

Agent's Name Derron C Cloud
Agent's Code 06-0002
Policy Number 96-ER-N103-7 F

**Commercial Multi-Peril Application
Residential Community Association**

New <input checked="" type="radio"/>	Rew. <input type="radio"/>	Effective Date 07-12-2022	Expiration Date 07-12-2023	Existing State Farm® Client Yes <input type="radio"/> No <input checked="" type="radio"/>
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Applicant

Last Name BASALT VISTA HOUSING PARTNERSHIP TOWNHOMES	First Name	Middle Name or Initial
Co-applicant's Last Name BASALT VISTA HOMEOWNERS ASSOCIATION	First Name	Middle Name or Initial
DBA		

The named applicant is **Other**

Association

Email Address kari@smprop.com	Website Address		
Home Phone ext.	Work Phone ext.		
Cell Phone ext.	Fax Number ext.		
Mailing Address 326 HIGHWAY 133 STE 120	City CARBONDALE	State CO	ZIP Code 81623-1568

Name and address of management firm / trustee **Silver Mountain Properties, INC**

Person to contact for inspection Bill Crowley	Contact's phone number (970) 963-4900 ext. 4
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Applicant(s) Acknowledgement

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the department of regulatory agencies.

☐ Coverage is not provided until this application is approved by the State Farm Underwriting Department.

By submission of this application, you agree that: (1) you have read this application, (2) your statements on this application are correct, (3) the coverages, including extensions and endorsements, and the amounts of coverage on this application are those chosen by you, (4) the premium charged must comply with the State Farm rules and rates and may be revised, and (5) the final premium for auditable policies will be determined by audit of your financial and payroll records.

USE OF CONSUMER REPORTS - A consumer report may be requested in connection with this application.

Regarding Your Coverage Amount...

It is up to you to choose the coverages and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your building. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc.® using information you provide about your building. We can accept the type of estimate you choose as long as it provides a reasonable level of detail about your building.

State Farm does not guarantee that any estimate will be the actual future cost to rebuild your building. Higher

limits are available at higher premiums. Lower limits are also available, which if selected may make certain coverages unavailable to you.

We encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your building.

Other Interests

Type:

Name

Number and Street

City

State ZIP Code

Loan Number

Mortgagee Subset Code

Does the Additional Interest need to receive a copy of the policy declarations at issuance and renewal? Yes No
☐ ☐

Note: If Additional Interest requires a Certificate of Insurance, please attach a copy of the issued ACORD® Certificate of Insurance to the application when submitted.

Does the Additional Interest need to receive a copy of the cancellation notice? Yes No
☐ ☐

General Information

Does this risk meet all Underwriting Guide requirements? Yes No
If no, explain: ☒ ☐

Has any insurer canceled or refused to issue or renew similar insurance for the named applicant within the past 3 years? Yes No
If yes, provide an explanation: ☐ ☒

Has the applicant been insured with State Farm under a Commercial Package policy within the last 3 years? Yes No
If yes, list policy numbers: ☐ ☒

Has the applicant had business insurance for the last 3 years? Yes No
If yes, complete the following: ☐ ☒

Has applicant had a loss, insured or not, in the past 3 years (fire, wind, crime, liability, etc.)? Yes No
If yes, list losses below: ☐ ☒

Date of Loss	Cause and Description of Loss	Total Amount of Loss
		\$

Residential Community Association

Location Schedule

Coverage A - Building(s)
Building coverage you want:

CMP - Replacement Cost
Blanket

Coverage B - Business Personal Property
Business Personal Property coverage you want:

Replacement cost

Additional scheduled buildings or locations

Location number	Location of property - number and street
1	129-131 Gardner Way

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ 55,000 Playground, Pump House, Trash building, Trash Building Describe Building Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain:					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction: Frame					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain:			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply: <input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 2		Location of property - number and street 133-135 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction: _____					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA?					Yes <input checked="" type="radio"/> No <input type="radio"/>
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 3		Location of property - number and street 203-205 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled?		Yes No <input type="radio"/> <input checked="" type="radio"/> If yes, explain:		Year Built 2022	
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
				How long at this location? 1 years	
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction:					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring FORk Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes No <input checked="" type="radio"/> <input type="radio"/> If no, explain:			
Is Risk located within 1,000 feet of hydrant? Yes No <input checked="" type="radio"/> <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes No <input type="radio"/> <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes No <input type="radio"/> <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes No <input type="radio"/> <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes No <input checked="" type="radio"/> <input type="radio"/>					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 4		Location of property - number and street 207-209-211 Gardner Way			

