

**AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.**

MADISON, WISCONSIN 53783-0001

**BUSINESSOWNERS POLICY**POLICY NUMBER  
05XP917901**DECLARATIONS**CUSTOMER BILLING ACCOUNT  
016-950-033 06NAMED SOUTHVIEW II CONDOMINIUM ASSOCIATION  
INSUREDMAILING C/O SILVER MOUNTAIN PROPERTIES  
ADDRESS 326 HIGHWAY 133 STE 120  
CARBONDALE, CO 81623-1568POLICY PERIOD FROM 10-01-2021 TO 10-01-2022  
12:01 A.M. Standard Time at your mailing address shown above.

FORM OF BUSINESS CORPORATION

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

**SECTION I PROPERTY**

ALL PROPERTY COVERAGES ARE SUBJECT TO THE FOLLOWING:

COVERED CAUSES OF LOSS SPECIAL - RISK OF DIRECT PHYSICAL LOSS

COVERAGE PROVIDED INSURANCE AT THE FOLLOWING DESCRIBED PREMISES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN UNLESS COVERAGE IS PROVIDED BY AN ENDORSEMENT.

**DESCRIPTION OF PREMISES**PREMISES NO. 0001 BUILDING NO. 001  
LOCATION 1115 1149 COLORADO AVE  
CARBONDALE CO 81623BUILDING INTEREST LEASED TO OTHERS  
PREDOMINANT OCCUPANCY CONDOMINIUM ASSOCIATION - RESIDENTIAL WITHOUT MERCANTILENUMBER OF UNITS 18  
CONSTRUCTION FRAME  
YEAR BUILT 1980  
COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 416

POLICY PROPERTY DEDUCTIBLE \$1,000

**OTHER PROPERTY DEDUCTIBLE(S)**

OPTIONAL COVERAGE/GLASS DEDUCTIBLE \$500

COVERAGE	LIMIT OF INSURANCE	PREMIUM
BUILDING	\$1,924,968	\$4,176.00
REPLACEMENT COST		

ADDITIONAL COVERAGE	LIMIT OF INSURANCE	PREMIUM
BUSINESS INCOME	ACTUAL LOSS SUSTAINED	INCLUDED

AGENT 041-307  
THE BEN KELLOFF AGENCY, INC  
350 HIGHWAY 133 # 1  
CARBONDALE, CO 81623-1650PHONE  
970-963-5711PAGE 0001  
BRANCH KAB075 RENW  
ENTRY DATE 07-18-2021

**AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.**

MADISON, WISCONSIN 53783-0001

**BUSINESSOWNERS POLICY****POLICY NUMBER**

05XP917901

**DECLARATIONS****CUSTOMER BILLING ACCOUNT**

016-950-033 06

Property forms and endorsements applying to this premises and made part of this policy at time of issue:

Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 85 17 09 15      BP 84 11 07 98      BP 85 11 12 08

<b>APPLICABLE PROPERTY ENDORSEMENT CHARGES</b>	<b>\$223.00</b>
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<b>TOTAL ADVANCE PROPERTY PREMIUM</b>	<b>\$4,399.00</b>
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Property forms and endorsements applying to all premises and made part of this policy at time of issue:

Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 06 01 01 07      BP 83 01 07 98      BP 83 02 01 07

**SECTION II LIABILITY AND MEDICAL EXPENSES**

Except for Damage To Premises Rented To You, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to **Section II Liability** in the BUSINESSOWNERS COVERAGE FORM and any attached endorsements.

<b>COVERAGE</b>	<b>LIMIT OF INSURANCE</b>
AGGREGATE LIMIT (OTHER THAN PRODUCTS COMPLETED OPERATIONS)	\$4,000,000
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$4,000,000

DAMAGE TO PREMISES RENTED TO YOU - ANY ONE PREMISES	\$50,000
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LIABILITY - EACH OCCURENCE LIMIT	\$2,000,000
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PREM 0001    BLDG 001      MEDICAL EXPENSES - ANY ONE PERSON	\$5,000
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<b>LOCATION</b>	<b>PREMIUM BASIS</b>	<b>RATE</b>	<b>ADVANCE PREMIUM</b>
PREMISES NO. 0001    BUILDING NO. 001	18    UNITS		\$102.00

<b>TOTAL ADVANCE BUSINESS LIABILITY PREMIUM</b>	<b>\$102.00</b>
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Liability forms and endorsements applying to all premises and made part of this policy at time of issue:

Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 04 17 07 02	BP 04 39 07 02	BP 04 54 01 06	BP 04 93 01 06
BP 05 17 01 06	BP 05 77 01 06	BP 10 05 07 02	BP 14 60 06 10
BP 15 04 05 14	BP 84 24 01 07	BP 85 04 07 10	BP 85 05 07 98CO
BP 85 10 07 98	BP 85 12 01 06	IL 75 26 12 05	

<b>TOTAL ADVANCE BUSINESS PREMIUM</b>	<b>\$4,501.00</b>
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This premium may be subject to adjustment.

AGENT 041-307

THE BEN KELLOFF AGENCY, INC

350 HIGHWAY 133 # 1

CARBONDALE, CO 81623-1650

PHONE

970-963-5711

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BRANCH KAB075 RENW

ENTRY DATE 07-18-2021

AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY

POLICY NUMBER  
05XP917901

DECLARATIONS

CUSTOMER BILLING ACCOUNT  
016-950-033 06

Forms and endorsements applying to property and liability at all premises and made part of this policy at time of issue:  
Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP IN 01 01 06	BP 00 03 01 06	BP 01 81 11 13	BP 05 01 07 02
BP 05 15 01 15	BP 05 24 01 15	BP 05 41 01 15	BP 80 01 08 18
BP 87 01 08 10	BP 87 90 08 10		

AUTHORIZED  
REPRESENTATIVE

*William B. West*  
President

*[Signature]*  
Secretary

COUNTERSIGNED  
LICENSED RESIDENT AGENT

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AGENT 041-307  
THE BEN KELLOFF AGENCY, INC  
350 HIGHWAY 133 # 1  
CARBONDALE, CO 81623-1650

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BP AF 01 08 18

INSURED

Stock No. 15141