or **suit**; but we may, at our discretion, assume control of or participate in any investigation, defense, settlement or recovery proceedings.
- B. you and any other **insured** must:

Conditions

Joint Duties In Non-Admitted Jurisdictions (continued)

1. make such investigation, defense or settlement as we deem reasonable;
 2. obtain our approval for any payment; and
 3. effect approved payments to others, in accordance with the terms and conditions of this insurance.
- C. we will reimburse funds to the **insured** for payments approved by us for:
1. **loss**; and
 2. expenses and other payments; to which this insurance applies.
- D. we will make those reimbursements:
1. in a jurisdiction that is mutually acceptable; and
 2. until we have used up the applicable Limits Of Insurance.

Legal Action Against Us

No person or organization has a right under this insurance to:

- join us as a party or otherwise bring us into a **suit** seeking damages from an **insured**; or
- sue us on this insurance unless all of the terms and conditions of this insurance have been fully complied with.

A person or organization may sue us to recover on an **agreed settlement** or on a final judgment against an **insured** obtained after an actual:

- trial in a civil proceeding; or
- arbitration or other alternative dispute resolution proceeding;

but we will not be liable for damages that are not payable under the terms and conditions of this insurance or that are in excess of the applicable Limits Of Insurance.

Maintenance Of Underlying Insurance And Underlying Limits

We have issued this insurance in reliance upon representations made by you about **underlying insurance** and **underlying limits**. You must see to it that:

- **underlying insurance** is and remains valid and in full force and effect.
- **underlying insurance** will not be cancelled, non-renewed or rescinded without replacement by coverage to which we agree.
- the terms and conditions of **underlying insurance** will not materially change, unless we agree otherwise.
- the terms and conditions of renewals or replacements of **underlying insurance**, shown in the Schedule Of Underlying Insurance, will be materially the same as the prior coverage, unless we agree otherwise.
- the **underlying limits** are and remain available, regardless of any bankruptcy, insolvency or other financial impairment of any insurer or any other person or organization.
- the **underlying limits**, shown in the Schedule Of Underlying Insurance, will not be reduced or exhausted, except for the reduction or exhaustion by payment of judgments, settlements or related costs or expenses (if such costs or expenses reduce such limits).

Conditions

Maintenance Of Underlying Insurance And Underlying Limits
(continued)

Failure to comply with this condition will not invalidate this insurance. But in the case of any such failure, our obligation or liability will not exceed that which would have applied absent any failure to comply with this condition.

You must notify us as soon as practicable if any **underlying insurance** is no longer valid or in full force or effect.

Other Insurance

If other valid and collectable insurance is available to the **insured** for loss we would otherwise cover under this insurance, our obligations are limited as follows.

This insurance is excess over any **other insurance**, whether primary, excess, contingent or on any other basis.

We will have no duty to defend the **insured** against any **suit** if any provider of any other insurance has a duty to defend such **insured** against such **suit**.

We will pay only our share of the amount of **loss**, if any, that exceeds the sum of the total:

- amount that all **other insurance** would pay for loss in the absence of this insurance; and
- of all deductible and self-insured amounts under all **other insurance**.

This insurance is not subject to the terms or conditions of any **other insurance**.

Separation Of Insureds

Except with respect to the Limits Of Insurance, and any rights or duties specifically assigned in this insurance to the first named **insured**, this insurance applies:

- as if each named **insured** were the only named **insured**; and
- separately to each **insured** against whom claim is made or **suit** is brought.

Titles Of Paragraphs

The titles of the various paragraphs of this policy and endorsements, if any, attached to this policy are inserted solely for convenience or reference and are not to be deemed in any way to limit or affect the provisions to which they relate.

Transfer Of Rights And Duties

Your rights and duties under this insurance may not be transferred without our written consent. However, if you die, then your rights and duties will be transferred to your legal representative, but only while acting within the scope of duties as your legal representative, or to anyone having temporary custody of your property until your legal representative has been appointed.

Transfer Or Waiver Of Rights Of Recovery Against Others

We will waive the right of recovery we would otherwise have had against another person or organization for loss to which this insurance applies, provided the **insured** has waived their rights of recovery against such person or organization in a contract or agreement that is executed before loss.

To the extent that the **insured's** rights to recover all or part of any payment made under this insurance have not been waived, those rights are transferred to us. The **insured** must do nothing after loss to impair them. At our request, the **insured** will bring **suit** or transfer those rights to us and help us enforce them.

