



CERTIFICATE OF PROPERTY INSURANCE

Policy Number: 045939177

DATE (MM/DD/YYYY)

07/08/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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.

PRODUCER		CONTACT NAME: Christopher Layne PHONE (A/C, No, Ext): (970) 641-3641 E-MAIL ADDRESS: clayne1@farmersagent.com PRODUCER CUSTOMER ID:
INSURED		INSURER(S) AFFORDING COVERAGE NAIC #
		INSURER A: Truck Insurance Exchange 21709
		INSURER B: Farmers Insurance Exchange 21652
		INSURER C: Mid Century Insurance Company 21687
		INSURER D:
		INSURER E:
		INSURER F:

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Condo Property Location 400 Gothic Rd, Mt Crested Butte, CO 81225		
HOA consists of 1 bldg / 30 units		

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		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY		045939177	07/01/2025	07/01/2026	<input checked="" type="checkbox"/> BUILDING	\$17,545,600
	<input type="checkbox"/> CAUSES OF LOSS	DEDUCTIBLES				<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$39,500
A	<input type="checkbox"/> BASIC	BUILDING 5,000				<input type="checkbox"/> BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD	CONTENTS				<input type="checkbox"/> EXTRA EXPENSE	\$
A	<input checked="" type="checkbox"/> SPECIAL	5,000				<input type="checkbox"/> RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE					<input type="checkbox"/> BLANKET BUILDING	\$
A	<input checked="" type="checkbox"/> WIND	5,000				<input type="checkbox"/> BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					<input type="checkbox"/> BLANKET BLDG & PP	\$
A	<input checked="" type="checkbox"/> Ext Rep	Cost	<input checked="" type="checkbox"/> 150%	\$			
	<input checked="" type="checkbox"/> Backup	Swr/Drn		\$100,000			
	INLAND MARINE		TYPE OF POLICY NAMED PERILS			<input type="checkbox"/>	\$
	CAUSES OF LOSS					<input type="checkbox"/>	\$
						<input type="checkbox"/>	\$
						<input type="checkbox"/>	\$
A	<input checked="" type="checkbox"/> CRIME				<input checked="" type="checkbox"/> Emp Dishon	\$100,000	
	TYPE OF POLICY					<input type="checkbox"/>	\$
						<input type="checkbox"/>	\$
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN				<input type="checkbox"/>	\$	
						<input type="checkbox"/>	\$
						<input type="checkbox"/>	\$
A	<input type="checkbox"/> Comm Gen Liability				<input checked="" type="checkbox"/> Occur / Agg	\$1M / 2M	
A	<input type="checkbox"/> Director / Officers						

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Policy includes for "all-inclusive" unit coverage.

Policy also includes building coverage for stated amount plus 150% extended replacement cost

CERTIFICATE HOLDER	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
	CHRISTOPHER LAYNE

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