

# **BUSINESS KEY POLICY**

**Non-assessable policy Issued by**

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

**6000 American Pkwy**

**Madison WI 53783-0001**

**(608) 249-2111**

**Member of American Family Insurance Group**

**THIS POLICY CONSISTS OF:**

- **DECLARATIONS**
- **ONE OR MORE COVERAGE PARTS. A COVERAGE PART CONSISTS OF:**
  - **ONE OR MORE COVERAGE FORMS**
  - **APPLICABLE FORMS AND ENDORSEMENTS**
- **COMMON POLICY CONDITIONS**

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AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.  
MADISON, WISCONSIN 53783-0001

**COMMON DECLARATIONS**

**POLICY NUMBER**  
05 XT3321-01

**COMPANY CODE**  
0019-BLBK-CO

**CUSTOMER BILLING ACCOUNT**  
018-175-933 66

**NAMED INSURED MAILING ADDRESS**  
RIVERLAND LOT OWNERS ASSOCIATION  
PO BOX 561  
CRESTED BUTTE CO 81224-0561

**POLICY PERIOD** FROM 06/04/2019 TO 06/04/2020  
12:01 A.M. Standard Time at your mailing address shown above.

**FORM OF BUSINESS:** CORPORATION

**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>
COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$231.00
<b>TOTAL PREMIUM</b>	<b>\$231.00</b>

Forms and endorsements applying to all coverage parts and made part of this policy at time of issue:  
BK 00 00 08 18

AUTHORIZED  
REPRESENTATIVE

*William B. West*  
President

*Feck*  
Secretary

COUNTERSIGNED  
LICENSED RESIDENT AGENT

AGENT 013-307  
CLARIE BROSHINSKY AGENCY LLC  
1140 N MAIN ST STE D  
GUNNISON CO 81230-2460  
AF DS 00 08 18

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BRANCH CFR  
ENTRY DATE 03/06/2019

02-12

INSURED

Stock No. 05975



**AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.**  
 MADISON, WISCONSIN 53783-0001  
**COMMERCIAL GENERAL LIABILITY COVERAGE PART**  
**DECLARATIONS**

**POLICY NUMBER**  
 05 XT3321-01

**COMPANY CODE**  
 0019-BLBK-CO

**NAMED INSURED** RIVERLAND LOT OWNERS ASSOCIATION  
 PO BOX 561  
**MAILING ADDRESS** CRESTED BUTTE CO 81224-0561

**LIMITS OF INSURANCE**

GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS-COMPLETED OPERATIONS)	\$2,000,000
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$2,000,000
PERSONAL & ADVERTISING INJURY LIMIT	\$1,000,000
EACH OCCURRENCE LIMIT	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU LIMIT - ANY ONE PREMISES	\$100,000
MEDICAL EXPENSE LIMIT - ANY ONE PERSON	\$5,000

**LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY**

LOCATION 0001 PREMISES 001  
 HWY 135  
 CRESTED BUTTE GUNNISON COUNTY CO 81224

**CLASSIFICATION**

CODE	DESCRIPTION	PREMIUM BASIS	RATE		ADVANCE PREMIUM	
			ALL OTHER	PR/CO	ALL OTHER	PR/CO
09030	HOMEOWNERS ASSOCIATION PRODUCTS-COMPLETED OPERATIONS ARE SUBJECT TO THE GENERAL AGGREGATE LIMIT	38 (007)	4.473 (A)		\$170.00	
	A=EACH ONE			007=UNITS		
				<b>BALANCE TO MINIMUM</b>	\$61.00	
				<b>TOTAL ADVANCE PREMIUM</b>	\$231.00	

Forms and endorsements applying to this coverage part and made part of this policy at time of issue:

CG 21 75 01 15	IL 00 21 07 02	IL 75 26 12 05	CG 00 01 12 07	IL 02 28 09 07
CG 21 47 12 07	IL 00 17 11 98	IL 75 02 06 99	CG 21 60 09 98	CG 21 96 03 05
CG 21 67 12 04	CG 77 14 04 02	CG 77 04 07 10	IL 09 85 01 15	IL 75 40 03 16
IL 01 25 11 13	CG 21 06 05 14			

**AGENT** 013-307  
 CLARIE BROSCINSKY AGENCY LLC  
 1140 N MAIN ST STE D  
 GUNNISON CO 81230-2460  
 CG AF 01 08 18

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 ENTRY DATE 03/06/2019

INSURED

Stock No. 05981

AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.  
MADISON, WISCONSIN 53783-0001  
COMMERCIAL GENERAL LIABILITY COVERAGE PART  
DECLARATIONS

POLICY NUMBER  
05 XT3321-01

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0019-BLBK-CO

AUTHORIZED  
REPRESENTATIVE

*William B. Vestal*  
President

*Peck*  
Secretary

COUNTERSIGNED  
LICENSED RESIDENT AGENT

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CLARIE BROSCINSKY AGENCY LLC  
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ENTRY DATE 03/06/2019

INSURED

Stock No. 05981