



A Member of the Tokio Marine Group

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PHLY.com

**Philadelphia Indemnity Insurance Company**  
**A Stock Company (Nonparticipating)**  
**COMMON POLICY DECLARATIONS**

**Policy Number:** PHPK2687040-002

**Named Insured and Mailing Address:**

Paragon Star Holdings, LLC  
4025 NE Lakewood Way Ste 250  
Lees Summit, MO 64064-2054

**Producer:** 125068

Lovell Insurance Group, LLC  
3167 SW Rockbridge Dr  
Lees Summit, MO 64081

**Policy Period From:** 05/19/2025 **To:** 05/19/2026

(816)365-1983

at 12:01 A.M. Standard Time at your mailing  
address shown above.

**Business Description:** Sports Arena

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.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	<b>PREMIUM</b>
<b>Commercial Property Coverage Part</b>	
<b>Commercial General Liability Coverage Part</b>	33,816.00
<b>Commercial Crime Coverage Part</b>	
<b>Commercial Inland Marine Coverage Part</b>	10,397.00
<b>Commercial Auto Coverage Part</b>	
<b>Businessowners</b>	
<b>Workers Compensation</b>	
UltimateCover Property Coverage Part	71,744.00
Sexual/Physical Abuse	3,741.00
Liquor Liability Coverage Part	250.00
<b>Total</b>	<b>\$ 119,948.00</b>
Total Includes Federal Terrorism Risk Insurance Act Coverage	<b>2,130.00</b>

CPD-PIIC-CW (02/21)

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**FORM (S) AND ENDORSEMENT (S) MADE A PART OF THIS POLICY AT THE TIME OF ISSUE**  
**Refer To Forms Schedule**

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\*Omits applicable Forms and Endorsements if shown in specific Coverage Part/Coverage Form Declarations



**Secretary**



**President and CEO**

Philadelphia Indemnity Insurance Company  
Form Schedule – Policy

**Policy Number:** PHPK2687040-002

Forms and Endorsements applying to this Coverage Part and made a part of this policy at time of issue:

Form	Edition	Description
CDC Parents	0510	A Fact Sheet For Parents
CDC Youth Sports	0610	A Fact Sheet For Athletes
BJP-190-1	0221	Commercial Lines Policy Jacket
PI-EXEMPT-NOTICE 1 MO	0119	Notice - Missouri Forms and Rates Filing Requirements
PI-FEES-NOTICE 1	1119	Notice Late/Non-Sufficient Funds/Reinstatement Fee
PP2020	0220	Privacy Notice For Commercial Lines
CPD-PIIC-CW	0221	Common Policy Declarations
PI-LOC-SCH	0820	Location Schedule
PI-NI-SCH	0820	Named Insured Schedule
PI-BELL-1 MO	1016	Bell Endorsement
PI-CME-1 MO	1109	Crisis Management Enhancement Endorsement
IL0017	1198	Common Policy Conditions
IL0021	0908	Nuclear Energy Liability Exclusion Endorsement
IL0101	0422	Missouri Changes
IL0105	1008	Missouri Changes - Pollution
IL0274	0213	Missouri Changes - Cancellation and Nonrenewal
IL0952	0115	Cap On Losses From Certified Acts Of Terrorism
PI-ACL-001	1218	Absolute Cyber Liability And Electronic Exclusion
PI-SAM-018 MO	0122	Absolute Abuse or Molestation Exclusion Prof Liab - MO
PI-TER-DN1	0121	Disclosure Notice Of Terrorism Ins Coverage Rejection

## Philadelphia Indemnity Insurance Company

## Locations Schedule

**Policy Number:** PHPK2687040-002

<b>Prem. No.</b>	<b>Bldg. No.</b>	<b>Address</b>
0001	0001	1401 River Road Turf and Pad Field 1 Lees Summit, MO 64081
0001	0002	1401 River Road Turf and Pad Field 2 Lees Summit, MO 64081
0001	0003	1401 River Road Turf and Pad Field 3 Lees Summit, MO 64081
0001	0004	1401 River Road Turf and Pad Field 4 Lees Summit, MO 64081
0001	0005	1401 River Road Turf and Pad Field 5 Lees Summit, MO 64081
0001	0006	1401 River Road Turf and Pad Field 6 Lees Summit, MO 64081
0001	0007	1401 River Road Turf and Pad Field 7 Lees Summit, MO 64081
0001	0008	1401 River Road Turf and Pad Field 8 Lees Summit, MO 64081
0001	0009	1401 River Road Turf and Pad Field 9 Lees Summit, MO 64081
0001	0010	1401 River Road Turf and Pad Field 10 Lees Summit, MO 64081
0001	0011	1401 River Road Musco Sports Lights Lees Summit, MO 64081
0001	0012	1401 River Road Fencing and Ball Netting Lees Summit, MO 64081

