



PRODUCER#: 04 07 50 27T
PETER MAMICH
1495 PNE GRV RD #201A
STEAMBOAT SPRI CO 80487

**DILLON PINES TOWNHOME ASSOC
C/O SUMMIT RESORT GROUP
PO BOX 678
FRISCO CO 80443-2566**

60438-35-47
03/28/26
01:17:07
6043835470026
003
ABL94
ENDORSEMENT

CM057EP1
04 - PL

ADDIDIR6X9

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

E4277
1st Edition

Policy Number: 60438-35-47

POLICY CHANGES

Effective Date of Change: 06/01/26

Expiration Date: 04/01/27

Change Endorsement No.: 003

Agent: 07-50-27T

Named Insured: DILLON PINES TOWNHOME ASSOC
C/O SUMMIT RESORT GROUP
PO BOX 678
FRISCO CO 80443-2566

The following item(s):

	Insured's Name		Insured's Mailing Address
	Policy Number		Company
	Effective / Expiration Date		Insured's Legal Status / Business of Insured
	Payment Plan		Premium Determination
	Additional Interested Parties		Coverage Forms and Endorsements
	Limits / Exposures	X	Deductibles
	Covered Property / Location Description		Classification / Class Codes
	Rates		Underlying Insurance

is (are) changed to read {See Additional Page(s)}:

The above amendments result in a change in the premium as follows:

	No Changes	To Be Adjusted At Audit	Additional Premium	Return Premium
			\$	\$ 5,036.00
Authorized Representative Signature:				



Policy Changes Endorsement Description

EDIT LOCATION

LOCATION 1:

301 W LA BONTE ST DILLON, CO 80435

CHANGE: WIND AND HAIL DEDUCTIBLE FROM 2% TO 5%

Removal Permit If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change: after that, this insurance does not apply at the previous location.



STATEMENT

MID-CENTURY INSURANCE COMPANY

° DILLON PINES TOWNHOME ASSOC

C/O SUMMIT RESORT GROUP
PO BOX 678
FRISCO CO 80443-2566

MARCH 28, 2026

Date

07-50-27T

Agent's Number

60438-35-47

Policy Number

Loan Number

This Statement Reflects:

Effective Date: 06/01/26

New Business Reinstatement Change Of Coverage Added Coverage

\$ Previous Balance Owing

\$ Premium

\$ Membership, Policy, Reinstatement, Reissue or Service Fees

\$ Pro Rata Premium Due

\$ Premium For Renewing Entire Present Coverage From _____ To _____

\$

\$

\$

\$

\$ _____ Total Charges

\$

\$ Payments

\$ 5,036.00 Other Credits 06/01/26 TO 04/01/27

\$ 5,036.00 Total Credits

\$ - NONE - **BALANCE DUE UPON RECEIPT**

\$ _____ Optional Amount
\$ _____ Refund

WE WANT TO BE YOUR FIRST CHOICE FOR BUSINESS AND PERSONAL LINES INSURANCE. IF YOU PLACE A PERSONAL LINES POLICY WITH FARMERS YOU MAY BE ELIGIBLE TO RECEIVE A DISCOUNT, CONTACT YOUR AGENT TODAY.

**IMPORTANT- D-O N-O-T P-A-Y T-H-I-S N-O-T-I-C-E
PREMIUM WILL BE BILLED. ACCT # F006067513-001-00001.**

State Required Notification:



Important Information About Your Renewal Policy

As you review the enclosed renewal policy, please note that the deductible that applies to loss or damage caused by windstorm or hail has changed. Your renewal policy includes one of the following endorsements:

BP0312 Windstorm Or Hail Percentage Deductibles;

E0224 Windstorm Or Hail Percentage Deductibles; or

J7125 Windstorm or Hail Deductible

We have increased your Windstorm or Hail deductible at renewal. The revised Windstorm or Hail deductible appears under the **PROPERTY, INLAND MARINE AND CRIME COVERAGES AND LIMITS** section of your policy Declarations. This deductible change represents a reduction in coverage on your policy.

This notice provides a summary of the changes to your policy; it is not a part of your insurance contract. It is not a substitute for reviewing your policy. Please review your policy and its attached endorsements for complete information.

If you have any questions, please contact your Farmers® agent.