

# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 04/27/2021

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. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

PRODUCER				CONTACT NAME:	Mike Trujillo		
State Far	Mike Trujillo			PHONE (A/C, No. Ext	); (970) 249-4404	FAX (A/C, No): (97	0) 249-5344
	2019 S Townsend Ave		E-MAIL ADDRESS: mike.trujillo.gopq@statefarm.com				
	9			PRODUCER CUSTOMER	ID:		
	Montrose,	CO	81401-5444		INSURER(S) AFFORDING COVERAGE		NAIC#
INSURED				INSURER A :	State Farm Fire and Casualty Compa	any	25143
	San Juan Ranch Owners Assoc			INSURER B :			
	c/o Full Circle Hoa Mgmt Llc 560 MT Village Blvd Ste 102b			INSURER C :			
				INSURER D :			
			0440=	INSURER E :			
	Telluride,	CO	81435	INSURER F:			

**CERTIFICATE NUMBER: REVISION NUMBER:** 

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) REFER TO ACORD 101.

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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

₹	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY		LIMITS
$\times$	PROPERTY					X	BUILDING	\$ \$31,200
CA	AUSES OF LOSS	DEDUCTIBLES					PERSONAL PROPERTY	\$
	BASIC	BUILDING \$1,000					BUSINESS INCOME	\$ SEE ACORD 10
	BROAD	CONTENTS	-				EXTRA EXPENSE	\$ SEE ACORD 10
$\times$	SPECIAL	]					RENTAL VALUE	\$ SEE ACORD 10
	EARTHQUAKE		06 B7 C000 0	04/20/2021	04/29/2022		BLANKET BUILDING	\$
	WIND		96-B7-C000-0	04/29/2021			BLANKET PERS PROP	\$
	FLOOD						BLANKET BLDG & PP	\$
								\$
								\$
	INLAND MARINE		TYPE OF POLICY					\$
CA	AUSES OF LOSS							\$
	NAMED PERILS		POLICY NUMBER					\$
							•	\$
	CRIME							\$
TY	TYPE OF POLICY						•	\$
							•	\$
$\forall$	BOILER & MACH							\$
Ĺ	S EQUIPMENT BR	EAKDOWN						\$
								\$
								\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) REFER TO ACORD 101.

CERTIFICATE HOLDER		CANCELLATION		
San Juan Ranch Owners Assoc		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
560 Mtn Vlg Blvd Unit 102B		AUTHORIZED REPRESENTATIVE		
Telluride,	CO 81435-9513	IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.		

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AGENCY CUSTOMER ID:	
LOC #:	

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# ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED		
Mike Trujillo		San Juan Ranch Owners Assoc		
POLICY NUMBER				
96-B7-C000-0				
CARRIER	NAIC CODE			
State Farm Fire and Casualty Company	25143	EFFECTIVE DATE:	04/29/2021	

### **ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,				
FORM NUMBER: 24	FORM TITLE: Certificate of Property Insurance			

## **Unit Owner:**

NA - 560 Mtn Vlg Blvd Unit 102B - Telluride, - CO - 81435-9513 - Unit Loan Number:NA - Number Of Units: 0023

**Association Type:** Residential Community Association Policy

# Forms, Options and Endorsements:

CMP-4100	Businessowners Coverage Form	CMP-4206.1	Amendatory Endorsement
FE-6999.3	Terrorism Insurance Cov Notice	CMP-4815	Dir & Officers \$5,000,000
CMP-4550	Residential Community Assoc	CMP-4710	Emp Dishonesty \$25,000
CMP-4508	Money and Securities	CMP-4705.2	Loss of Income & Extra Expnse
FE-3650	Actual Cash Value Endorsement	CMP-4561.1	Policy Endorsement

Forms, Options and Endorsements:

## Coverages:

\$5,000,000
\$5,000
\$10,000,000
\$10,000,000

#### Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association bylaws including the following types of property within a unit, regardless of ownership:

- 1. Fixtures, improvements and alterations that are a part of the building or structure; and
- 2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. *However, these endorsements do not change any replacement cost coverage provided by the policy.* 

This policy provides coverage on a standalone/individual condominium association.

### **Commercial General Liability**

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

### Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.