

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
03/05/2018

PRODUCER
ANDERSON-BAN INSURANCE, INC.
7505 VILLAGE SQ. DR. SUITE 203
CASTLE ROCK, CO. 80108

Serial # B10937
303-814-3558

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURED
TRAIL CREEK RANCH CONDOMINIUMS ASSOCIATION, INC.
C/O 5280 PROPERTY MANAGEMENT
1615 CALIFORNIA ST., STE 407
DENVER, CO 80202

INSURER A: TRAVELERS INSURANCE CO
INSURER B: CHUBB INSURANCE
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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 CERTIFICATE 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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	I-680-0262T271	10/01/17	10/01/18	EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 300,000
					MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN EA ACC AUTO ONLY: \$ AGG \$
B	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	7989-19-11	10/01/17	10/01/18	EACH OCCURRENCE \$ 2,000,000
					AGGREGATE \$ 2,000,000
					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	IHUB-0286T91-4-15	10/01/17	10/01/18	WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER \$
					E.L. EACH ACCIDENT \$ 500,000
					E.L. DISEASE - EA EMPLOYEE \$ 500,000
A	OTHER PROPERTY DIR & OFFICERS / FIDELITY	I-680-0262T271 105988995 / I-680-0262T271	10/01/17 10/01/17	10/01/18 10/01/18	BLDGS \$28,127,926 RC \$10,000 DED. \$1,000,000 D&O \$1,000 DED; \$1,000,000 FIDELITY 10,000 DED.

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
100% REPLACEMENT COST / NO COINSURANCE
184 UNITS, 23 BUILDINGS / EQUIPMENT BREAKDOWN INCLUDED
UNIT OWNER SHOULD CARRY HO6 COVERAGE
3% WIND/HAIL DEDUCTIBLE / ORDINANCE OR LAW IS INCLUDED

PROPERTY MANAGEMENT COMPANY IS INCLUDED UNDER THE FIDELITY COVERAGE / SEPARATION OF INSURED IS INCLUDED IN THE GENERAL LIABILITY COVERAGE

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

MIKE SPANBAUER

RECEIVED

MAR 05 2018