



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/30/2024

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

Table with columns for PRODUCER, CONTACT NAME, PHONE, FAX, E-MAIL ADDRESS, INSURER(S) AFFORDING COVERAGE, and NAIC #.

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT 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.

Main table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation, Crime, and Directors & Officers.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Table with two columns: CERTIFICATE HOLDER (Informational Certificate) and CANCELLATION (Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Authorized Representative).



## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>AssuredPartners</b>		NAMED INSURED <b>Columbine Townhouses Five Association C/O Metro Property Management 10800 E. Bethany Drive, Suite 235 Aurora, CO 80014</b>	
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## ADDITIONAL REMARKS

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

## Property Information

CARRIER: GENERAL STAR INDEMNITY COMPANY  
POLICY #: 2883977  
EFFECTIVE DATES: 11/01/2024 - 11/01/2025  
LIMIT: \$25,306,771  
DEDUCTIBLE: \$25,000  
WIND & HAIL DEDUCTIBLE: 7.5% of TIV  
\*Wind/Hail Deductible is Applied Per Unit  
# OF UNITS: 72  
# OF BUILDINGS: 18  
100% REPLACEMENT COST  
SEVERABILITY OF INTEREST IS INCLUDED  
ORDINANCE AND LAW IS INCLUDED  
WATER DAMAGE DEDUCTIBLE: \$100,000

POLICY IS DEDICATED SOLELY TO THE NAMED INSURED AND IS NOT SHARED OR AFFILIATED WITH ANY OTHER ASSOCIATION OR POOLED PROGRAM  
EQUIPMENT BREAKDOWN COVERAGE IS INCLUDED  
FIDELITY POLICY INCLUDES COVERAGE FOR PROPERTY MANAGEMENT COMPANY, PROPERTY MANAGER, VOLUNTEERS AND BOARD MEMBERS

## \*\*\*\*\* PLEASE READ\*\*\*\*\*

ALL IN COVERAGE IS SUBJECT TO AND DEPENDENT ON THE TERMS AND CONDITIONS OF THE ASSOCIATIONS LEGAL DOCUMENTS. FOR DETAILS ON WHAT UNIT OWNERS INSURANCE RESPONSIBILITY IS VS THE ASSOCIATION PLEASE REFER ALL OF YOUR QUESTIONS TO THE COVENANTS AND BYLAWS FOR THE ASSOCIATION FOR THIS INFORMATION. DETAILS ARE NOT FOUND IN THE POLICIES. THIS DOCUMENT CAN BE OBTAINED FROM THE PROPERTY MANAGEMENT COMPANY\*\*  
CANCELLATIONS: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. FOR DETAILS ON THESE PROVISIONS YOU AS THE LENDER, AGENT, UNIT OWNER OR INSURED WILL NEED TO OBTAIN AND REVIEW A COPY OF EACH POLICY. COPIES OF ALL POLICIES MUST BE OBTAINED FROM THE MANAGEMENT COMPANY. ASSUREDPARTNERS CANNOT PROVIDE THESE DOCUMENTS TO ANYONE OTHER THAN THE NAMED INSURED.