

CERTIFICATE OF LIABILITY INSURANCE

TAMARAH

DATE (MM/DD/YYYY)

MOUNSAG-02

CERTIFICATE OF LIADILITY INSURANCE 7/21							21/2025					
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 this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).												
PRO	DUCER				CONTACT NAME:							
Mountain West Insurance - Glenwood						PHONE (A/C, No, Ext): (970) 945-9111 FAX (A/C, No):(970) 945-2350						
201 Centennial St 4th Floor Glenwood Springs, CO 81601						E-MAIL ADDRESS:						
					INSURER(S) AFFORDING COVERAGE				NAIC #			
					INSURER A : American Alternative Insurance Corporati				ation	19720		
INSURED					INSURER B : Greenwich Insurance Company					22322		
Mountain Sage Townhomes Associatio				ion, Inc	INSURER C : The PMA Insurance Companies							
c/o First Choice Management PO Box 2572					INSURER D :							
	Glenwood Springs, CO 8160	02			INSURER E :							
					INSURER F :							
			-	ENUMBER: 1				REVISION NUMBER:				
IN C E	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQU PER POLI	IREMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORI LIMITS SHOWN MAY HAVE	N OF A DED BY	NY CONTRAC THE POLICI EDUCED BY I	CT OR OTHER ES DESCRIB	R DOCUMENT WITH RESPE	CT TO	WHICH THIS		
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S			
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	1,000,000		
	CLAIMS-MADE X OCCUR			CAU5313621		7/23/2025	7/23/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000		
								MED EXP (Any one person)	\$	5,000		
]							PERSONAL & ADV INJURY	\$	1,000,000		
								GENERAL AGGREGATE	\$	1,000,000		
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	1,000,000		
A	OTHER:							COMBINED SINGLE LIMIT	\$	1.000.000		
				CAU5313621		7/23/2025	7/23/2026	(Ea accident)	\$	1,000,000		
	OWNED AUTOS ONLY AUTOS			CA03313021		1125/2025	1125/2020	BODILY INJURY (Per person)	\$ \$			
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$			
									\$			
В	UMBRELLA LIAB X OCCUR			PPP7504251		7/23/2025	7/23/2026	EACH OCCURRENCE	\$	5,000,000		
	X EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	5,000,000		
	DED X RETENTION \$ 0							Prods/Comp	\$	5,000,000		
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A				7/23/2026	X PER STATUTE X OTH-ER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		2025011548841Y				7/23/2025	E.L. EACH ACCIDENT	\$	1,000,000		
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000		
	DÉSCRIPTION OF OPERATIONS below			CALIE242624		7/23/2025	7/00/0000	E.L. DISEASE - POLICY LIMIT	\$	1,000,000		
A	Property Crime			CAU5313621 CAU5313621		7/23/2025		Building Fidelity		16,935,000 300,000		
Se	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC e Notes for Additional Coverages RTIFICATE HOLDER Unit Owners Copy	LES (A	ACORE	0 101, Additional Remarks Schedu	CANC	ELLATION	THE ABOVE D	ed) ESCRIBED POLICIES BE C. EREOF, NOTICE WILL Y PROVISIONS.				

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AUTHORIZED REPRESENTATIVE

AGENCY CUSTOMER ID: MOUNSAG-02 LOC #: 0

ACORD

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Mountain West Insurance - Glenwood		NAMED INSURED Mountain Sage Townhomes Association, Inc c/o First Choice Management PO Box 2572							
POLICY NUMBER		PO Box 2572 Glenwood Springs, CO 81602							
SEE PAGE 1									
	SEE P 1	EFFECTIVE DATE: SEE PAGE 1							
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 Valuation Applies** // 26 units // \$5,000 deductible See attached Unit Owner Letter for how property coverage applies									
Special Causes of Loss Ordinance and Law: Coverage A - Included Coverage B - \$1,000,000 Coverage C - \$1,000,000 Coinsurance: N/A - Guaranteed Replacement Cost Agreed Amount Endorsement: N/A - Guaranteed Replacement Cost Inflation Guard: N/A - Guaranteed Replacement Cost Equipment Breakdown: Included Wind/Hail Coverage: Included Separation of Insured: Included Fidelity Bond: Property Manager & non-compensated employees included: Yes Notice of Cancellation: 10 Days for Non-Payment or Premium Minimum 30 Days All Other Reasons									
Directors & Officers: Carrier: Continental Casualty Policy #: 768616113 Effective: 7/23/2025 to 7/23/2026 Limit: \$1,000,000									