Philadelphia Indemnity Insurance Company  
Locations Schedule

**Policy Number:** PHPK2687040-002

**Premis. Bldg.**

**No. No. Address**

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0001	0013	1401 River Road Bleachers and Press Box Lees Summit, MO 64081
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Philadelphia Indemnity Insurance Company  
Named Insured Schedule

**Policy Number:** PHPK2687040-002

Lightfoot Sports, LLC

Lightfoot Management, LLC

Thunderbolt Beverages, LLC

Paragon Star, LLC

PBAJ Management, LLC

# Philadelphia Indemnity Insurance Company

## COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Policy Number: PHPK2687040-002

Agent # 125068

See Supplemental Schedule

### LIMITS OF INSURANCE

\$	3,000,000	General Aggregate Limit (Other Than Products – Completed Operations)
\$	3,000,000	Products/Completed Operations Aggregate Limit
\$	1,000,000	Personal and Advertising Injury Limit (Any One Person or Organization)
\$	1,000,000	Each Occurrence Limit
\$	100,000	Rented To You Limit (Any One Premises)
\$	0	Medical Expense Limit (Any One Person)

### FORM OF BUSINESS: LLC

Business Description: Sports Arena

Location of All Premises You Own, Rent or Occupy: **SEE SCHEDULE ATTACHED**

**AUDIT PERIOD, ANNUAL, UNLESS OTHERWISE STATED:** This policy is not subject to premium audit.

Classifications	Code No.	Premium Basis	Rates		Advance Premiums	
			Prem./ Ops.	Prod./ Comp. Ops	Prem./ Ops.	Prod./ Comp. Ops.
SEE SCHEDULE ATTACHED						
<b>TOTAL PREMIUM FOR THIS COVERAGE PART:</b>					\$ 33,527.00	\$ 289.00

### RETROACTIVE DATE (CG 00 02 ONLY)

This insurance does not apply to "Bodily Injury", "Property Damage", or "Personal and Advertising Injury" which occurs before the retroactive date, if any, shown below.

Retroactive Date: NONE

**FORM (S) AND ENDORSEMENT (S) APPLICABLE TO THIS COVERAGE PART: Refer To Forms Schedule**

\_\_\_\_\_  
Countersignature Date

\_\_\_\_\_  
Authorized Representative

# Philadelphia Indemnity Insurance Company

## Form Schedule – General Liability

**Policy Number:** PHPK2687040-002

Forms and Endorsements applying to this Coverage Part and made a part of this policy at time of issue:

Form	Edition	Description
Gen Liab Dec	1004	Commercial General Liability Coverage Part Declaration
Gen Liab Schedule	0100	General Liability Schedule
CG0001	0413	Commercial General Liability Coverage Form
CG0134	0803	Missouri Changes - Pollution Exclusion
CG2106	0514	Excl-Access/Disclosure-With Ltd Bodily Injury Except
CG2132	0509	Communicable Disease Exclusion
CG2135	1001	Exclusion - Coverage C - Medical Payments
CG2144	0417	Limitation Of Cov To Designated Prem/Project/Operation
CG2147	1207	Employment-Related Practices Exclusion
CG2149	0999	Total Pollution Exclusion Endorsement
CG2153	0196	Exclusion - Designated Ongoing Operations
CG2167	1204	Fungi or Bacteria Exclusion
CG2170	0115	Cap On Losses From Certified Acts Of Terrorism
CG2239	0413	Exclusion - Camps Or Campgrounds
CG2407	0196	Products/Completed Operations Hazard Redefined
CG2416	1207	Canoes Or Rowboats
CG2625	0405	Missouri Changes - Guaranty Association
CG2643	1204	Missouri Changes-Binding Arbitration
CG2650	0413	Missouri Changes - Medical Payments
PI-AM-057	1208	Participant Legal Liability-Accident Medical Warranty
PI-AS-001	0404	Amateur Sports Amendatory Endorsement
PI-AS-002	0404	Waiver and Release System
PI-AS-004	0404	Min Earned Prem End Sports Activities & Special Events
PI-AS-008	0404	Sports and Recreation Professional Liability
PI-GL-001	0894	Exclusion - Lead Liability
PI-GL-002	0894	Exclusion - Asbestos Liability
PI-GL-006 MO	0919	Traumatic Brain Injury Coverage Limitation Endorsement
PI-GL-029	0919	Continuous Or Progressive Injury Exclusion Endorsement
PI-GL-030	0919	Return To Play Endorsement
PI-GL-042	0422	Total Exclusion - PFC/PFAS
PI-SAM-006 MO	0122	Abuse Or Molestation Exclusion - Missouri

