1101VIL-01

MSHUE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/15/2025

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

th	is certificate does not confer rights t	o the	cert	ificate holder in lieu of su		. , ,					
PRO	DUCER				CONTA NAME:	СТ					
GIA Group, LLC 1605 Grand Avenue Suite K Glenwood Springs, CO 81601						PHONE (A/C, No, Ext): (970) 945-9161 FAX (A/C, No): (970) 945-6027 E-MAIL ADDRESS:					
							NIDED(0) AFFOR	DING COVERAGE		NAIG#	
							•	RDING COVERAGE		NAIC #	
						INSURER A: United Fire & Casualty (UFG)				13021	
INSURED 1101 Village Road Office Condo 326 Highway 133, Suite 120 Carbondale, CO 81623						INSURER B: Travelers 19046					
						INSURER C:					
						INSURER D:					
						INSURER E :					
						INSURER F:					
CO	VERAGES CER	TIFIC	CATE	NUMBER:				REVISION NUMBE	R:		
IN C	HIS IS TO CERTIFY THAT THE POLICI IDICATED. NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	REQUI PER	REMI TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A	ANY CONTRAC	CT OR OTHER IES DESCRIB	R DOCUMENT WITH RI	ESPECT	TO WHICH THIS	
INSR LTR TYPE OF INSURANCE			SUBR WVD			POLICY EFF (MM/DD/YYYY)		LIMITS			
A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD			(WIW/DD/TTTT)	(WIW/DD/TTTT)	EACH OCCURRENCE	\$	1,000,000	
	CLAIMS-MADE X OCCUR			60535824		10/28/2025	10/28/2026	DAMAGE TO RENTED		100,000	
						10/20/2020	10/20/2020			5,000	
								MED EXP (Any one person		1,000,000	
	OFAIL ACCRECATE LIMIT APPLIES DED.							PERSONAL & ADV INJUR	RY \$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- LOC LOC							GENERAL AGGREGATE		2,000,000	
								PRODUCTS - COMP/OP /		,,	
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	T \$		
	ANY AUTO							BODILY INJURY (Per pers	son) \$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per acci			
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	ACTOC CINET							(* 3. 3.5.3.3.1.)	\$		
Α	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	1,000,000	
	EXCESS LIAB CLAIMS-MADE			60535824		10/28/2025	10/28/2026	AGGREGATE	\$	1,000,000	
	DED X RETENTION\$)							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER O'STATUTE ER	TH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLO			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY L			
Α	Property			60535824		10/28/2025	10/28/2026	Building limit	-110111 φ	8,682,552	
В	Directors & Officers			106826262		10/28/2025	10/28/2026	J		1,000,000	
DES " M a	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC ster Policy". Building Coverage \$8,039,	LES (<i>i</i>	ACORE Leplac	D 101, Additional Remarks Scheducement Cost, Special Caus	ile, may b se of Lo	pe attached if mor sss, Subject to	re space is requir o \$10,000 ded	ed) luctible.			
CERTIFICATE HOLDER Silver Mountain Properties, Inc. 326 Hwy 133, Suite #120 Carbondale, CO 81623						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						
		01- 20									