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Exhibit "E"

## Storage Tank Third Party Liability TankGuard® Renewal Warranty

NAMED INSURED:	Marion County Cypress River Airport			
INSURER:	Commerce and Industry Insurance Company			
POLICY NUMBER:	PLC003033652			
POLICY PERIOD:	12/01/2025 to 12/01/2026			
The undersigned warrants and represents that there have been no changes to the schedule of covered tanks or locations:				
INSURANCE, BUT IT IS AGRI BE ISSUED, AND IT WILL BE THE UNDERSIGNED APPLIC FORTH IN THIS WARRANTY MISSTATED. THE APPLICAN SUPPLIED ON THIS WARRAI RENEWAL POLICY EFFECTIVE	DOES NOT BIND THE APPLICANT TO BUY, OR THE COMPANY TO ISSUE THE EED THAT THIS FORM SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY ATTACHED TO THE ORIGINAL APPLICATION AND MADE A PART OF THE POLICY. ANT DECLARES, WARRANTS AND REPRESENTS THAT THE STATEMENTS SET ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR T FURTHER DECLARES, WARRANTS AND REPRESENTS THAT IF THE INFORMATION NTY CHANGES BETWEEN THE EXECUTION DATE OF THE WARRANTY AND THE VE DATE, THE APPLICANT WILL IMMEDIATELY NOTIFY THE COMPANY OF SUCH ANY MAY WITHDRAW OR MODIFY ANY OUTSTANDING QUOTATIONS AND/OR HE INSURANCE.			
MOST RECENT LONG FORM	AND MATERIALS FURNISHED TO THE COMPANY IN CONJUNCTION WITH THE APPLICATION AS WELL AS THE RENEWAL WARRANTY SIGNED HEREUNDER ARE ENCE INTO THIS APPLICATION AND MADE A PART THEREOF.			
In the event that the company issues a policy, the undersigned acting on behalf of the applicant and all proposed insureds, acknowledges that the company, in providing coverage, will have relied upon, as representations, the declarations and statements which are contained in or attached to or incorporated by reference into this warranty and which are incorporated into the policy.				
If the insured would like an indication for higher limits, please indicate.				
LIMITS DESIRED: (each incid	lent/aggregate)			
\$1 Million/\$1	Million \$1 Million/\$2 Million \$2 Million/\$2 Million			
OTHER:				
DEDUCTIBLE DESIRED: (each incident)				
\$5,000	\$10,000 \$100,000 \$100,000			
For Deductibles above \$50,000, please include your most current audited financial statement.				



## Storage Tank Third Party Liability TankGuard® Renewal Warranty

	Renewal Warranty A	cknowledgen	nent
APPLICANT:	MICH	BROKER:	Avsurance Corporation
	(Signature)		(Firm)
	Marion County Cypress River Airport		47 West Ellsworth Road Ann Arbor, MI 48108
APPLICANT:	Loward J. LaFleur Country Sindyc (Print Name) 9-29-2025		Street Mailing Address
DATE:	9-29-2025		
			(Contact Person)
			(Phone #. Fax #, Email Address)
			(Signature of Broker or Agent)
			363749286
			(License Number and State)
			363749286
			(Tay I D. #)

Please note that if you are planning on adding either additional tanks or locations to this policy, the Company requires that we first receive a fully completed renewal application within thirty (30) days of the policy expirations expiration date. Please visit our website www.policymanagers.com to download to application.

NOTICE TO APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

## POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM RISK INSURANCE ACT (TRIA) COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, that you have a right to purchase insurance coverage for losses resulting from acts of terrorism. As defined In Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury- in consultation with the Secretary of Homeland Security, and the Attorney General of the United States-to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THE FORMULA, THE UNITED STATES GOVERNMENT GENERALLY REIMBURSES 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING JANUARY 1, 2018; 81% BEGINNING JANUARY 1, 2019 and 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

<u>Unless you, or your insurance broker on your behalf, REJECTS in writing to the Company</u> Terrorism Coverage under the Terrorism Risk Insurance Act as amended, you will be covered for Terrorism as defined in the Act and <u>your prospective premium</u> for that coverage is based upon which coverage option you choose (Coverage options setting forth limits, policy term, etc. are set forth in the attached letter of indication).

Terrorism Act Premium:

\$113.00

I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.

olicy older/applicant's Signature

Commerce and Industry Insurance Company

Return to:

Policy Managers

317 Riveredge Blvd., Suite 206

Cocoa, FL 32922

Policyholder/Applicant's Printed Name

Marion County Cypress River Airport

Exp Policy #

PLC003033652

Quote#:

103451.10

9-29-2025 Date

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Terrorism coverage Storage tank liability proposal <u>2017</u> \$638.00 \$113.00 \$113.00 <u>2018</u> \$638.00 <u>2019</u> \$638.00 \$113.00 \$113.00 <u>2020</u> \$638.00 \$113.00 <u>2021</u> \$638.00 \$113.00 <u>2022</u> \$525.00 <u>2023</u> \$525.00 \$113.00 \$113.00 <u>2024</u> \$525.00

PROPOSAL <u>2025</u>