City Basalt		State ZIP Code CO 81621		County pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,470,972 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contracotr			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain:					Year Built 2022
How many units are in this location? 3		Number of residential? 3		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction:					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring FORk Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain:			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 3		Number of units per fire division 3	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply: <input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron CCloud		Title Agent		Inspection Date 07/01/2022	
Location number 5		Location of property - number and street 204-206 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction: _____					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company _____				Certificate number _____	
Description of system _____					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply: <input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron CCloud		Title Agent		Inspection Date 07/01/2022	
Location number 6		Location of property - number and street 210-212 Gardner Way			

City Basalt		State ZIP Code CO 81621	County Pitkin
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor		Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110	
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____			Year Built 2022
How many units are in this location? 2	Number of residential? 2	Number of commercial? 0	How long at this location? 1 years
Construction: Frame			
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years			
Roof Material: Metal			
Auxiliary structure building construction: _____			
Zone 21	Subzone 1	Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire			
Distance to servicing fire station 1 miles	Is risk inside city limits? Yes <input type="radio"/> No <input checked="" type="radio"/> If no, explain: _____		
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>	Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>	Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2	Number of fire divisions 2	Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>			
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm			
Name of alarm company _____		Certificate number _____	
Description of system _____			
List all occupancies / exposures within 60 feet School			
PERIL BASED RISK INFORMATION			
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>			
Check all that may apply: <input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area			
Premises Inspected by Derron Cloud		Title Agent	Inspection Date 07/01/2022
Location number 7	Location of property - number and street 115-117 Gardner Way		

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction:					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 8		Location of property - number and street 119-121 Gardner Way			

City Basalt		State ZIP Code CO 81621	County Pitkin
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor		Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110	
Has the building ever been converted or remodeled? <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> If yes, explain: _____			Year Built 2022
How many units are in this location? 2	Number of residential? 2	Number of commercial? 0	How long at this location? 1 years
Construction: Frame			
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years			
Roof Material: Metal			
Auxiliary structure building construction: _____			
Zone 21	Subzone 1	Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire			
Distance to servicing fire station 1 miles	Is risk inside city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> If no, explain: _____		
Is Risk located within 1,000 feet of hydrant? <input checked="" type="radio"/> Yes <input type="radio"/> No	Is Risk 100% fully protected with an automatic sprinkler system? <input type="radio"/> Yes <input checked="" type="radio"/> No	Is sprinkler system inspected annually? <input type="radio"/> Yes <input type="radio"/> No	
Number of stories 2	Number of fire divisions 2	Number of units per fire division 2	
Is security guard employed by the applicant at this location? <input type="radio"/> Yes <input checked="" type="radio"/> No			
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm			
Name of alarm company _____		Certificate number _____	
Description of system _____			
List all occupancies / exposures within 60 feet School			
PERIL BASED RISK INFORMATION			
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? <input checked="" type="radio"/> Yes <input type="radio"/> No			
Check all that may apply: <input type="checkbox"/> Wind <input type="checkbox"/> Hall <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area			
Premises Inspected by Derron Cloud		Title Agent	Inspection Date 07/01/2022
Location number 9	Location of property - number and street 123-125-127 Gardner Way		

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,470,972 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 3		Number of residential? 3		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction: _____					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring FORk Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? <input checked="" type="radio"/> Yes <input type="radio"/> No		Is Risk 100% fully protected with an automatic sprinkler system? <input type="radio"/> Yes <input checked="" type="radio"/> No		Is sprinkler system inspected annually? <input type="radio"/> Yes <input type="radio"/> No	
Number of stories 2		Number of fire divisions 3		Number of units per fire division 3	
Is security guard employed by the applicant at this location? <input type="radio"/> Yes <input checked="" type="radio"/> No					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? <input checked="" type="radio"/> Yes <input type="radio"/> No					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 10		Location of property - number and street 101-103 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction: _____					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 11		Location of property - number and street 105-107 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,042,965 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, explain: _____					Year Built 2022
How many units are in this location? 2		Number of residential? 2		Number of commercial? 0	
How long at this location? 1 years					
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction:					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes <input checked="" type="radio"/> No <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes <input checked="" type="radio"/> No <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes <input type="radio"/> No <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes <input type="radio"/> No <input type="radio"/>	
Number of stories 2		Number of fire divisions 2		Number of units per fire division 2	
Is security guard employed by the applicant at this location? Yes <input type="radio"/> No <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes <input checked="" type="radio"/> No <input type="radio"/>					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	
Location number 12		Location of property - number and street 109-111-113 Gardner Way			

