

**POLICY CHANGE DOCUMENT**

**POLICY NO.:** PHPK2661193-010

Philadelphia Indemnity Insurance Company	21402	The Hartwell Corporation
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NAMED INSURED      Buckhorn Ranch Association, Inc.

MAILING ADDRESS      PO Box 2776  
Crested Butte, CO 81224-2776

POLICY PERIOD:      FROM   04/10/2025      TO   04/10/2026      at  
12:01 A.M. Standard Time at your mailing address shown above.

CHANGE EFFECTIVE   04/10/2025      CHANGE #   1      REVISION #   1

**DESCRIPTION**

In consideration of the premium reflected, the policy is amended as indicated below:

Amended:

Mailing Address Per Attached Policy Declarations.

Path ID 18459205

Total Annual  
Additional/Return Premium \$      0.00  
NO CHANGE

Total Prorate  
Additional/Return Premium \$      0.00  
NO CHANGE

COUNTERSIGNED  
(Date)

BY  
(Authorized Representative)

04/23/2025  
\_\_\_\_\_  
Issue Date



A Member of the Tokio Marine Group

One Bala Plaza, Suite 100  
Bala Cynwyd, Pennsylvania 19004  
610.617.7900 Fax 610.617.7940  
PHLY.com

**Philadelphia Indemnity Insurance Company**  
**A Stock Company (Nonparticipating)**  
**COMMON POLICY DECLARATIONS**

**Policy Number:** PHPK2661193-010

**Named Insured and Mailing Address:**

Buckhorn Ranch Association, Inc.  
PO Box 2776  
Crested Butte, CO 81224-2776

**Producer:** 21402

The Hartwell Corporation  
PO Box 51019  
1084 N Skyline Drive  
Idaho Falls, ID 83405

**Policy Period From:** 04/10/2025 **To:** 04/10/2026

(208)522-5656

at 12:01 A.M. Standard Time at your mailing  
address shown above.

**Business Description:** Homeowners Association

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.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS  
INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

	<b>PREMIUM</b>
<b>Commercial Property Coverage Part</b>	
<b>Commercial General Liability Coverage Part</b>	2,195.00
<b>Commercial Crime Coverage Part</b>	
<b>Commercial Inland Marine Coverage Part</b>	
<b>Commercial Auto Coverage Part</b>	
<b>Businessowners</b>	
<b>Workers Compensation</b>	

**Total** **\$ 2,195.00**

Total Includes Federal Terrorism Risk Insurance Act Coverage **17.00**

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**FORM (S) AND ENDORSEMENT (S) MADE A PART OF THIS POLICY AT THE TIME OF ISSUE**  
**Refer To Forms Schedule**

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\*Omits applicable Forms and Endorsements if shown in specific Coverage Part/Coverage Form Declarations

A handwritten signature in black ink, appearing to read "Ed Sany", with a long horizontal stroke extending to the right.

**Secretary**

A handwritten signature in black ink, appearing to read "Gavriel", with a long horizontal stroke extending to the right.

**President and CEO**