

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY) 7/2/2019

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

THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE	OR	PR	ODL	JCER, AND THE ADDITION	ONAL INTEREST.				
PRODUCER NAME, CONTACT PERSON AND ADDRESS (A/C, No, Ext): 225-292-3515				COMPANY NAME AND ADDRESS NAIC NO: 37885					
Arthur J. Gallagher Risk Management Services, Inc. 235 Highlandia Drive, Suite 200 Baton Rouge, LA 70810				XL Specialty Insurance Company Seaview House 70 Seaview Avenue Stamford CT					
FAX (A/C, No): 225-292-3893				IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH					
CODE: SUB CODE:				POLICY TYPE					
AGENCY CUSTOMER ID #:				Fine Arts					
NAMED INSURED AND ADDRESS				LOAN NUMBER POLICY NUMBER					
Board of Supervisors of Louisiana State University and Agricultural & Mechanical College 253 LSU Alumni Center Baton Rouge, LA 70803						UM00063945SP19A			
				EFFECTIVE DATE EXPIRATION DATE		-	CONTINUED UNTIL		
				06/01/2019	*****		TERMINATED IF CHECKED		
ADDITIONAL NAMED INSURED(S)				THIS REPLACES PRIOR EVIDENCE DATED:					
PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY									
LOCATION / DESCRIPTION Fine Arts Coverage - See Remarks for specifics									
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									
COVERAGE INFORMATION PERILS INSURED	BAS	SIC		BROAD SPECIA	L X "All Risks"				
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$				T		DEI	D:		
	YES	NO	N/A						
☐ BUSINESS INCOME ☐ RENTAL VALUE			Х	If YES, LIMIT:	A	ctual L	oss Sustained; # of months:		
BLANKET COVERAGE	Х			If YES, indicate value(s) reported on property identified above: \$					
TERRORISM COVERAGE		Х		Attach Disclosure Notice / D	EC				
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		Χ							
IS DOMESTIC TERRORISM EXCLUDED?		Χ							
LIMITED FUNGUS COVERAGE				If YES, LIMIT:			DED:		
FUNGUS EXCLUSION (If "YES", specify organization's form used)		Χ							
REPLACEMENT COST			Х						
AGREED VALUE									
COINSURANCE	Х			If YES, %					
EQUIPMENT BREAKDOWN (If Applicable)			Х	If YES, LIMIT:			DED:		
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg			Х	If YES, LIMIT:			DED:		
- Demolition Costs			Х	If YES, LIMIT:			DED:		
- Incr. Cost of Construction			Х	If YES, LIMIT:			DED:		
EARTH MOVEMENT (If Applicable)			Х	If YES, LIMIT:			DED:		
FLOOD (If Applicable)				If YES, LIMIT:			DED:		
WIND / HAIL INCL YES NO Subject to Different Provisions:	Х			If YES, LIMIT:			DED:		
NAMED STORM INCL YES NO Subject to Different Provisions:	Х			If YES, LIMIT:			DED:		
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS			Х						
CANCELLATION									
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.									
ADDITIONAL INTEREST CONTRACT OF SALE LENDER'S LOSS PAYABLE LOSS	PAY	′FF		LENDER SERVICING AGENT N	AME AND ADDRESS				
MORTGAGEE EENBERG EGGGTATABLE EGGG									
NAME AND ADDRESS									
Proof of Inquirones				AUTUODIZED DEDE	\ <u></u>				
Proof of Insurance				AUTHORIZED REPRESENTATIVE					
				Anna do Prese					

AGENCY CUSTOMER ID:	
I OC #:	



ADDITIONAL REMARKS SCHEDULE

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AGENCY Arthur J. Gallagher Risk Management Services, Inc.	NAMED INSURED Board of Supervisors of Louisiana State University and Agricultural & Mechanical College 253 LSU Alumni Center Baton Rouge, LA 70803				
POLICY NUMBER					
CARRIER	NAIC CODE				
		EFFECTIVE DATE:			
ADDITIONAL DEMARKS					

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE FORM NUMBER: __ 28

REMARKS:

FINE ARTS INSURANCE:

\$85,000,000 Blanket for the permanent collection and temporary loans coverage over the various collections at premises situated at the Louisiana State University

\$10,000,000 at any Un-Named Locations \$10,000,000 while in transit including personally conveyed

Permanent Collection: Inventory amount or market value, whichever the highest Loans/Gifts: Amount outlined on the loan agreement/legal liability Student Art: \$500, proven sales price or cost to refabricate, whichever the highest

DEDUCTIBLES:

Permanent Collection: \$2,500 Loans/Consignments: \$0 Wind/Flood: \$25,000

SPECIAL FINE ARTS POLICY FEATURES:

Partial Loss Agreement/Pair and Set Clause

Buy Back Agreement/Appraisal Automatic Coverage - Newly Acquired: \$500,000 U.S. Indemnity Territorial Limits: Worldwide

FLOOD SUBLIMIT AND LIMITATION

\$250,000 in the Aggregate with respect to loss of Flood or Surface Water in a basement in buildings not in an A Flood Zone. All Flood Claims are subject to a \$25,000 Deductible.