City Basalt		State ZIP Code CO 81621		County Pitkin	
Coverage A - Building(s) Submit replacement cost estimate / documentation for each building type. Building \$ 1,470,972 Auxiliary structures - (Includes value of all outbuildings, fences, walkways, and lights. Note types of structures below.) Auxiliary structures \$ _____ Describe _____ Estimated replacement cost source (Xactware number) Contractor			Coverage B - Business Personal Property Include values of leased furniture and equipment. Include the value of improvements and betterments if the applicant is a tenant. Contents (including average inventory) \$ 5,555 Property of others \$ 0 Owned and leased furniture \$ 0 Owned and leased equipment \$ 5,555 Total Business Personal Property \$ 11,110		
Has the building ever been converted or remodeled? Yes No <input type="radio"/> <input checked="" type="radio"/> If yes, explain: _____				Year Built 2022	
How many units are in this location? 3		Number of residential? 3		Number of commercial? 0	
				How long at this location? 1 years	
Construction: Frame					
List age of the following: Heating plant 1 years Wiring 1 years Plumbing 1 years Roof 1 years					
Roof Material: Metal					
Auxiliary structure building construction:					
Zone 21		Subzone 1		Protection Class (not applicable in all states)	
Name of Fire Protection Area (FPA) where risk is located (as listed in the Rate) Roaring Fork Fire					
Distance to servicing fire station 1 miles		Is risk inside city limits? Yes No <input checked="" type="radio"/> <input type="radio"/> If no, explain: _____			
Is Risk located within 1,000 feet of hydrant? Yes No <input checked="" type="radio"/> <input type="radio"/>		Is Risk 100% fully protected with an automatic sprinkler system? Yes No <input type="radio"/> <input checked="" type="radio"/>		Is sprinkler system inspected annually? Yes No <input type="radio"/> <input type="radio"/>	
Number of stories 2		Number of fire divisions 3		Number of units per fire division 3	
Is security guard employed by the applicant at this location? Yes No <input type="radio"/> <input checked="" type="radio"/>					
Protective Devices - check all that apply: <input type="checkbox"/> Local pull station fire alarm <input type="checkbox"/> Local burglar alarm <input type="checkbox"/> Fire or smoke central station alarm <input type="checkbox"/> Central station / proprietary burglar alarm					
Name of alarm company				Certificate number	
Description of system					
List all occupancies / exposures within 60 feet School					
PERIL BASED RISK INFORMATION					
According to the Peril Based Risk Information System (PBRI), is the risk located within any defined PERIL BASED EXPOSURE AREA? Yes No <input checked="" type="radio"/> <input type="radio"/>					
Check all that may apply:					
<input type="checkbox"/> Wind <input type="checkbox"/> Hail <input type="checkbox"/> Earthquake <input type="checkbox"/> Hurricane <input type="checkbox"/> Surge <input checked="" type="checkbox"/> Wildfire / firebreak+ <input type="checkbox"/> Landslide <input type="checkbox"/> Other defined setback area					
Premises Inspected by Derron Cloud		Title Agent		Inspection Date 07/01/2022	

Additional CoveragesDeductible \$ **15,000****Coverage L - Liability**Occurrence Limit \$ **2,000,000**

Note: The annual aggregate and Products / Completed Operations aggregate limits are equal to 2 times the Occurrence limit.

Coverage M - Medical Payments

\$5,000 Each Person - Included

☒ Other \$ **10,000**

Note: Subject to the occurrence and annual aggregate limits.

