

August 28, 2018

Hidden Mine Ranch Owners Association, Inc.
c/o Rusty Johnson
P O Box 2144
Crested Butte, CO 81224

RE:	Insurance Company	Travelers
	Policy Number	105963492
	Policy Period	7/22/18 to 7/22/19

Dear Rusty:

We are pleased to enclose your Directors & Officers renewal policy.

Please remember the changes on this year's policy:

The retention has increased to \$5,000 except

The retention on Breach of Contract claims has increased to \$15,000

Any loss or claim brought by Freeman Enterprises is excluded.

As per our previous correspondence, Dave Deardeuff is working on the Breach of Contract retention and the Freeman Enterprises exclusion to try to get them modified or removed.

Please review it and advise if you need to make any changes or need clarification of any items. We recommend retaining a copy of policy for future reference.

We appreciate your business and the opportunity to continue servicing your insurance needs. Please do not hesitate to contact us if you have any questions or if we may be of further assistance.

Sincerely,



Terri Wallingford

Enclosures



Wrap+®

**Community Association Management Liability Coverage
Declarations**

POLICY NO. 105963492

**Travelers Casualty and Surety Company of America
One Tower Square
Hartford, Connecticut 06183**

(A Stock Insurance Company, herein called the Company)

THE COMMUNITY ASSOCIATION MANAGEMENT LIABILITY COVERAGE POLICY IS WRITTEN ON A CLAIMS-MADE AND REPORTED BASIS. THE COMMUNITY ASSOCIATION MANAGEMENT LIABILITY COVERAGE POLICY COVERS ONLY CLAIMS FIRST MADE AGAINST INSURED DURING THE POLICY PERIOD AND REPORTED TO THE COMPANY IN ACCORDANCE WITH THE TERMS OF THE COMMUNITY ASSOCIATION MANAGEMENT LIABILITY COVERAGE POLICY. THE LIMIT OF LIABILITY AVAILABLE TO PAY SETTLEMENTS OR JUDGMENTS WILL BE REDUCED BY DEFENSE EXPENSES, AND DEFENSE EXPENSES WILL BE APPLIED AGAINST THE RETENTION.

MT INSURED: THE LIMIT OF LIABILITY AVAILABLE TO PAY SETTLEMENTS OR JUDGMENTS WILL BE REDUCED AND MAY BE EXHAUSTED BY DEFENSE EXPENSES, AND DEFENSE EXPENSES WILL BE APPLIED AGAINST THE RETENTION.

ITEM 1 NAMED INSURED:

HIDDEN MINE RANCH OWNERS ASSOCIATION INC

D/B/A:

Principal Address:

**PO BOX 2144
CRESTED BUTTE, CO 812242144**

ITEM 2 POLICY PERIOD:

Inception Date: **July 22, 2018** Expiration Date: **July 22, 2019**
12:01 A.M. standard time both dates at the Principal Address stated in ITEM 1.

ITEM 3 ALL NOTICES OF CLAIM OR LOSS MUST BE SENT TO THE COMPANY BY EMAIL, FACSIMILE, OR MAIL AS SET FORTH BELOW:

**Email: BSIclaims@travelers.com
Fax: (888) 460-6622**

**Mail: Travelers Bond & Specialty Insurance Claim
385 Washington St. – Mail Code 9275-NB03F
St Paul, MN 55102**

ITEM 4 COVERAGE INCLUDED AS OF THE INCEPTION DATE IN ITEM 2:

Community Association Management Liability Coverage

ITEM 5 Only those coverage features marked " Applicable" are included in this policy.

COMMUNITY ASSOCIATION MANAGEMENT LIABILITY COVERAGE

Limit of Liability: \$1,000,000 for all **Claims**

Additional Defense Coverage: Applicable Not Applicable

Additional Defense Limit of Liability: **Not Covered** for all **Claims**

Retention:

- \$0 for each **Directors and Officers Claim** under Insuring Agreement A
- \$5,000 for each **Directors and Officers Claim** under Insuring Agreement B
- \$5,000 for each **Directors and Officers Claim** under Insuring Agreement C
- \$5,000 for each **Employment Claim** under Insuring Agreement D

Prior and Pending Proceeding Date: July 22, 2008

Continuity Date: July 22, 2008

ITEM 6 **PREMIUM FOR THE POLICY PERIOD:**

\$1,781.00 Policy Premium

N/A Annual Installment Premium

ITEM 7 **TYPE OF CLAIM DEFENSE:**

Duty-to-Defend

ITEM 8 **EXTENDED REPORTING PERIOD:**

Additional Premium Percentage: 75 %

Additional Months: 12

(If exercised in accordance with section **V. CONDITIONS, Q. EXTENDED REPORTING PERIOD** of the Community Association Management Liability Coverage Policy)

ITEM 9 **RUN-OFF EXTENDED REPORTING PERIOD:**

Additional Premium Percentage: 100 %

Additional Months: 24

(If exercised in accordance with section V. **CONDITIONS**, N. **CHANGE OF CONTROL** of the Community Association Management Liability Coverage Policy)

ITEM 10 ANNUAL REINSTATEMENT OF THE LIMIT OF LIABILITY:

Applicable

Not Applicable

Only those coverage features marked " Applicable" are included in this policy.

ITEM 11 FORMS AND ENDORSEMENTS ATTACHED AT ISSUANCE:

**AFE-19004-0115; AFE-19008-0115; CAM-16001-0113; CAM-19004-0113; CAM-19011-0113;
CAM-19061-0315; CAM-17006-0113**

PRODUCER INFORMATION:

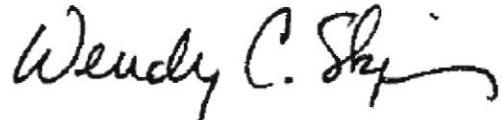
**INSURICA INSURANCE
P O BOX 25928
OKLAHOMA CITY, OK 73125-4433**

Countersigned By

IN WITNESS WHEREOF, the Company has caused this policy to be signed by its authorized officers.



President, Bond & Specialty Insurance



Corporate Secretary