

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/28/2019

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C B	ERT ELO	IFICATE DOI W. THIS CI	ES NOT AFFIR ERTIFICATE OI	AS A MATTER OF INFORMATION MATIVELY OR NEGATIVELY AME F INSURANCE DOES NOT CONST R, AND THE CERTIFICATE HOLDER	ND, EXTEND OR	ALTER THE CO	OVE	RAGE AFFORDED	BY TH	E POLICIES		
Mou 100	EVi	R N West In & F Ctory Way O 81625	in Serv LLC		E-MAIL ADDRESS:	NAME: PHONE FAX (A/C, No, Ext): (970) 824-8185 E-MAIL (A/C, No): (970) 824-8188 ADDRESS: (A/C, No): (970) 824-8188						
					COOTOINEI(ID.	INSURER(S) AFFORDING COVERAGE NAIC #						
INSL	RED				INSURER A : Tra	INSURER A : Travelers Property Casualty Company of America 25674						
		Black Di	iamond Lodge (Condominium Assoc. Inc	INSURER B :	INSURER B :						
		c/o Toad	d Property Mana		INSURER C :	INSURER C :						
		PO Box Crostod	2776 Butte, CO 8122		INSURER D :	INSURER D :						
		Clested	Dutte, 00 0122	-	INSURER E :	INSURER E :						
					INSURER F :							
CO	VER	AGES		CERTIFICATE NUMBER:			RE	VISION NUMBER:				
1 1	621	Gothic Road,	Crested Butte, C	ROPERTY (Attach ACORD 101, Additional Rema	rks Schedule, if more sp	ace is required)						
TI IN C	HIS IS DICA	ATED. NOTWIT FICATE MAY B	THAT THE POLIC THSTANDING AN E ISSUED OR MA	CIES OF INSURANCE LISTED BELOW HA Y REQUIREMENT, TERM OR CONDITIO Y PERTAIN, THE INSURANCE AFFORD UCH POLICIES. LIMITS SHOWN MAY HA	N OF ANY CONTRAC ED BY THE POLICIE	CT OR OTHER DOC	UM REIN	ENT WITH RESPECT T	O WHIC	H THIS		
INSR		TYPE OF IN	SURANCE	POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION		COVERED PROPERTY		LIMITS		
	v				DATE (MM/DD/YYYY)	DATE (MM/DD/YYYY)	v			3,988,800		
	X	PROPERTY		6602K989389	11/21/2018	11/21/2019	X X		\$	63,724		
	CAL	JSES OF LOSS	DEDUCTIBLES		11/21/2010	11/21/2013	X		\$	10,000		
		BASIC	5,000				^	BUSINESS INCOME	\$ \$			
	x	SPECIAL	CONTENTS					RENTAL VALUE	\$			
	~	EARTHQUAKE		-			<u> </u>	BLANKET BUILDING	\$			
		WIND		-			<u> </u>	BLANKET PERS PROP	\$			
		FLOOD		-				BLANKET BLDG & PP	\$			
		12000		-			x	Directors/Officers	\$	63,724		
				-				-	\$			
		INLAND MARINE		TYPE OF POLICY					\$			
	CAUSES OF LOSS								\$			
				POLICY NUMBER	1				\$			
									\$			
Α	X CRIME TYPE OF POLICY Crime						X	Employee Dishonesty	\$	25,000		
							X Forgery/Alteration		\$	25,000		
				6602K989389	11/21/2018	11/21/2019	X	Deductible	\$	500		
		BOILER & MACH	IINERY / FAKDOWN						\$			
								F	\$			
	A General Liability			6602K989389	11/21/2018	11/21/2019	X	Each occurrence	\$	1,000,000		
A		mmercial U		CUP2K98984A	11/21/2018	11/21/2019	X	Each/Aggregate	\$	1,000,000		
				ACORD 101, Additional Remarks Schedule, may								
CE	RTIF	ICATE HOLD	DER			CANCELLATION						
		621 Got	ners Evidence hic Road Butte, CO 8122	-	THE EXPIRA ACCORDAN	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 RE	AUTHORIZED REPRESENTATIVE						
					Desire J	Desite J. Tribble						

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AGENCY	CUSTOMER	ID: B	LACD	IA-01
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ADDITIONAL REMARKS SCHEDULE

AGENCY Mountain West In & Fin Serv LLC		NAMED INSURED Black Diamond Lodge Condominium Assoc. Inc c/o Toad Property Management PO Box 2776 Crested Butte, CO 81224			
POLICY NUMBER					
SEE PAGE 1					
CARRIER	NAIC CODE				
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 24 FORM TITLE: Certificate of Property Insurance

Description of Property:

Building limit is written over 8 total units.

Replacement Cost Valuation/ 80% Co-Insurance/ \$5,000 Deductible