Conditions

Transfer Or Waiver Of Rights Of Recovery Against Others (continued)

Any amount recovered will be apportioned as follows:

- first, we shall receive all amounts recovered until we have been fully reimbursed for all amounts we have incurred, including costs or expenses of such recovery proceedings.
- Then, you are entitled to claim for any further amount recovered.

When We Do Not Renew

If we decide not to renew this policy, we will mail or deliver to the first named **insured** stated in the Declarations written notice of the nonrenewal not less than sixty (60) days before the expiration date. If notice of nonrenewal is mailed, proof of mailing will be sufficient proof of notice.

**Definitions/
Umbrella Coverage B**

WITH RESPECT TO UMBRELLA COVERAGE B, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Advertisement

Advertisement means an electronic, oral, written or other notice, about goods, products or services, designed for the specific purpose of attracting the general public or a specific market segment to use such goods, products or services.

Advertisement does not include any e-mail address, Internet domain name or other electronic address or metalanguage.

Advertising Injury

Advertising injury means injury, other than **bodily injury, property damage** or **personal injury**, sustained by a person or organization and caused by an offense of infringing, in that particular part of your **advertisement** about your goods, products or services, upon their:

- copyrighted **advertisement**; or
- registered collective mark, registered service mark or other registered trademarked name, slogan, symbol or title.

Auto

Auto means a land motor vehicle, trailer or semi-trailer designed for travel on public roads, including any attached machinery or equipment. But **auto** does not include mobile equipment.

Bodily Injury

Bodily injury means physical:

- injury;
- sickness; or
- disease;

sustained by a person, including resulting death, humiliation, mental anguish, mental injury or shock at any time. All such loss shall be deemed to occur at the time of the physical injury, sickness or disease that caused it.

Employee

Employee includes a **leased worker**. **Employee** does not include a **temporary worker**.

Impaired Property

Impaired property means tangible property, other than **your product** or **your work**, that cannot be used or is less useful because:

- it incorporates **your product** or **your work** that is known or thought to be defective, deficient, inadequate or dangerous; or
- you have failed to fulfill the terms or conditions of a contract or agreement;

if such property can be restored to use by:

- the repair, replacement, adjustment or removal of **your product** or **your work**; or
- your fulfilling the terms or conditions of the contract or agreement.

**Definitions/
Umbrella Coverage B**
(continued)

WITH RESPECT TO UMBRELLA COVERAGE B, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Insured Contract

Insured contract means an oral or written contract or agreement pertaining to your business, in which you assume the tort liability of another person or organization to pay damages, to which this insurance applies, sustained by a third person or organization, provided the injury or damage occurs, or is caused by an offense that is first committed, after the execution of such contract or agreement.

Intellectual Property Law Or Right

Intellectual property law or right means any:

- certification mark, copyright, patent or trademark (including collective or service marks);
- right to, or judicial or statutory law recognizing an interest in, any trade secret or confidential or proprietary non-personal information;
- other right to, or judicial or statutory law recognizing an interest in, any expression, idea, likeness, name, slogan, style of doing business, symbol, title, trade dress or other intellectual property; or
- other judicial or statutory law concerning piracy, unfair competition or other similar practices.

Leased Worker

Leased worker means a person leased to a party by a labor leasing firm, in a contract or agreement between such party and the labor leasing firm, to perform duties related to the conduct of the party's business. **Leased worker** does not include a **temporary worker**.

Loading Or Unloading

Loading or unloading:

- A. means the handling of property:
 - 1. after it is moved from the place where it is accepted for movement into or onto an aircraft, **auto** or watercraft;
 - 2. while it is in or on an aircraft, **auto** or watercraft; or
 - 3. while it is being moved from an aircraft, **auto** or watercraft to the place where it is finally delivered.
- B. does not include the movement of property by means of a mechanical device, other than a hand truck, that is not attached to the aircraft, **auto** or watercraft.

Occurrence

Occurrence means an accident, including continuous or repeated exposure to substantially the same general harmful conditions.

Officer

Officer means a person holding any of the officer positions created by an organization's charter, constitution, by-laws or any other similar governing document.

