

ACORD™ CERTIFICATE OF LIABILITY INSURANCE	DATE (MM/DD/YY) 04/07/2020
--	-------------------------------

PRODUCER ANDERSON-BAN INSURANCE, INC. 7505 VILLAGE SQ. DR. SUITE 203 CASTLE ROCK, CO. 80108	Serial # B13370 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 TOWER RIDGE TOWNHOME HOMEOWNERS ASSOC., INC. C/O 5280 PROPERTY MANAGEMENT 1615 CALIFORNIA ST., STE 407 DENVER, CO 80202	INSURER A: SCOTTSDALE INSURANCE CO INSURER B: GREENWICH INSURANCE CO INSURER C: TRAVELERS INSURANCE CO INSURER D: BURLINGTON INSURANCE CO 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	CPS7070136	04/01/20	04/01/21	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
B	EXCESS LIABILITY	PPP744000007	04/01/20	04/01/21	EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE				\$
	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
D C	OTHER	HMP0006413 106053235	04/01/20 04/01/20	04/01/21 04/01/21	BLDG \$22,274,000 RC \$5,000 DED; FIDELITY \$300,000 LIMIT \$2,500 DED; \$1,000,000 D&O \$1,000 DED.
	PROPERTY FIDELITY / DIR & OFFICERS				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 117 UNITS / 33 BUILDINGS / EQUIP BREAKDOWN INCLUDED
 WIND/HAIL DEDUCT 2% PER OCCURRENCE
 UNIT OWNER SHOULD CARRY HO6 COVERAGE / NO COINSURANCE
 100% REPLACEMENT COST / ORDINANCE OR LAW INCLUDED

PROPERTY MANAGEMENT COMPANY IS INCLUDED UNDER THE FIDELITY COVERAGE / SEPARATION OF INSUREDS 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 <u>30</u> 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 <div style="text-align: right;">MIKE SPANBAUER</div>	