# Philadelphia Indemnity Insurance Company

## COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL SCHEDULE

Policy Number: PHPK2687040-002

Agent # 125068

Classifications	Code No.	Premium Basis	Rates		Advance Premiums	
			Prem./ Ops.	Prod./ Comp. Ops.	Prem./ Ops.	Prod./ Comp. Ops.
MO PREM NO. 001 ATHLETIC PROGRAM-AMATEUR-FP SOCCER 12 & UNDER	40066	792 PARTICIPANT	6.900	INCL	5,487	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 ATHLETIC PROGRAM-AMATEUR-FP SOCCER 13-16	40066	517 PARTICIPANT	7.188	INCL	3,731	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 ATHLETIC PROGRAM-AMATEUR-FP SOCCER 17-18	40066	110 PARTICIPANT	7.475	INCL	825	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 ATHLETIC PROGRAM-AMATEUR-FP SOCCER 19 & OLDER	40066	180 PARTICIPANT	7.475	INCL	1,351	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 AMATEUR SPORTS FACILITY.	44315	750,000 GROSS SALES	17.745	INCL	13,362	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 CAMP-PROFIT-TOURNAMENTS SOCCER - AGES UP TO 18 DAY	41421	8,000 CAMPER DAY	0.690	INCL	5,542	INCL
PROD/COMP OP SUBJ TO GEN AGG LIMIT						
MO PREM NO. 001 RESTAURANT-OPER CONC-FP	16819	29,000 GROSS SALES	5.695	0.476	166	15

# Philadelphia Indemnity Insurance Company

## COMMERCIAL GENERAL LIABILITY COVERAGE PART SUPPLEMENTAL SCHEDULE

Policy Number: PHPK2687040-002

Agent # 125068

Classifications	Code No.	Premium Basis	Rates		Advance Premiums	
			Prem./ Ops.	Prod./ Comp. Ops.	Prem./ Ops.	Prod./ Comp. Ops.
BALANCE TO MEET PROD/COMP SUBLINE MINIMUM	44444					274
MO SPORTS AND RECREATION PROFESSIONAL LIAB	40066				3,063	

# Philadelphia Indemnity Insurance Company

## COMMERCIAL INLAND MARINE COVERAGE PART DECLARATIONS

Policy Number: PHPK2687040-002

See Supplemental Schedule

Agent # 125068

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**FORM OF BUSINESS:** LLC

Business Description: Sports Arena

Location of All Premises You Own, Rent or Occupy: **SEE SCHEDULE ATTACHED**

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<u>ITEM NO.</u>	<u>LIMIT OF INSURANCE</u>	<u>DEDUCTIBLE</u>	<u>DESCRIPTION</u>
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**SEE SCHEDULE ATTACHED**

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**DEDUCTIBLE:** **SEE SCHEDULE ATTACHED**

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**MORTGAGE HOLDERS:**  
Refer To Mortgagee/Loss Payee Schedule

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**FORM(S) AND ENDORSEMENT(S) APPLICABLE TO THIS COVERAGE PART:**  
Refer To Forms Schedule

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**TOTAL PREMIUM FOR THIS COVERAGE PART \$ 10,397.00**

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\_\_\_\_\_  
Countersignature Date

\_\_\_\_\_  
Authorized Representative

**Philadelphia Indemnity Insurance Company**

**POLICY NUMBER:** PHPK2687040-002

**LIQUOR LIABILITY DECLARATIONS**

NAMED INSURED	Paragon Star Holdings, LLC		
MAILING ADDRESS	4025 NE Lakewood Way Ste 250 Lees Summit, MO 64064-2054 (Jackson CTY)		
POLICY PERIOD:	FROM 05/19/2025	TO 05/19/2026	AT 12:01 A.M. TIME AT
YOUR MAILING ADDRESS SHOWN ABOVE			