**Definitions/
Umbrella Coverage B**
(continued)

WITH RESPECT TO UMBRELLA COVERAGE B, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Personal Injury

Personal injury means injury, other than **bodily injury, property damage** or **advertising injury**, caused by an offense of:

- A. false arrest, false detention or other false imprisonment;
- B. malicious prosecution;
- C. wrongful entry into, wrongful eviction of a person from or other violation of a person's right of private occupancy of a dwelling, premises or room that such person occupies, if committed by or on behalf of its landlord, lessor or owner;
- D. electronic, oral, written or other publication of material that:
 - 1. libels or slanders a person or organization (which does not include disparagement of goods, products, property or services); or
 - 2. violates a person's right of privacy;
- E. discrimination, harrassment or segregation based on a person's protected human characteristics as established by law.

*Products-Completed
Operations Hazard*

Products-completed operations hazard:

- A. includes all **bodily injury** and **property damage** taking place away from premises owned or occupied by or loaned or rented to you and arising out of **your product** or **your work**, except:
 - 1. products that are still in your physical possession; or
 - 2. work that has not yet been completed or abandoned.

Your work will be deemed completed when:

- all of the work called for in your contract or agreement has been completed.
- all of the work to be performed at the site has been completed, if your contract or agreement calls for work at more than one site.
- that part of the work completed at a site has been put to its intended use by any person or organization other than another contractor or subcontractor working on the same project.

Work that may need service, maintenance, correction, repair or replacement, but which is otherwise complete, will be treated as completed.

- B. does not include **bodily injury** or **property damage** arising out of:
 - 1. the transportation of property, unless the injury or damage results from a condition in or on a vehicle not owned or operated by or loaned or rented to you and that condition was created by the **loading or unloading** of that vehicle by any **insured**;
 - 2. the existence of tools, uninstalled equipment or abandoned or unused materials; or

**Definitions/
Umbrella Coverage B**

WITH RESPECT TO UMBRELLA COVERAGE B, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

*Products-Completed
Operations Hazard
(continued)*

3. products or operations for which the classification in our rules indicates that such products or operations are not subject to the Products-Completed Operations Aggregate Limits Of Insurance.

Property Damage

Property damage means:

- physical injury to tangible property, including resulting loss of use of that property. All such loss of use shall be deemed to occur at the time of the physical injury that caused it; or
- loss of use of tangible property that is not physically injured. All such loss of use shall be deemed to occur at the time of the **occurrence** that caused it.

Tangible property does not include any software, data or other information that is in electronic form.

Temporary Worker

Temporary worker means a person who is furnished to a party to substitute for a permanent **employee** on leave or to meet seasonal or short-term workload conditions.

Your Product

Your product:

- A. means any:
 1. goods or products, other than real property, manufactured, sold, handled, distributed or disposed of by:
 - a. you;
 - b. others trading under your name; or
 - c. a person or organization whose assets or business you have acquired; and
 2. containers (other than vehicles), materials, parts or equipment furnished in connection with such goods or products.
- B. includes:
 1. representations or warranties made at any time with respect to the durability, fitness, performance, quality or use of **your product**; and
 2. the providing of or failure to provide instructions or warnings.
- C. does not include vending machines or other property loaned or rented to or located for the use of others but not sold.

Your Work

Your work:

- A. means any:
 1. work or operations performed by:
 - a. you or on your behalf; or
 - b. a person or organization whose assets or business you have acquired; and

**Definitions/
Umbrella Coverage B**

WITH RESPECT TO UMBRELLA COVERAGE B, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

*Your Work
(continued)*

- 2. materials, parts or equipment furnished in connection with such work or operations.
- B. includes:
 - 1. representations or warranties made at any time with respect to the durability, fitness, performance, quality or use of **your work**; and
 - 2. the providing of or failure to provide instructions or warnings.

Policy Definitions

WITH RESPECT TO ALL COVERAGES UNDER THIS CONTRACT, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Agreed Settlement

Agreed settlement means a settlement and release of liability signed by us, the **insured** and the claimant or the claimant's legal representative.

Asbestos

Asbestos means asbestos in any form, including its presence or use in any alloy, by-product or other material or waste. Waste includes material to be recycled, reconditioned or reclaimed.

Hostile Fire

Hostile fire means one, which becomes uncontrollable or breaks out from where it was intended to be.

Insured

Insured means a person or an organization qualifying as an **insured** in the Who Is An Insured sections of this contract.

Loss

- Loss:**
- means damages that the **insured** becomes legally obligated to pay because of injury or damage.
 - does not include sums properly deducted for recoveries or salvage.

Non-Admitted Jurisdiction

- Non-admitted jurisdiction** means any jurisdiction where we are:
- not licensed or permitted by law to issue insurance; or
 - prevented by law or otherwise from investigating, defending or settling an occurrence, offense, claim or **suit**.

