



Policy Q29-2500921 Declaration effective 06/27/2018

ERIE INSURANCE EXCHANGE
GENERAL LIABILITY POLICY

AMENDED DECLARATIONS * * EFFECTIVE 06/27/18
ATTACH THIS TO YOUR POLICY.

REASON FOR AMENDMENT - ADDED ADDITIONAL INSURED

AA7212 FETROW INS ASSOC LLC 05/25/18 TO 05/25/19 Q29 2500921 H
LUCKY PENNY BURGER COMPANY LLC
509 SPRING RUN RD
MECHANICSVILLE PA 17055-5579

POLICY PERIOD BEGINS AND ENDS AT 12.01 A.M. STANDARD TIME AT THE STATED
ADDRESS OF THE NAMED INSURED.

TYPE OF POLICY - OCCURRENCE BUSINESS TYPE - OTHER
COUNTY - CUMBERLAND

THE ERIE'S LIMIT OF PROTECTION FOR EACH COVERAGE IS STATED BELOW.
THIS IS SUBJECT TO ALL APPLICABLE TERMS OF THE POLICY AND ATTACHED FORMS.

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT \$1,000,000
DAMAGE TO PREMISES
RENTED TO YOU LIMIT \$1,000,000 ANY ONE PREMISES
MEDICAL EXPENSE LIMIT \$ 5,000 ANY ONE PERSON
PERSONAL & ADVERTISING INJURY LIMIT \$1,000,000 ANY ONE PERSON OR ORGANIZATION
GENERAL AGGREGATE LIMIT \$2,000,000
PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT INCL IN GENERAL AGGREGATE LIMIT

COVERAGES & PREMIUMS

PREMISES/OPERATIONS \$ 521.
PRODUCTS/COMPLETED OPERATIONS INCLUDED

OPTIONAL COVERAGES -
ADDITIONAL INSUREDS \$ 35.
TOTAL DEPOSIT PREMIUM - - - - \$ 556.
ADDITIONAL CHARGE DUE TO THIS CHANGE - - - - \$ 32.

APPLICABLE FORMS - SEE SCHEDULE OF FORMS

***ADDED ADD'L INS FOR THE YORK EXPO CENTER

SCHEDULE OF INSURED'S OPERATIONS

PREMISES/OPERATIONS AND PRODUCTS/COMPLETED OPERATIONS HAZARDS
ARE INCLUDED OR EXCLUDED AS INDICATED BELOW.

LOCATION * INSURED OPERATIONS
*
*
1. SAME & VARIOUS * 011168A - CONCESSIONAIRES INCLUDING
* PRODUCTS - COMPLETED
* OPERATIONS
*
*

GU44	03/01	PENNSYLVANIA AMENDATORY ENDORSEMENT
GU32	03/01	EXCLUSION - LEAD LIABILITY
CG2167	12/04	FUNGI OR BACTERIA EXCLUSION
CG2170	01/15	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
IL985E*	01/15	DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT
IL0017	11/98	COMMON POLICY CONDITIONS
UF4810*	03/08	IMPORTANT NOTICE - POLICY SERVICE FEES
UF8385	03/95	IMPORTANT NOTICE
UF6330*	08/09	IMPORTANT NOTICE: DO YOU USE SUBCONTRACTORS?
CG2196	03/05	SILICA OR SILICA-RELATED DUST EXCLUSION
GU136	03/09	AMENDMENT OF MOBILE EQUIPMENT DEFINITION
ULTD	12/09	AMENDMENT OF OCCURRENCE DEFINITION FOR SUBCONTRACTED WORK
FORM SA	11/12	SUBSCRIBERS AGREEMENT
CG2106	05/14	EXCLUSION-ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY- WITH LIMITED BODILY INJURY EXCEPTION
CG2109	06/15	EXCLUSION - UNMANNED AIRCRAFT
CG2026	04/13 *	ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

IMPORTANT - PLEASE READ

YOUR RATE FOR YOUR COMMERCIAL GENERAL LIABILITY POLICY IS DETERMINED BY USING ONE OF THE FOLLOWING BASES OF PREMIUM -

- A) AREA - RATES ARE PER 1000 SQUARE FEET OF AREA
- B) PAYROLL - RATES ARE PER \$1000 OF PAYROLL
- C) SALES - RATES ARE PER \$1000 OF SALES
- D) ADMISSIONS - RATES ARE PER 1000 ADMISSIONS
- E) COMMISSIONS - RATES ARE PER \$1000 COMMISSIONS
- F) COST - RATES ARE PER \$1000 COST
- G) EXPENDITURES - RATES ARE PER \$1000 EXPENDITURES
- H) OTHER - SEE PREMIUM BASES

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RECORD OF ADDITIONAL INSUREDS - DESIGNATED PERSON OR ORGANIZATION

THE YORK EXPO CENTER
334 CARLISLE AVE
YORK PA 17404-3204