

ACORD™ CERTIFICATE OF PROPERTY INSURANCE

DATE
07/13/2022

PRODUCER Wall Street Insurance PO Box 20 Edwards, CO 81632 (970)926-4900 (office) (970)926-4200 (fax)	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.
	COMPANIES AFFORDING COVERAGE
	COMPANY A AMGUARD INSURANCE COMPANY
	COMPANY B TRAVELERS CASUALTY AND SURETY CO OF AMERICA
INSURED Sunridge at Avon II Condo Assn PO Box 2621 Avon CO 81620	COMPANY C GREENWICH INSURANCE COMPANY
	COMPANY D

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOT WITHSTANDING ANY REQUIREMENT, THER IN 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	COVERED PROPERTY	LIMITS
A	<input checked="" type="checkbox"/> PROPERTY CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> FLOOD	SUBP147246	10/01/2020	10/01/2021	<input checked="" type="checkbox"/> BUILDING <input type="checkbox"/> PERSONAL PROPERTY <input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> EXTRA EXPENSE <input type="checkbox"/> BLANKET BUILDING <input type="checkbox"/> BLANKET PERS PROP <input checked="" type="checkbox"/> DEDUCTIBLE	\$31,930,164
						\$
						\$
						\$
						\$
						\$
	<input type="checkbox"/> INLAND MARINE TYPE OF POLICY CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS <input type="checkbox"/> OTHER				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$
						\$
						\$
						\$
						\$
						\$
C	<input checked="" type="checkbox"/> Umbrella	PPP7466441	10/01/2020	10/01/2021	<input checked="" type="checkbox"/> Umbrella <input type="checkbox"/> <input type="checkbox"/>	\$5,000,000
						\$
						\$
	<input type="checkbox"/> BOILER & MACHINERY				<input type="checkbox"/> <input type="checkbox"/>	\$
						\$
B	<input checked="" type="checkbox"/> Directors & Officers And Crime	106989191	10/01/2020	10/01/2021	Directors & Officers Crime	\$1,000,000 \$1,000,000

LOCATION OF PREMISE/DESCRIPTION OF PROPERTY

1050 West Beaver Creek Blvd
1061 West Beaver Creek Blvd

SPECIAL CONDITIONS/OTHER COVERAGES

Liability Limits - \$1,000,000 each occurrence, \$2,000,000 aggregate * Replacement Cost is included * Employee Dishonesty \$1,000,000 Property Manger included * Total Units 198 * Policy coverage is walls in to original specifications. O/L coverage to building limits * No co-insurance * No Inflation Guard * WOS for owners included * Separation of Insured included

CERTIFICATE HOLDER

CANCELLATION

OWNERS CERT

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