Policy Definitions
(continued)

WITH RESPECT TO ALL COVERAGES UNDER THIS CONTRACT, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Nuclear Facility

Nuclear facility means any:

- A. **nuclear reactor;**
- B. equipment or device designed or used for:
 - 1. separating the isotopes of plutonium or uranium;
 - 2. processing or utilizing **nuclear spent fuel;** or
 - 3. handling, processing or packaging **nuclear waste;**
- C. equipment or device used for the processing, fabricating or alloying of **nuclear material** if at any time the total amount of such material in the custody of the **insured** at the premises where such equipment or device is located consists of or contains more than:
 - 1. twenty-five (25) grams of plutonium or uranium 233, or any combination thereof;
or
 - 2. two-hundred-fifty (250) grams of uranium 235; or
- D. structure, basin, excavation, premises or place prepared or used for the storage or disposal of **nuclear waste;**

and includes the site on which any of the foregoing is located, all operations conducted on such site and all premises used for such operations.

Nuclear Hazardous Properties

Nuclear hazardous properties include radioactive, toxic or explosive properties.

Nuclear Material

Nuclear material means **by-product material, source material** or **special nuclear material**.
By-product material, source material and **special nuclear material** have the meanings given them in the United States of America Atomic Energy Act of 1954 or in any law amendatory thereof.

Nuclear Property Damage

Nuclear property damage includes all forms of radioactive contamination of property.

Nuclear Reactor

Nuclear reactor means any apparatus designed or used to sustain nuclear fission in a self-supporting chain reaction or to contain a critical mass of fissionable material.

Nuclear Spent Fuel

Nuclear spent fuel means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a **nuclear reactor**.

Policy Definitions*(continued)*

WITH RESPECT TO ALL COVERAGES UNDER THIS CONTRACT, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Nuclear Waste

Nuclear waste means any waste material:

- containing **nuclear material**, other than the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its **source material** content; and
- resulting from the operation by any person or organization of any **nuclear facility** described in subparagraphs A. or B. of the definition of **nuclear facility**.

Other Insurance

Other insurance means any insurance affording coverage that this insurance would also afford. **Other insurance** includes any type of self-insurance or other mechanism arranged for funding of **loss**.

Other insurance does not include **underlying insurance** or insurance negotiated specifically to apply in excess of this insurance.

Pollutants

Pollutants means any solid, liquid, gaseous or thermal irritant or contaminant, including smoke, vapor, soot, fumes, acids, alkalis, chemicals and waste. Waste includes materials to be recycled, reconditioned or reclaimed.

Suit

Suit means a civil proceeding in which damages, to which this insurance applies, are sought. **Suit** includes an arbitration or other dispute resolution proceeding in which such damages are sought and to which the **insured** must submit or does submit with our consent.

Underlying Insurance

Underlying insurance means the coverages for the hazards described in the Schedule Of Underlying Insurance and the next renewal or replacement insurance thereof.

Underlying Limits

Underlying limits means the sum of amounts:

- A. shown for the hazards described in the Schedule Of Underlying Insurance, consisting of amounts:
 1. available under applicable **underlying insurance**; and
 2. any **insured** must pay because **underlying insurance**, as represented by you, is not available, regardless of the reason;
- B. available under any applicable antecedent, renewal or replacement of **underlying insurance**;
- C. of any allocation, deductible, participation, retention or other self-insurance applicable to the insurance described in paragraphs A. and B. above; and
- D. any reinstatement of limits or supplemental or other limits available under the insurance described in paragraphs A. and B. above.

Policy Definitions

WITH RESPECT TO ALL COVERAGES UNDER THIS CONTRACT, WHEN USED WITH RESPECT TO INSURANCE UNDER THIS CONTRACT, WORDS AND PHRASES THAT APPEAR IN BOLD PRINT HAVE THE SPECIAL MEANINGS DESCRIBED BELOW.

Underlying Limits
(continued)

If amounts available under the applicable **underlying insurance**, described in the Schedule Of Underlying Insurance, are greater or less than the amount, shown in such Schedule, then the greater of such amounts shall apply in the computation of **underlying limits**.

