

TAMARAH



DATE (MM/DD/YYYY) 11/15/2024

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

lt th	nis certificate does not confer rights	to the	cert	terms and conditions of ificate holder in lieu of su	ıch end	dorsement(s)	policies may	require an endorsemer	it. A St	atement on	
PRODUCER Mountain West Insurance - Englewood 3575 S Sherman Street						CONTACT NAME: PHONE (A/C, No, Ext): (303) 762-1717 FAX (A/C, No): (303) 762-1733					
								RDING COVERAGE		NAIC #	
					INSURER A : American Alternative Insurance Corporation				<u>ation</u>		
INSU	JRED			. Ai-ti	INSURER B: Continental Casualty Company					20443	
	Woodridge Townhomes Ho 1430 Railroad Ave	meov	vners	ASSOCIATION	INSURER C:						
	Ste A				INSURER D:					-	
	Rifle, CO 816503334				INSURER E :					-	
					INSURE	RF:					
				E NUMBER:				REVISION NUMBER:			
	HIS IS TO CERTIFY THAT THE POLIC NDICATED. NOTWITHSTANDING ANY										
С	ERTIFICATE MAY BE ISSUED OR MAY	PER	TAIN,	THE INSURANCE AFFOR	DED BY	Y THE POLIC	IES DESCRIB	BED HEREIN IS SUBJECT 1			
INSR	XCLUSIONS AND CONDITIONS OF SUCH				BEEN	POLICY EFF	POLICY EXP				
A	TYPE OF INSURANCE	INSD	SUBR	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)			1.000.000	
^	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			551151116		444540004	44/45/0005	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000	
	CLAIMS-MADE A OCCUR			PENDING		11/15/2024	11/15/2025	PREMISES (Ea occurrence)	\$	5,000	
								MED EXP (Any one person)	\$	1,000,000	
								PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: PRO- PRO- PRO- LOC							GENERAL AGGREGATE	\$	1,000,000	
	JEG1							PRODUCTS - COMP/OP AGG	\$	1,000,000	
Α	OTHER:							COMBINED SINGLE LIMIT	\$	1.000.000	
^	AUTOMOBILE LIABILITY			DENDING		44/45/0004	44/45/0005	(Ea accident)	\$		
	ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS			PENDING		11/15/2024	11/15/2025	BODILY INJURY (Per person)	\$		
								BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)			
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							(Per accident)	\$		
	LIMPRELLA LIAR OCCUP								\$		
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADI	=						EACH OCCURRENCE	\$		
	DED RETENTION\$	_						AGGREGATE	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER	\$		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE	,									
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$		
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT			
Α	DÉSCRIPTION OF OPERATIONS below Property			PENDING		11/15/2024	11/15/2025	Building	\$	5,940,000	
В	Crime			768631808		11/14/2024	11/14/2025	Fidelity		150,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHI	TIES /	ACORI	101 Additional Pomarks School	ılo may h	o attached if mor	o enaco ie rogui	rod)			
DEG	ON HON OF OF ENAMONO, EGOATIONO, VEHIC	, 0110	ACOM	7 101, Additional Remarks ochedi	ile, iliay b	e attached il illoi	e space is requi	ieu)			
CF	RTIFICATE HOLDER				CANO	CELLATION					
OL	KIII IOATE HOEBER				OAII.	<u>JEELA HON</u>					
			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE								
	Unit Owners Copy					THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
					ACCOMPANCE WITH THE POLICY PROVIDENCE.						
					AUTHO	RIZED REPRESE	NTATIVE				
					0	a	la n	la			
						amant	w bu	UC.			

LOC #: 0



ADDITIONAL REMARKS SCHEDULE

Page	1	of	1
------	---	----	---

AGENCY		NAMED INSURED			
Mountain West Insurance - Englewood		Woodridge Townhomes Homeowners Association 1430 Railroad Ave			
POLICY NUMBER		Ste A Rifle, CO 816503334			
SEE PAGE 1		Garfield			
CARRIER	NAIC CODE				
SEE PAGE 1 SEE P 1		EFFECTIVE DATE: SEE PAGE 1			

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Additional Coverage Information

Guaranteed Replacement Cost Valuation Applies // 12 units // \$10,000 deductible // \$10k per unit ice damming deductible & 1% wind/hail deductible per Bldg