**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.**

LIMITS OF INSURANCE		
EACH COMMON CAUSE LIMIT	\$	1,000,000
AGGREGATE LIMIT	\$	1,000,000

RETROACTIVE DATE (CG 00 34 ONLY)
THIS INSURANCE DOES NOT APPLY TO " INJURY" WHICH OCCURS BEFORE THE RETROACTIVE DATE, IF ANY, SHOWN BELOW. RETROACTIVE DATE: NONE (ENTER DATE OR "NONE" IF NO RETROACTIVE DATE APPLIES)

DESCRIPTION OF BUSINESS
FORM OF BUSINESS: LLC  BUSINESS DESCRIPTION: Sports Arena

ALL PREMISES YOU OWN, RENT OR OCCUPY	
LOCATION NUMBER	ADDRESS OF ALL PREMISES YOU OWN, RENT OR OCCUPY
SEE SCHEDULE ATTACHED	

CLASSIFICATION AND PREMIUM				
CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE	ADVANCE PREMIUM
SEE SCHEDULE ATTACHED		\$	\$	\$
TOTAL PREMIUM (SUBJECT TO AUDIT)				\$ <u>250.00</u>
PREMIUM SHOWN IS PAYABLE:		AT INCEPTION		\$ <u>SEE DEC</u>
		AT EACH ANNIVERSARY		\$ _____
(IF POLICY PERIOD IS MORE THAN ONE YEAR AND PREMIUM IS PAID IN ANNUAL INSTALLMENTS)				
AUDIT PERIOD (IF APPLICABLE) <b>Not Auditable</b>	<input type="checkbox"/> ANNUALLY	<input type="checkbox"/> SEMI-ANNUALLY	<input type="checkbox"/> QUARTERLY	<input type="checkbox"/> MONTHLY

ENDORSEMENTS
ENDORSEMENTS ATTACHED TO THIS POLICY: <span style="float: right;"><b>SEE FORMS SCHEDULE</b></span>

**THESE DECLARATIONS, TOGETHER WITH THE COMMON POLICY CONDITIONS AND COVERAGE FORM(S) AND ANY ENDORSEMENT(S), COMPLETE THE ABOVE NUMBERED POLICY.**

Countersigned	Countersigned By:
(Date)	(Authorized Representative)

# Philadelphia Indemnity Insurance Company

## Form Schedule – Liquor Liability

**Policy Number:** PHPK2687040-002

Forms and Endorsements applying to this Coverage Part and made a part of this policy at time of issue:

Form	Edition	Description
CGDS03	0798	Liquor Liability Declarations
Liquor Liab Schedule	0204	Liquor Liability Schedule
CG0033	0413	Liquor Liability Coverage Form
CG2170	0115	Cap On Losses From Certified Acts Of Terrorism
CG2625	1204	Missouri Changes - Guaranty Association
CG2643	1204	Missouri Changes-Binding Arbitration

## LIQUOR LIABILITY SCHEDULE

<b>ALL PREMISES YOU OWN, RENT OR OCCUPY</b>	
LOCATION NUMBER	ADDRESS OF ALL PREMISES YOU OWN, RENT OR OCCUPY
0001	1401 River Road Bleachers and Press Box Lees Summit, MO 64081
0001	1401 River Road Fencing and Ball Netting Lees Summit, MO 64081
0001	1401 River Road Musco Sports Lights Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 1 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 10 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 2 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 3 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 4 Lees Summit, MO 64081

LOCATION NUMBER	CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE	ADVANCE PREMIUM
0001	25% or more ALCOHOL Restaurant, Tavern,hotel,motel-	58161	\$ 35,000	\$ 6.140	\$ 215
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$

## LIQUOR LIABILITY SCHEDULE

ALL PREMISES YOU OWN, RENT OR OCCUPY	
LOCATION NUMBER	ADDRESS OF ALL PREMISES YOU OWN, RENT OR OCCUPY
0001	1401 River Road Turf and Pad Field 5 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 6 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 7 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 8 Lees Summit, MO 64081
0001	1401 River Road Turf and Pad Field 9 Lees Summit, MO 64081

LOCATION NUMBER	CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE	ADVANCE PREMIUM
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$