

**CERTIFICATE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY)

01/01/2024

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	Kinser Insurance Agency 1495 Pine Grove Rd. Ste 201A Steamboat Springs, CO 80487	CONTACT NAME: Commercial Team		
		PHONE (A/C, No, Ext): (970)879-1330	FAX (A/C, No): () -	
INSURED	Hideaway Townhouses Homeowners Assoc. c/o Summit Resort Group PO Box 2590 Dillon, CO 80435 05-45273	INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: American Alternative Ins Co		19720
		INSURER B: Travelers Casualty & Surety Co.		31194
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
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LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
197-350 Kestrel Lane, Silverthorne CO 80498 Unit #

Loan #

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.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY CAUSES OF LOSS DEDUCTIBLES BASIC BUILDING BROAD CONTENTS <input checked="" type="checkbox"/> SPECIAL EARTHQUAKE <input checked="" type="checkbox"/> WIND Prop Ded FLOOD <input checked="" type="checkbox"/> Guaranteed Replacement Cost <input checked="" type="checkbox"/> All-In	10,000 Unit Coverage	CAU531118-1	01/01/2024	01/01/2025	<input checked="" type="checkbox"/> BUILDING PERSONAL PROPERTY BUSINESS INCOME EXTRA EXPENSE RENTAL VALUE BLANKET BUILDING BLANKET PERS PROP BLANKET BLDG & PP <input checked="" type="checkbox"/> Bld Ord 2 <input checked="" type="checkbox"/> Bld Ord 3	\$ 47,150,000 \$ \$ \$ \$ \$ \$ \$ \$ \$ 1,000,000 \$ 1,000,000
	<input type="checkbox"/> INLAND MARINE CAUSES OF LOSS NAMED PERILS	TYPE OF POLICY POLICY NUMBER				\$ \$ \$ \$	
B	<input checked="" type="checkbox"/> CRIME TYPE OF POLICY	106896822	04/01/2021	04/01/2024	<input checked="" type="checkbox"/> Fidelity <input checked="" type="checkbox"/> Comp. Fraud <input checked="" type="checkbox"/> Fund Trf Fraud	\$ 600,000 \$ 600,000 \$ 600,000	
A	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	CAU531118-1	01/01/2024	01/01/2025	<input checked="" type="checkbox"/>	\$ Bldg Limit \$	
A	Comm Gen Liability	CAU531118-1	01/01/2024	01/01/2025	Per Occur.	\$ 1,000,000	
B	Director & Officer	107965799	01/01/2024	01/01/2025	Per Occur.	\$ 1,000,000	

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

UNIT OWNER:

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CERTIFICATE HOLDER	CANCELLATION
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FOR INFORMATIONAL PURPOSES

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

Jim Kinser