See attached Unit Owner Letter for how property coverage applies

Special Causes of Loss Ordinance and Law: Coverage A - Included Coverage B - \$1,000,000 Coverage C - \$1,000,000

Coinsurance: N/A – Guaranteed Replacement Cost

Agreed Amount Endorsement: N/A - Guaranteed Replacement Cost

Inflation Guard: N/A - Guaranteed Replacement Cost

Equipment Breakdown: Included Wind/Hail Coverage: Included Separation of Insured: Included

Fidelity Bond: Property Manager & non-compensated employees included: Yes

Notice of Cancellation: 10 Days for Non-Payment or Premium Minimum 30 Days All Other Reasons

Directors & Officers

Carrier: Continental Casualty

Policy #: 768631808

Effective: 11/20/2024 - 11/20/2025

Limit: \$1,000,000 - Occurrence/Aggregate



Mountain West Insurance & Financial Services, LLC

201 Centennial St. 4th Floor, Glenwood Springs, CO 81601 (800) 390-0559 toll-free (970) 945-9111 office (970) 945-2350 fax www.mtnwst.com

11/15/2024

RE: Woodridge Townhomes Homeowners Association

Dear Unit Owner:

We appreciate the opportunity to place the Master Association Insurance Policy for Woodridge Townhomes Homeowners Association, and we look forward to servicing the Association's insurance needs for this coming year. We believe we bring the best value to our Association clients and that is a combination of comprehensive coverage at very competitive premiums.

The Association's Master Insurance Policy has been written to comply with the insurance requirements outlined in the Association Declarations.

The Association is to insure the following:

- ⇒ Common Elements (buildings, structures and common areas)
- ⇒ Limited Common Elements (outdoor decks, patios, etc.)
- ⇒ All interior finished surfaces of walls, floors & ceilings, including appliances, carpeting and equipment in the unit
- ⇒ Any improvements and betterments installed by previous or current unit owners

AN IMPORTANT INSURANCE REMINDER FOR ALL UNIT OWNERS:

Owners are responsible for insurance on the following:

- ⇒ Contents Furniture, Furnishings and other Personal Property (Do I have replacement cost coverage or actual cash value?)
- ⇒ Loss of Rental Income / Loss of Use / Loss of Assessments
 (What limits are available? Does the loss assessment coverage apply towards an association deductible?)
- ⇒ Personal Liability
 (Does my policy have rental restrictions? Does my umbrella extend to this policy?)

Please refer to the insurance section of the Association Declarations for further information regarding insurance requirements for both the Association and the individual Unit Owner.

Please send all insurance certificate requests you receive from your lender to assncert@mtnwst.com

If you have any questions or need any further clarification, please give me a call.

Sincerely,

Cole Willard

Commercial Lines Agent

Cole Willard



Mountain West Insurance & Financial Services, LLC

201 Centennial St. 4th Floor, Glenwood Springs, CO 81601 (800) 390-0559 toll-free (970) 945-9111 office (970) 945-2350 fax www.mtnwst.com

Association Residential Unit Owner's Insurance Coverage Fact Sheet

(Questions to ask your individual insurance agent)

Personal Property coverage - The policy covers the personal belongings at the location of the unit, such as furniture, dishes, clothing, etc.

Q. Do I have replacement cost coverage or actual cash value?

Loss of Rental Income/or Loss of Use - In the event of a covered loss and the unit is found not fit to live in, the policy will provide coverage for additional living expenses (primary or secondary home) or loss of rental income (rental property) until the unit is repaired.

Q. What limits are available?

Loss Assessment coverage - The policy will pay for your share of a loss assessment charged against unit owners as a result of a loss to the property owned by the association or for a bodily injury or property damage liability claim against the association. Loss Assessment coverage is subject to coverage and exclusions in the unit owner's policy. The policy may also provide some coverage towards the association deductible.

Q. What limits are available? Does loss assessment coverage apply towards an association deductible?

Personal Liability - The policy provides liability coverage in the unit. Coverage would apply if the unit owner is found to be legally liable for a claim of bodily injury or property damage. Most unit owner's policies can provide limits up to \$500,000.

Q. Does my Umbrella policy extend to this policy? Does my policy have any rental restrictions?