BEARCRE-03

SAMIB

ACORD°

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/15/2022

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. 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).

th	nis certificate does not confer rights to	the	certi	ificate holder in lieu of su	ıch enc	lorsement(s)		require an endor	301110111		atement on	
PRODUCER Mountain West Insurance - Glenwood 201 Centennial St 4th Floor						CONTACT NAME:						
						PHONE (A/C, No, Ext): (970) 945-9111 FAX (A/C, No): (970) 945-2350						
Gle	nwood Springs, CO 81601				E-MAIL ADDRE	SS:						
								RDING COVERAGE			NAIC#	
					INSURER A : Allianz Global Corp					35300		
INSU	RED Bear Creek Lofts Homeowne	INSURER B : Greenwich Insurance Company 22322										
	c/o Jarmik Property Manager					INSURER C: Travelers Property Casualty Company of America					25674	
	PO Box 3071	INSU		NSURER D:								
Telluride, CO 81435						INSURER E:						
				INSURER F:								
				E NUMBER:			TO THE INION	REVISION NUME		IE DO	101/ 555105	
IN	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY RE	EQUII	REME	ENT, TERM OR CONDITION	N OF A	ANY CONTRAC	CT OR OTHER	R DOCUMENT WITH	RESPE	CT TO	WHICH THIS	
	ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH F								BJECT TO	O ALL	THE TERMS,	
INSR TYPE OF INCUPANCE			SUBR WVD		DELIVI		POLICY EXP (MM/DD/YYYY)		LIMITS			
LTR A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	TOLIOT NOMBER	(MM/DD/YYYY)		(MM/DD/YYYY)	EACH OCCURRENCE		\$	1,000,000	
	CLAIMS-MADE X OCCUR			USC023930220	9/22/2022		9/22/2023	DAMAGE TO RENTED PREMISES (Ea occurre		\$ \$	1,000,000	
				00001000110		0/12/2022	0,22,2020	MED EXP (Any one per		\$	5,000	
								PERSONAL & ADV IN.		\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA		\$	2,000,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/C		\$	2,000,000	
	OTHER:									\$		
Α	AUTOMOBILE LIABILITY			USC023930220			9/22/2023	COMBINED SINGLE LI (Ea accident)	IMIT	\$	1,000,000	
	ANY AUTO					9/22/2022		BODILY INJURY (Per p	person)	\$		
	OWNED SCHEDULED AUTOS AUTOS							BODILY INJURY (Per a		\$		
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)		\$		
										\$		
В	UMBRELLA LIAB X OCCUR			PPP7451677		9/22/2022	9/22/2023	EACH OCCURRENCE		\$	5,000,000	
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$	5,000,000	
	DED X RETENTION\$ 0							DED	OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	•	\$		
								E.L. DISEASE - EA EM				
Α	If yes, describe under DESCRIPTION OF OPERATIONS below Property			USC023930220		9/22/2022	9/22/2023	E.L. DISEASE - POLIC Building	Y LIMIT	\$	5,625,000	
c	Crime			106001125		9/22/2022	9/22/2023	Crime			50,000	
Ū						0,11,1011	0,11,1010				20,000	
	ODIDION OF ODERATIONS (LOCATIONS (VEHICL	FO (4	0000	And Additional Remarks Oak advantage								
Se	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL e Notes for Additional Coverages	.ES (A	CORL	7 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requi	rea)				
CF	RTIFICATE HOLDER	CANCELLATION										
		V										
			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.						

ACORD 25 (2016/03)

Samantha Buck

LOC #: 0



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY		NAMED INSURED Bear Creek Lofts Homeowners' Association, Inc. c/o Jarmik Property Management PO Box 3071 Telluride. CO 81435						
Mountain West Insurance - Glenwood								
POLICY NUMBER								
SEE PAGE 1		Tellulide, 00 01400						
CARRIER	NAIC CODE							
SEE PAGE 1 SEE P 1		EFFECTIVE DATE: SFF 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 Info:

Guaranteed Replacement Cost, 6 units (2 commercial, 4 residential), \$2,500 deductible

Ordinance and Law:

Coverage A - Included Coverage B - \$500,000 Coverage C - \$500,000

Coinsurance: Not applicable to Property Agreed Amount Endorsement: N/A Inflation Guard: Yes / Form 250000

Equipment Breakdown: Included / Form 250048 Wind/Hail Coverage: Included / Form 250000 Condominium Endorsement: Yes / From 250059 Separation of Insured: Yes / Included in GL form CG0001

Directors & Officers Liability- Travelers

Policy # 106001125 Eff 9/22/22-23 Limit \$1,000,000 Ded \$2,500

Additional Defense: \$1,000,000

Difference in Conditions Policy - Atlantic Specialty Insurance

Policy #3000010470000

Eff 09/22/22-23

Flood Limit \$5,000,000

Earthquake Limit \$5,000,000

Deductible \$10,000