BUSINESSOWNERS POLICY
CONDOMINIUM CERTIFICATE OF INSURANCE
American Family Mutual Insurance Company
American Family Insurance Company
6000 American Pkwy Madison, WI 53783-0001

Agent's Name, Address

Clarie Broschinsky, Agent / Owner
American Family Insurance
1140 N Main, Suite D
Gunnison, CO 81230
Bus - (970) 641-3481 - Fax - 1-844-626-6289

This Certificate of Insurance is issued as a matter of information only and confers no rights upon the Certificate Holder.

This Certificate of Insurance does not amend, extend or alter the coverage afforded by the policy listed below.

This Certificate does not constitute a contract between the issuing insurer, authorized representative and the certificate holder.

INSURED

CONDOMINIUM ASSOCIATION'S NAME AND ADDRESS

Powderview Condo Assn, PO Box 2776, Crested Butte CO 81224

POLICY NUMBER	POLICY EFFECTIVE DATE (Mo., Day, Yr.)	POLICY EXPIRATION DATE (Mo., Day, Yr.)
91003-53670-58	06/06/24	06/06/25

★ **PROPERTY**

[X] Risks of Direct Physical Loss [ ] Named Perils $ 10,000 ____ Property Deductible

PROPERTY COVERED	VALUATION OF COVERED PROPERTY	LIMIT OF INSURANCE
Building(s) 10 Units	[X] Replacement Cost [ ] Actual Cash Value	$ 3,914,800.00
Business Personal Property ____	[X] Replacement Cost	$ 103,054.00

★ **BUSINESSOWNERS LIABILITY AND MEDICAL EXPENSES**

COVERAGE	LIMIT OF INSURANCE
Liability And Medical Expenses	$2,000,000
Damage To Premises Rented To You	$50,000
Medical Expenses - Any One Person	$5,000
Aggregate Limit (Other Than Products Completed Operations)	$4,000,000
Products - Completed Operations Aggregate Limit	$4,000,000

Consult the Condominium Association's policy for insurance afforded Unit Owners

CERTIFICATE HOLDER(S) Effective Date ____ [ ] New Ownership/Occupancy [ ] Change Ownership/Occupancy

UNIT OWNER'S NAME AND ADDRESS OR UNIT DESIGNATION NO

UNIT OWNER'S MORTGAGEE NAME AND ADDRESS	LOAN NO

UNIT OWNER'S CONTRACT OF SALES NAME AND ADDRESS	LOAN NO

MISCELLANEOUS

100% Replacement Cost Coverage, Ordinance or Law, Equipment Breakdown, Inflation Protection, Wind & Hail Coverage, & Seperation of Insured Included, No Co-Insurance, Cancellation Clause 10 Days for Non-Payment, 30 Days for Any Other Reason D&O & Crime and Fidelity Included

DATE ISSUED	AUTHORIZED REPRESENTATIVE
04/09/24	Clarie Broschinsky

UBL-22933 Ed. 6/11