

**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
1140 N Main St, 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 Richardson Square Condominiums Association Inc. PO Box 1419 Crested Butte, CO 81224		
POLICY NUMBER 05-XW5203-01	POLICY EFFECTIVE DATE (Mo., Day, Yr.) 01/01/22	POLICY EXPIRATION DATE (Mo., Day, Yr.) 01/01/23
★ PROPERTY		
☒ Risks of Direct Physical Loss ☐ Named Perils \$ 2,500 Property Deductible		
PROPERTY COVERED	VALUATION OF COVERED PROPERTY	LIMIT OF INSURANCE
Building(s) <u>(Blanket Coverage)</u>	☒ Replacement Cost ☐ Actual Cash Value	\$ 1,298,753.00
Business Personal Property _____	☐ Replacement Cost	\$ _____
★ BUSINESSOWNERS LIABILITY AND MEDICAL EXPENSES		
COVERAGE	LIMIT OF INSURANCE	
Liability - Each Occurrence Limit	\$2,000,000	
Damage To Premises Rented To You - Any One Premises	\$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 <u>01/01/22</u>	☐ 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, & Separation of Insured, No Co- Insurance, Cancellation Clause 10 Days for Non-Payment, 30 Days for Any Other Reason		
DATE ISSUED 11/10/23	AUTHORIZED REPRESENTATIVE Clarie Broschinsky	