

DESIREEG

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/17/2019

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

th	nis certificate does not confer rights t	o the	cert	ificate holder in lieu of su							
PRO	DUCER				CONTA NAME:	CT					
Mountain West In & Fin Serv LLC 100 E Victory Way Craig, CO 81625						PHONE (A/C, No, Ext): (970) 824-8185 FAX (A/C, No): (970) 824-8188					
						E-MAIL ADDRESS:					
	.				7,55,1,2		SURER(S) AFFO	RDING COVERAGE		NAIC#	
					INSURE			Casualty Company of	America		
INSURED						ERB:					
The Pitchfork Condo Assocation, Inc. PO Box 2776 Crested Butte, CO 81224						INSURER C:					
						INSURER D :					
						ER E :					
						INSURER F:					
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:					
TI	HIS IS TO CERTIFY THAT THE POLICI				HAVE B	BEEN ISSUED	TO THE INSUI			LICY PERIOD	
	NDICATED. NOTWITHSTANDING ANY F										
	ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH								I IO ALL	THE TERMS,	
INSR LTR				SUBR POLICY NUMBER		POLICY EFF (MM/DD/YYYY)					
A	X COMMERCIAL GENERAL LIABILITY	INSD	VVVD			(WINDD/TTTT)	(MIM/DD/1111)	EACH OCCURRENCE	s	1,000,000	
	CLAIMS-MADE X OCCUR			6800K617181		12/12/2018	12/12/2019	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person)	s	5,000	
								PERSONAL & ADV INJURY	s	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	s	2,000,000	
	X POLICY PRO-							PRODUCTS - COMP/OP AG		2,000,000	
	OTHER:							TROBUSTO COMITTO TRO	s		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	s		
	ANY AUTO							BODILY INJURY (Per persor			
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Per accide			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	ACTOC ONET							(a susually	s		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	s		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH STATUTE ER	-		
								E.L. EACH ACCIDENT	\$		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOY	EE \$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIM	IT \$		
Α	Directors & Officers			6800K617181		12/12/2018	12/12/2019	Each Claim/Aggregat	е	1,000,000	
Α	Business Owners Poli			6800K617181		12/12/2017	12/12/2018	Building Limit		1,144,520	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC ding Coverage is written on Replaceme	LES (A	ACORI	0 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requi	red)			
	oing Coverage is written on Replaceme	nt Co	St va	aluation w/ 0% Co-insuran	ce						
	inance or Law Coverage: A- Included; E	8&C \$	100,0	000 Combined							
wate	er & Sewer Back up: \$100,000										
CERTIFICATE HOLDER						CANCELLATION					
								ESCRIBED POLICIES BE IEREOF, NOTICE WILI			
Unit Owners - Evidence Only								CY PROVISIONS.	. J. JI		

ACORD 25 (2016/03)

Crested Butte, CO 81224

110 Pitchfork Units A-F

AUTHORIZED REPRESENTATIVE