



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

4/28/2023

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.

PRODUCER NAME, CONTACT PERSON AND ADDRESS LOCKTON COMPANIES 2100 ROSS AVENUE, SUITE 1400 DALLAS TX 75201		PHONE (A/C, No, Ext): 214-969-6700	COMPANY NAME AND ADDRESS Zurich American Insurance Company		NAIC NO: 16535
FAX (A/C, No):		E-MAIL ADDRESS:	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH		
CODE: AGENCY CUSTOMER ID #:		SUB CODE:		POLICY TYPE Property	
NAMED INSURED AND ADDRESS 1120608		Sally Beauty Holding, Inc., Sally Beauty Supply, LLC, Beauty Systems Group, LLC Sally Beauty de Puerto Rico, Inc Armstrong McCall, L.P. 3001 Colorado Blvd. Denton TX 76210		LOAN NUMBER	POLICY NUMBER PPR0281382-05
		EFFECTIVE DATE 4/30/2023	EXPIRATION DATE 4/30/2024	<input type="checkbox"/> CONTINUED UNTIL 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

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

BASIC

BROAD

☒

SPECIAL

COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 10,000,000 DED: \$75,000

	YES	NO	N/A	
<input checked="" type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE		X		If YES, LIMIT: <input type="checkbox"/> Actual Loss Sustained; # of months:
BLANKET COVERAGE	X			If YES, indicate value(s) reported on property identified above: \$
TERRORISM COVERAGE	X			Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?		X		
IS DOMESTIC TERRORISM EXCLUDED?		X		
LIMITED FUNGUS COVERAGE	X			If YES, LIMIT: 500k oc/1M agg DED: \$75,000
FUNGUS EXCLUSION (If "YES", specify organization's form used)		X		
REPLACEMENT COST	X			
AGREED VALUE	X			
COINSURANCE		X		If YES, %
EQUIPMENT BREAKDOWN (If Applicable)	X			If YES, LIMIT: Various DED: \$75,000
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	X			If YES, LIMIT: Included DED: \$75,000
- Demolition Costs	X			If YES, LIMIT: \$10,000,000 DED: \$75,000
- Incr. Cost of Construction	X			If YES, LIMIT: \$10,000,000 DED: \$75,000
EARTH MOVEMENT (If Applicable)	X			If YES, LIMIT: Various DED: Various
FLOOD (If Applicable)	X			If YES, LIMIT: Various DED: Various
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:	X			If YES, LIMIT: Included DED: Various
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:	X			If YES, LIMIT: Various DED: Various
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS	X			

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

F0

[D548270] [D590813]

CONTRACT OF SALE	LENDER'S LOSS PAYABLE	LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
MORTGAGEE			
NAME AND ADDRESS			AUTHORIZED REPRESENTATIVE

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EVIDENCE OF COMMERCIAL PROPERTY INSURANCE-Including Special Conditions (Use only if more space is required)

Covered locations include: All locations within the United States and Puerto Rico as identified in existing leases and leases executed during the policy term by any entity listed as a Named Insured. Property policy insures the Insured's interest in Personal Property, including Improvements and Betterments.

Named Insured(s): Sally Beauty Holdings, Inc.
Sally Beauty Supply, LLC
Beauty Systems Group, LLC
Armstrong McCall, L.P.
Sally Beauty de Puerto Rico Inc.

Policy Period: 4/30/2023 – 4/30/2024

6.13.04 – SUBROGATION

The Insured is required to cooperate in any subrogation proceedings. To the extent of the Company's payment, the Insured's rights of recovery against any party are transferred to the Company.

The Company acquires no rights of recovery that the Insured has expressly waived prior to a loss, nor will such waiver affect the Insured's rights under this Policy.

Any recovery from subrogation proceedings, less costs incurred by the Company in such proceedings, will be payable to the Insured in the proportion that the amount of any applicable deductible and/or any provable uninsured loss, bears to the entire provable loss amount.

Named Insured(s): Sally Beauty Holdings, Inc.
Sally Beauty Supply, LLC
Beauty Systems Group, LLC
Armstrong McCall, L.P.
Sally Beauty de Puerto Rico Inc.

Sabotage and Terrorism:

Insurer: Valencia Hiscox
Policy Number: PRPNA2104552
Policy Period: 4/30/2023 - 4/30/2024
Policy Limit: \$100,000,000