



VISTPOI-01

KATHYS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/22/2023

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.

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. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CCIG 155 Inverness Drive West Englewood, CO 80112	CONTACT NAME:		
	PHONE (A/C, No, Ext): (303) 799-0110	FAX (A/C, No): (303) 799-0156	
	E-MAIL ADDRESS: certificate@thinkccig.com		
INSURED Vista Pointe Townhome Assn C/O Mitch Powell 921 S. Dearborn Way Aurora, CO 80012-3735	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Arch Insurance Company		11150
	INSURER B : Federal Insurance Company		20281
	INSURER C :		
	INSURER D :		
	INSURER E :		
INSURER F :			

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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			PLE960105	3/15/2023	3/15/2024	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
			MED EXP (Any one person) \$ 5,000				
			PERSONAL & ADV INJURY \$ 1,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ Included
	OTHER:						HIRED NON OWNED \$ Included
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS ONLY		<input type="checkbox"/> NON-OWNED AUTOS ONLY				BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB		<input checked="" type="checkbox"/> OCCUR	G74554799	3/15/2023	3/15/2024	EACH OCCURRENCE \$ 15,000,000
	<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 15,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 0						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N <input type="checkbox"/> N/A						E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
A	Prop Ded *\$25,000			NHPRP0123100	3/15/2023	3/15/2024	Blanket Building 13,274,919
A	Special / 100% RC			NHPRP0123100	3/15/2023	3/15/2024	11 BLDGS / 47 UNITS

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: 4000-4051 E Geddes Circle; Centennial CO 80122

CONTINUED ON REVERSE

CERTIFICATE HOLDER

CANCELLATION

Proof of Coverage	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 



AGENCY CUSTOMER ID: VISTPOI-01

KATHYS

LOC #: 0

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY CCIG		NAMED INSURED Vista Pointe Townhome Assn C/O Mitch Powell 921 S. Dearborn Way Aurora, CO 80012-3735	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Continued on reverse

Policy NHPKG0003401 includes:

*2% Wind/Hail Deductible

Ordinance or Law: Cov A Included; Cov B & Cov C \$100,000

Equipment Breakdown

Backup - Sewers and Drains

General Liability includes Separation of Insureds clause

Actual Cash Value on roofs 15 years and equipment older than 25 years

Inflation guard is not available on policy. Property values are reviewed annually by the board with Core Logic

COVERAGE: Directors & Officers

INSURER: Great American Insurance Company

POLICY #: EPP5838653 Claims Made Prior & Pending Proceeding Date 2/16/04

EFFECTIVE: 03/15/23 - 03/15/24

LIMIT: \$1,000,000 / SIR \$1,000

COVERAGE: Fidelity/Crime/Employee Dishonesty (Includes Manager)

INSURER: Travelers Casualty and Surety Company of America

POLICY #: 105880890

EFFECTIVE: 03/15/23 - 03/15/24

LIMIT: \$250,000 / SIR \$2,500

The Association's Declarations includes:

Page 23, Article 8.2 states "Insurance obtained on the Units is not required to include improvements and betterments installed by Unit Owners". 8.1 (e) further states "Unit Owners may carry and are advised to carry other insurance on the Improvements and personal property in their Unit for their benefit..."

This coverage applies only to the named insured shown on the certificate and does not apply to any other property, business or association.

Cancellation condition is 10 days before the effective date of cancellation if cancelled for non-payment or 30 days before the effective date of cancellation if cancelled for any other reason.



155 Inverness Drive West
Englewood, CO 80112

o 303-799-0110

t 800-777-5035

f 303-799-0156

VISTA POINTE TOWNHOME ASSOCIATION 3/15/2023 – 3/15/2024 INSURANCE NEWSLETTER

Annually your Board of Directors purchases insurance for the townhome association that covers the buildings, personal property of the association, general liability on the common areas, fidelity coverage and directors and officer's coverage. As unit owners, it is important that you maintain your own insurance to cover unit items that are your responsibility as detailed in Vista Pointe Townhome Association's declarations, your personal property and liability exposures that are not covered under your association's master insurance policy.

If there were a covered property loss at Vista Pointe, the master association's policy would rebuild the basic structure. Page 22, Article 8.1 (e) defines the insurance responsibility for the Owner; specifically, "Unit Owners may carry and are advised to carry other insurance on the Improvements and personal property in their Unit...". This means we will rebuild to the original specifications of the developer but exclude any improvements made since original construction.

When obtaining an individual unit owner's insurance policy, if living in the unit, you need to obtain an HO6 (Condominium owner's) policy. The HO6 should include these five basic coverages: unit coverage, personal property coverage, liability coverage, loss of use and loss assessment. The unit coverage should cover items specified in the declarations as the responsibility of the unit owner including window treatments and any improvements/betterments made since original construction. Personal property coverage should include all furnishings and clothing. This coverage should be written on a replacement cost basis. Make sure the limit is adequate to cover the replacement of all your furniture, clothing, kitchen wares including dishes, pots and pans, CDs, towels and linens etc. The unit owner needs to purchase liability insurance for anything that occurs within their unit. When someone enters your unit, the liability exposure becomes yours. Loss of use applies when you have to vacate your home while it is being rebuilt/repared. We recommend an unlimited time period but if not available at least two years. Finally, loss assessment coverage applies if you are assessed by the association for an underinsured covered claim or the deductible portion of a claim. **The association has a \$25,000 property deductible and a 2% wind/hail deductible. If assessed for a wind/hail claim, each owner could be assessed \$5,655. To raise your loss assessment to \$10,000 should be a minimal charge. Make sure to check with your personal lines agent to see what is available and that there are no sub-limits or special endorsements needed to cover these deductibles.**

If renting the unit out, you need to purchase a rental condominium policy (landlord's policy). The landlord's policy should offer unit coverage, personal property coverage, liability coverage as well as a loss of rents in the event the unit must be vacated while it is being repaired/rebuilt.

We recommend that each unit owner take pictures or videos of the inside of your home and store them somewhere away from your home. In the event of a loss, this makes claims handling much easier.

If you have questions regarding the association's insurance you can reach our agent, Pat Wilderotter, at 720-212-2065. **To request a certificate of insurance, please email your request to certificate@thinkccig.com or fax your request to 303-799-0156 attn: HOA Dept.**