



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/24/2016

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Neil-Garing Agency, Inc. PO Box 1576 Glenwood Springs, CO 81602 Meghan Wilson, CIC	CONTACT NAME: <b>Kat Vincent</b>	FAX (A/C, No): <b>970-945-2350</b>	
	PHONE (A/C, No, Ext): <b>970-945-9111</b>	E-MAIL ADDRESS: <b>assncert@neil-garing.com</b>	
INSURED <b>Sawmill Creek Condominium Association c/o Great Western Lodging PO Box 3355 Breckenridge, CO 80424</b>	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : <b>Allianz Global Corporate</b>		25682
	INSURER B : <b>Travelers</b>		
	INSURER C : <b>Greenwich Insurance Co.</b>		
	INSURER D : <b>Pinnacol Assurance</b>		
	INSURER E :		
INSURER F :			

COVERAGES CERTIFICATE NUMBER: 1 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSP	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			MZG80970811	06/29/2016	06/29/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
B	<input type="checkbox"/> D&O Liability  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			105956793	06/29/2016	06/29/2017	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 D&O Limit \$ 1,000,000
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			MZG80970811	06/29/2016	06/29/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTIONS 0			PPP7448433	06/29/2016	06/29/2017	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N/A	4165829	07/01/2016	07/01/2017	PER STATUTE <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	<input type="checkbox"/> Building			MZG80970811	06/29/2016	06/29/2017	Building 21,911,250
B	<input type="checkbox"/> Fidelity			105962730	06/29/2016	06/29/2019	Fidelity 200,000

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

**\*\*Replacement cost coverage applies\*\***  
54 units / \$5,000 deductible

## CERTIFICATE HOLDER

UNITO-1

Unit Owners Copy

## 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

**NOTEPAD**

INSURED'S NAME Sawmill Creek Condominium

SAWMI-3  
OP ID: SHPAGE 2  
Date 06/24/2016**Ordinance and Law:**

Coverage A - 50% of Building Limit

Coverage B - \$1,000,000

Coverage C - \$1,000,000

Coinsurance: Waived per Val-U-Gard II Endorsement

Agreed Amount Endorsement: Val-U-Gard II Endorsement

Inflation Guard: N/A - Val-U-Gard II Endorsement

Equipment Breakdown: Included

Condominium Endorsement: 140675

Separation of Insured: Included in GL form CG0001

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

# Neil - Garing

I N S U R A N C E



June 24, 2016

Re: Sawmill Creek Condominium Association

Dear Unit Owner:

We appreciate the opportunity to place the Master Association Insurance Policy for Sawmill Creek Condominium Association. It has been a pleasant experience working with Great Western Lodging, your Community Association Managers, 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.)**
- ⇒ **Property included in units which were initially installed in accordance with the association's original plans and specification or a replacement of same like kind and quality excluding appliances, carpet, draperies, and wallpaper**

**AN IMPORTANT INSURANCE REMINDER FOR ALL UNIT OWNERS:**

**Owners are responsible for insurance on the following:**  
*(Questions to ask your individual insurance agent)*

- ⇒ **Any building improvements & upgrades installed by unit owners**  
*(Do I have adequate limits to replace the interior surfaces as described in the decs & bylaws?)*
- ⇒ **Contents – furniture, furnishings and other personal property including appliances, carpet, draperies, and wallpaper**  
*(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.

If you have any questions or need any further clarification please call me or Katherine Vincent, CIC.

Sincerely,

Meghan Wilson, CIC  
Commercial Lines Agent

Enclosure  
SH

# Neil - Garing

## I N S U R A N C E

### **Association Residential Unit Owner's Insurance Coverage Fact Sheet** (Questions to ask your individual insurance agent)

**Interior Building coverage** - The unit owner's policy can cover the interior unit for which the owner is responsible to insure, per the declarations and by-laws.

*Q. Do I have adequate limits to replace the interior surfaces as described in the decs & bylaws of the association?*

**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?*