

CERTIFICATE OF LIABILITY INSURANCE

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.

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.

PRODUCER: USI Colorado, LLC HOA
P.O. Box 7050
Englewood, CO 80155
800 873-8500
CONTACT NAME:
PHONE (A/C, No, Ext): 877.456.3643
FAX (A/C, No):
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE: INSURER A : Travelers Casualty Ins Co of America
NAIC #: 25658
INSURED: Madison Creek Owners Association, Inc.
c/o Capitol Hill HOA Management
400 South Colorado Blvd. Suite 360
Denver, CO 80246

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSR, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation and Employers' Liability, Crime / Fidelity, and D & O Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Physical Location / Description: 40 South Madison, Denver, CO 80209
Number of Buildings = 1
Number of Units = 10
Carrier: Travelers Casualty Insurance Company of America
Policy Type: Commercial Package Policy
(See Attached Descriptions)

CERTIFICATE HOLDER: For Informational Purposes Only
CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE: Valeria Howard

## DESCRIPTIONS (Continued from Page 1)

Policy Number: 680-4C391334-17-42

Policy Term: 10/01/2017 - 10/01/2018

Building Limit: \$2,732,260 / Deductible: \$1,000 / Windstorm or Hail Deductible: 2%

Causes of Loss: Special Form

Valuation: Replacement Cost

Ordinance or Law: Included

**\*\*WALLS IN COVERAGE IS DEPENDENT ON AND SUBJECT TO THE ASSOCIATIONS LEGAL DOCUMENTS. PLEASE REFER TO THE COVENANTS AND BYLAWS FOR FURTHER INFORMATION\*\***

**\*\*THIS POLICY CONTAINS THE SEVERABILITY OF INTEREST/SEPARATION OF INSUREDS/CROSS LIABILITY CLAUSE\*\***

**\*\*ALL COVERAGE SUBJECT TO THE TERMS, CONDITIONS AND EXCLUSIONS OF THE POLICY\*\***

**\*\*Property Managers Included For Employee Dishonesty\*\***