Endorsement

Policy Period MARCH 15, 2025 To MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 7819-81-59

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

Under Conditions, Other Insurance is deleted and replaced by the following:

Conditions**Other Insurance**

If other valid and collectible insurance is available to the **insured** for loss we would otherwise cover under this insurance, our obligations are limited as follows:

- A. This insurance is excess over any **other insurance**, whether primary, excess, contingent or on any other basis.
- B. We will have no duty to defend the **insured** against any **suit** if any provider of any other insurance has a duty to defend such **insured** against such **suit**.
- C. We will only pay our share of the amount of **loss**, if any, that exceeds the sum of the total:
 1. amount that all **other insurance** would pay for loss in absence of this insurance; and
 2. of all deductible and self-insured amounts under all **other insurance**.
- D. This insurance is not subject to the terms or conditions of any **other insurance**.

However, with respect to Coverage/Excess Follow-Form Coverage A only, paragraphs A. and B. above do not apply if:

- **underlying insurance** has agreed to provide insurance on a primary non-contributory basis to a person or organization; and

Conditions

Other Insurance
(continued)

- the **insured** is obligated pursuant to a written contract or agreement, made prior to injury, damage or offense covered by this insurance, to provide such person or organization with insurance on a primary or non-contributory basis under this insurance;

then this insurance will not seek contribution from insurance available to such person or organization.

All other terms and conditions remain unchanged.

Authorized Representative

A handwritten signature in black ink, appearing to read "P. M. W.", is written over a horizontal line.

Endorsement

Policy Period MARCH 15, 2025 To MARCH 15, 2026

Effective Date MARCH 15, 2025

Policy Number 7819-81-59

Insured PAVION CORP.

Name of Company FEDERAL INSURANCE COMPANY

Date Issued

Under Conditions, the following condition is added.

Conditions

**Notice Of Cancellation
To Scheduled Persons
Or Organizations When
We Cancel**

When we cancel this policy for any reason, other than non-payment of premium, we will notify person(s) or organization(s) shown in the Schedule at least 30 days in advance of the cancellation date.

Any failure by us to notify such person(s) or organization(s) will not:

- impose any liability or obligation of any kind upon us; or
- invalidate such cancellation.

Schedule

Person(s) or Organization(s): PPF Paramount One Market Plaza Owner, L.P.; PPF Paramount GP, LLC; Paramount Group, Inc.; Paramount Group Operating Partnership LP; Paramount Group Management GP LLC, their affiliates and subsidiaries and their respective members, officers, directors, and employees; Morgan Stanley Bank, N.A., ISAOA, ATIMA C/O WELLS FARGO BK, N.A., AS SERVICER; Barclays Bank, PLC, its successors and/or assigns as their interests may appear; Goldman Sachs Mortgage Company, a New York limited partnership, Its Successors and/or Assigns as their interests may appear; and, Deutsche Bank AG, New York Branch, ISAOA, ATIMA

Address: 1 Market Plaza, Suite 1470
San Francisco, CA 94105

Person(s) or Organization(s): The Port Authority of New York and New Jersey Risk Management Four World Trade Center

Address: 150 Greenwich Street
New York, NY 10006

Person(s) or Organization(s): The Port Authority of New York and New Jersey
c/o Stewart International Airport

Address: 1180 First Street
New Windsor, NY 12553

Person(s) or Organization(s): The Port Authority of New York and New Jersey, Future
Stewart Partners, LLC, Stewart Future Partners, New York
State Department of Transportation and the State of New
York, their commissioners, directors, officers, agents or
employees their affiliates, successors and/or assigns

Address:

Person(s) or Organization(s): GMV (Mall) Owner LLC, Trademark NewCo Management
LLC, Trademark Property Company TPC GP, and MetLife
Investment Management LLC
Re: Galleria Dallas 13350 Dallas Parkway, Dallas, TX
75240

Address: Certificate Holder: GMV (Mall) Owner LLC
Attn: Office Administrator
13350 Dallas Parkway, Suite 3080
Dallas, TX 75240

Person(s) or Organization(s): San Francisco Public Utilities Commission Contract
Administration Bureau
RE: PUC-0002

Address: Attn: Gary Hom
525 Golden Gate Ave, 8th Floor
San Francisco, CA 94102

If you are obligated, pursuant to a written contract or agreement, to provide person(s) or organization(s) with notice of cancellation, then we will notify such person(s) or organization(s) provided that within 15 days of the date we send notice of cancellation to the first named insured or producer of record provides us with a spreadsheet containing the name, mailing address and, if available, e-mail address of the person(s) or organization(s).

All other terms and conditions remain unchanged.

Authorized Representative

March 07, 2024