Loss of Income and Extra Expense - Included - (not exceeding 12 consecutive months) actual loss sustained**Extensions and Endorsements (check boxes - can select multiple)****Property**

Property		Amount Included (if any)	Additional Elected Amount	Total Coverage
<input type="checkbox"/> Accounts Receivable	On Premises	\$50,000	+	\$50,000
	Off Premises	\$15,000	+	\$15,000
Back-Up of Sewer or Drain (Coverage A and B)		Included		
<input type="checkbox"/> Computer Property Form	Property	\$10,000	+	\$10,000
	Loss of Income and Extra Expense	\$10,000	+	\$10,000

Deductible

☒ **Data Compromise (Identity Restoration must also be selected)**

<input type="checkbox"/> Earthquake	EQ zone	Earthquake deductible	%	
<input type="checkbox"/> Employee dishonesty (special deductible of \$250 applies)	Number of employees (for all locations)	\$25,000	+	\$25,000
Equipment Breakdown		Included		
<input type="checkbox"/> Forgery and Alterations		\$10,000	+	\$10,000

☒ **Identity Restoration**☐ **Interior Building Damage**

<input type="checkbox"/> Money and Securities (special deductible of \$250 applies)	On Premises	\$10,000	+	\$10,000
	Off Premises	\$5,000	+	\$5,000
Does applicant have a safe? Yes <input type="radio"/> No <input type="radio"/> What type?		Max cash on hand?	Are checks stamped "for deposit only"?	Yes <input type="radio"/> No <input type="radio"/>

☒ **Ordinance or Law**
 Select one or both of the following: ☒ Increased Cost of Construction and / or Demolition **10%**
☒ Loss of Value to the Undamaged Portion of Building

<input type="checkbox"/> Outdoor Property	\$5,000	+	\$5,000
<input type="checkbox"/> Property of Others	\$2,500	+	\$2,500

1007278 2016 148544 216 04-28-2022

Directors and Officers Liability

Complete if Directors and Officers Liability is to be provided:

Attach a copy of the applicant's most recent financial statement and state the annual costs of maintenance and operations of the common areas.

Is the developer or a representative of the developer on the board? ☐ Yes ☒ No If yes, what percentage of the votes does he / she control? %
(Explain in Remarks any voting advantage the developer has.)

Does the developer retain the right to add to the project and / or alter voting rights? If yes, explain in the space below: ☐ Yes ☒ No

Is the developer the management agent or in any way affiliated with the management agent? If yes, explain in the space below: ☐ Yes ☒ No

Are reports made directly to the entire board? If no, explain in the space below: ☒ Yes ☐ No

Are accounts audited at least annually by someone other than the treasurer? If no, explain in the space below: ☒ Yes ☐ No

Does any director or officer have the information or knowledge of any act, error or omission which might give rise to a claim under the proposed insurance or have knowledge of any pending suit? ☐ Yes ☒ No

If yes, explain any claim or action arising therefrom is excluded from this proposed coverage:

Are contingency funds set aside for needed future renovations or remodeling? If no, explain in the space below: ☒ Yes ☐ No

How are changes in assessment handled and by whom? **Vote by the owners**

If there are restrictions on unitowner's right to sell, are there safeguards to prevent monetary loss to the unitowner? If yes, explain in the space below: ☐ Yes ☒ No

Any leaseback agreements? If yes, explain including in whose favor: ☐ Yes ☒ No

Describe all common areas and recreational facilities: **Playground, Pump House, 2 Trash bins**

These facilities are owned by: ☒ Association ☐ Developer ☐ Outside party (explain):

Are any of the recreational facilities rented or open to the public? If yes, explain in the space below: ☐ Yes ☒ No

Is day or nursing care provided to residents? If yes, explain in the space below: ☐ Yes ☒ No

Premium / Payment InformationApplication taken: **07-12-2022****03:16 PM**Initials of agent or licensed staff person taking the application: **DCC**

SFPP Yes No	Payment 1 <input type="radio"/> Cash <input checked="" type="radio"/> Check	Amount Paid \$	Payment 2 <input type="radio"/> Cash <input type="radio"/> Check	Amount Paid \$	
		Check Number		Check Number	
<input type="radio"/> Credit Card <input type="radio"/> EFT	Reference Number	Amount Paid \$ 0.00	Credit from other policy \$ 0.00	Balance Due \$ 0.00	Total Premium \$ 30,555.00

Billing InformationShould named insured be billed for renewals? ☐ Yes ☐ NoShould named insured be billed for endorsements? ☐ Yes ☐ No**Remarks**