



# Dryden Mutual Insurance Company

12 Ellis Drive . P.O. Box 635 . Dryden, New York 13053  
A New York State Advance Premium Co-Operative Fire Insurance Corporation

## Commercial Fire & Liability Policy

### Declarations Page

Policy Issued on the Co-Operative Plan Non-Assessable Policy

**Policy Period**  
From **03/19/2017** to **03/19/2018 12:01am Standard Time**  
**Named Insured and Mailing Address**  
**Northern New York Regional Narcotics Anonymous**  
**P.O. Box 6062**  
**Syracuse, NY 13217**

**File #: C317640**  
**Policy Number: CFL00029212-02**  
**Renewed From: CFL00029212-01**  
**Agency Information**  
**#651**  
**James S. Sullivan Agency Inc.**  
**401 N Main St**  
**Newark, NY 14513-1150**  
**(315) 331-7247**

**Billing Information**  
**Insured Direct 9 Pay Monthly Renewal**

It is agreed that the complete Named Insured for this policy reads as stated above unless indicated otherwise below.

<b>Property Insurance Section</b>	<b>\$</b>	<b>Premium</b> <b>124.00</b>
<b>Liability Insurance Section</b>	<b>\$</b>	<b>3,206.00</b>
<b>Inland Marine Insurance Section</b>		<b>NONE</b>
<b>Total Policy Premium</b>	<b>\$</b>	<b>3,330.00</b>
<b>New York State Fire Surcharge</b>	<b>\$</b>	<b>0.31</b>

Your billing invoice will be mailed separately.  
Please remember that when deciding on your insurance needs,  
your independent agent is your best source for information.  
Thank you for choosing Dryden Mutual Insurance Company for help in protecting your assets.

**Dryden Mutual Insurance Company  
Commercial Fire & Liability Policy  
Property Coverage Section**

Named Insured and Mailing Address  
Northern New York Regional Narcotics Anonymous  
P.O. Box 6062  
Syracuse, NY 13217

File #: C317640  
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#651  
James S. Sullivan Agency Inc.

Policy Period  
From 03/19/2017 to 03/19/2018 12:01am Standard Time

**Insured Location Information**

Location: 1 Building: 1  
Risk Occupancy: Club  
Location: 501 James St, Syracuse, NY 13203-2218  
Year of Construction: 1890 Construction: Masonry Fire Protection: Highly Protected  
Feet From Hydrant: <1,000 Miles From Fire Department: <5 Fire District: Syracuse  
Class Code: 205 Rate Group: 19  
Classification: Clubs, NOC including Fraternal and Union Halls  
Limit of

Property Coverages	Insurance	Deductible	Coinsurance	Loss Settlement	Form	Premium
Coverage A - Building	NONE	NONE				\$ Incl
Coverage B - Business Property	\$ 5,200	\$ 250	80%	Replacement Cost	SF-4	\$ 77.00
Other Optional Coverages	See Forms List					\$ 47.00
<b>Total Property Coverage Section Premium This Location</b>						<b>\$ 124.00</b>
<b>New York State Fire Surcharge</b>						<b>\$ 0.31</b>

**Mortgagee Information**  
None

**Dryden Mutual Insurance Company  
Commercial Fire & Liability Policy  
Property Coverage Section**

Named Insured: **Northern New York Regional Narcotics Anonymous**

File #: **C317640**

Policy Number: **CFL00029212-02**

Risk Occupancy: **Club**

Location: **501 James St, Syracuse, NY 13203-2218**

Location: **1** Building: **1**

The following is a list and description of the policy forms and endorsements that apply to the property at the above listed location. Some optional endorsements may state a specific amount of insurance. Our limit of liability is not to exceed the amount shown in this schedule and each shall be subject to the terms and conditions of the specific endorsement.

**Property Policy Forms & Optional Coverages**

Form #	Edition Date	Description	Premium
SF-4	01/88	Causes of Loss Form Special Perils Business Property	\$ Incl
SF-20	01/88	Agreement	\$ Incl
SF-27A	07/96	Replacement Cost Provision - Business Property	\$ Incl
SF-61A	04/93	Combination Crime Endorsement Limits of Insurance Agreement 1 (Employee Dishonesty): \$0 Agreement 2 (Loss Inside the Insured Premises): \$5,000 Agreement 3 (Loss Outside the Insured Premises): \$5,000 Deductible: \$250	\$ 42.00
SF-83	03/02	Amendment Of Policy Conditions	\$ Incl
SF-133	01/88	Business Property While Away From Premise Limit of Insurance: \$1,000	\$ 5.00
DMIC-PP	05/01	Privacy Policy	\$ Incl
TERR-DISC	01/15	Policyholder Disclosure - Notice Of Terrorism Insurance Coverage	\$ Incl
TERR-COV	01/15	Notice Of Terrorism Insurance Coverage	\$ Incl