Mountain West Insurance & Financial Services, LLC

201 Centennial St. 4th Floor, Glenwood Springs, CO 81601 (800) 390-0559 toll-free (970) 945-9111 office (970) 945-2350 fax www.mtnwst.com

7/21/2025

RE: Mountain Sage Townhomes Association, Inc.

Dear Unit Owner:

We appreciate the opportunity to place the Master Association Insurance Policy for Mountain Sage Townhomes Association, Inc., and we look forward to servicing the Association's insurance needs for this coming year. We believe we bring the best value to our Association clients and that is a combination of comprehensive coverage at very competitive premiums.

The Association's Master Insurance Policy has been written to comply with the insurance requirements outlined in the Association Declarations.

The Association is to insure the following:

- ⇒ Common Elements (buildings, structures and common areas)
- ⇒ Limited Common Elements (outdoor decks, patios, etc.)
- ⇒ Property included in units which were initially installed in accordance with the association's original plans and specifications

AN IMPORTANT INSURANCE REMINDER FOR ALL UNIT OWNERS:

Owners are responsible for insurance on the following:

 $\Rightarrow\,$ Any building improvements & upgrades installed in the units by previous or current unit owners

(Do I have adequate limits to replace the interior surfaces as described in the decs & bylaws?)

- ⇒ Contents Furniture, Furnishings and other Personal Property (Do I have replacement cost coverage or actual cash value?)
- ⇒ Loss of Rental Income / Loss of Use / Loss of Assessments (What limits are available? Does the loss assessment coverage apply towards an association deductible?)
- ⇒ **Personal Liability** (Does my policy have rental restrictions? Does my umbrella extend to this policy?)

Please refer to the insurance section of the Association Declarations for further information regarding insurance requirements for both the Association and the individual Unit Owner.

Please send all insurance certificate requests you receive from your lender to assncert@mtnwst.com

If you have any questions or need any further clarification, please give me a call.

Sincerely,

Meghan Wilson

Meghan Wilson Commercial Lines Agent

> Colorado Office Locations: | Alamosa | Bayfield | Craig | Durango | Edwards | Englewood | Frisco | Glenwood Springs | |Granby | Grand Junction | Gunnison | Kremmling | Montrose | Pagosa Springs | Steamboat Springs | Westminster | New Mexico Office Location: | Farmington |



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Association Residential Unit Owner's Insurance Coverage Fact Sheet (Questions to ask your individual insurance agent)

Interior Building coverage - The unit owner's policy can cover the portions of the unit interior which the owner is responsible to insure, per the declarations and by-laws.

Q. Do I have adequate limits to replace the interior surfaces as described in the decs & bylaws of the association?

Personal Property coverage - The policy covers the personal belongings at the location of the unit, such as furniture, dishes, clothing, etc.

Q. Do I have replacement cost coverage or actual cash value?

Loss of Rental Income/or Loss of Use - In the event of a covered loss and the unit is found not fit to live in, the policy will provide coverage for additional living expenses (primary or secondary home) or loss of rental income (rental property) until the unit is repaired.

Q. What limits are available?

Loss Assessment coverage - The policy will pay for your share of a loss assessment charged against unit owners as a result of a loss to the property owned by the association or for a bodily injury or property damage liability claim against the association. Loss Assessment coverage is subject to coverage and exclusions in the unit owner's policy. The policy may also provide some coverage towards the association deductible.

Q. What limits are available? Does loss assessment coverage apply towards an association deductible?

Personal Liability - The policy provides liability coverage in the unit. Coverage would apply if the unit owner is found to be legally liable for a claim of bodily injury or property damage. Most unit owner's policies can provide limits up to \$500,000.

Q. Does my Umbrella policy extend to this policy? Does my policy have any rental restrictions?