





## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Mountain West Insurance - Glenwood</b>		NAMED INSURED <b>Conestoga Condominium Homeowner's Association, Inc. c/o Silver Mountain Properties 326 Highway 133, Suite 290 Carbondale, CO 81623-2507 Garfield</b>	
POLICY NUMBER <b>SEE PAGE 1</b>		EFFECTIVE DATE: <b>SEE PAGE 1</b>	
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>		

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Additional Coverage Information**

**\*\*Guaranteed Replacement Cost Applies\*\* // 4 Buildings / 16 Units  
\*\*See attached Unit Owner Letter for how property coverage applies\*\***

**Ordinance and Law:**

**Coverage A - Included  
Coverage B - \$1,000,000  
Coverage C - \$1,000,000**

**Deductible: \$10,000**

**Special Causes of Loss**

**Coinsurance: N/A – Guaranteed Replacement Cost**

**Agreed Amount Endorsement: N/A – Guaranteed Replacement Cost**

**Inflation Guard: N/A – Guaranteed Replacement Cost**

**Equipment Breakdown: Included**

**Separation of Insured: Included**

**Fidelity Bond: Property Manager & non-compensated employees included: Yes**

**Directors & Officers Liability:**

**Carrier: Continental Casualty Company**

**Policy #: 768656420**

**Policy Term: 4/18/2026 to 4/18/2027**

**Limit: \$1,000,000**

**Additional Defense Limit: Outside the Limit of Liability**

**Retention: \$1,000**

**Notice of Cancellation:**

**10 Days -For Non-Payment of Premium**

**30 Days - Minimum All Other Reasons**