**Dryden Mutual Insurance Company  
Commercial Fire & Liability Policy  
Liability Coverage Section**

**Named Insured and Mailing Address  
Northern New York Regional Narcotics Anonymous  
P.O. Box 6062  
Syracuse, NY 13217**

**File #: C317640  
Policy Number: CFL00029212-02  
Agency Information  
#651  
James S. Sullivan Agency Inc.  
401 N Main St  
Newark, NY 14513-1150  
(315) 331-7247**

**Policy Period  
From 03/19/2017 to 03/19/2018 12:01am Standard Time**

<b>Liability Coverages</b>	<b>Limit of Liability</b>
<b>Coverage L - Bodily Injury &amp; Property Damage</b>	<b>\$ 500,000 Each Occurrence \$ 1,000,000 Aggregate Limit</b>
<b>Coverage M - Medical Payments</b>	<b>\$ 1,000 Each Person \$ 25,000 Each Accident</b>
<b>Coverage N - Products/Completed Operations</b>	<b>\$ 500,000 Each Occurrence \$ 1,000,000 Aggregate Limit</b>
<b>Coverage O - Fire Legal Liability</b>	<b>\$ 50,000 Each Occurrence</b>
<b>Coverage P - Personal Injury &amp; Advertising Liability</b>	<b>Refer to Coverage L - Bodily Injury &amp; Property Damage Limit</b>
<b>Total Liability Coverage Section Premium</b>	
	<b>\$ 3,206.00</b>

**Dryden Mutual Insurance Company  
Commercial Fire & Liability Policy  
Liability Coverage Section**

**Named Insured: Northern New York Regional Narcotics Anonymous**

**File #: C317640**

**Policy Number: CFL00029212-02**

The following is a list and description of the policy forms and endorsements that apply to the liability section of this policy. Some optional endorsements may state a specific amount of insurance or contain specific schedules. The endorsements that contain schedules will have the specific information shown under a separate liability schedule. Our limit of liability is not to exceed the amount shown in any such schedule and each shall be subject to the terms and conditions of the specific endorsement.

**Liability Policy Forms**

Form #	Edition Date	Description	Premium
LS-5S	01/88	Business General Liability Insurance Schedule	\$ 2,719.00
LS-6	01/88	Business General Liability - Extra Coverage	\$ 408.00
LS-23	01/88	Additional Insured (Club Members)	\$ Incl
LS-27	01/88	Products Designated Operations Operations: Clubs - Civic -No Bldg or Premises Owned or Leased - Incl Products Located: 501 James St Syracuse, NY 13203-2218	\$ Incl
LS-42A	01/88	Products/Comp Ops (Food/Beverages) Operations: Restaurants Located: 501 James St Syracuse, NY 13203-2218  Limit: \$500,000 Each Occurrence \$1,000,000 Aggregate	\$ Incl
LS-84	10/97	New York Amendatory Endorsement Medical Payments	\$ Incl \$ 79.00

**Dryden Mutual Insurance Company  
Commercial Fire & Liability Policy  
Liability Schedule**

Named Insured: Northern New York Regional Narcotics Anonymous  
File #: C317640  
Policy Number: CFL00029212-02

**Liability Schedule**

**O, L & T**

Description of Hazards	Code	Rating Basis	Rate	Provisional Premium
Clubs - Civic -No Bldg or Premises Owned or Leased - Incl Products 501 James St Syracuse, NY 13203-2218	12028	PP) 3,750	0.698	\$ 2,618.00 A

**Products / Completed Operations**

Description of Hazards	Code	Rating Basis	Rate	Provisional Premium
Club Food Functions 501 James St Syracuse, NY 13203-2218	07001	R) 20,000	1.088	\$ 101.00 A

**Total Liability Schedule Premium** **\$ 2,719.00**

Some of the premiums above may be subject to a minimum premium and/or may be estimated for rating purposes and will require an audit after the policy has expired. Types of premium bases that are auditable include Payroll, Receipts and Admissions. Those premiums that are subject to audits are marked with "A" after the premium amount.

Dryden Mutual



Since 1860

Insurance Co.

## Dryden Mutual Insurance Company

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**Thank you for placing your business with Dryden Mutual Insurance Company. We value your business.**

**Enclosed is your policy. Please review it carefully. To make any changes, please contact your agent listed on the policy.**

**Important Note:** Please file this update with your current policy. Be sure to keep your policy in a safe place for future reference.

**Your billing invoice will be mailed separately.**

James S. Sullivan Agency, Inc.  
401 N Main St  
Newark, NY 14513-1150

James S. Sullivan Agency, Inc. #651

1950

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