

Independence Square Condominium Homeowners Association
c/o Realty One, Inc.
1630 Carr Street, Suite D
Lakewood CO 80214
303.237.8000

Master Insurance Policy

Mortgage Certificate of Insurance or a Master Insurance Policy

Carrier: Travelers Casualty Insurance Company
Policy # 680-0K236396-19-42 Policy Period: 11/2/19-11/2/20

Broker Information:

Bonnie Dyson
Stailey Insurance Corporation
2084 S. Milwaukee Street
Denver, CO 80210

303.389.6508
303.759.2960 (fax)



One Tower Square, Hartford, Connecticut 06183

RENEWAL CERTIFICATE

COMMON POLICY DECLARATIONS
CONDOMINIUM PAC
BUSINESS: CONDO - 5-12 UN

POLICY NO.: 680-0K236396-19-42
ISSUE DATE: 09/06/2019

INSURING COMPANY:
TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA

1. NAMED INSURED AND MAILING ADDRESS:

INDEPENDENCE SQUARE
AND AS PER IL T8 00
C/O REALTY ONE, INC.
1630 CARR ST
STE D
LAKEWOOD CO 80214

2. POLICY PERIOD: From 11/02/2019 to 11/02/2020 12:01 A.M. Standard Time at your mailing address.

3. LOCATIONS:

PREM. NO.	BLDG. NO.	OCCUPANCY	ADDRESS (same as Mailing Address unless specified otherwise)
001	ALL	ROW HOMES AND DUPLEXS	4619 - 4699 INDEPENDENCE ST WHEAT RIDGE CO 80033

4. COVERAGE PARTS AND SUPPLEMENTS FORMING PART OF THIS POLICY AND INSURING COMPANIES

COVERAGE PARTS AND SUPPLEMENTS
Businessowners Coverage Part

INSURING COMPANY
ACJ

5. The COMPLETE POLICY consists of this declarations and all other declarations, and the forms and endorse -
ments for which symbol numbers are attached on a separate listing.

6. SUPPLEMENTAL POLICIES: Each of the following is a separate policy containing its complete provisions.

POLICY	POLICY NUMBER	INSURING COMPANY
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DIRECT BILL

7. PREMIUM SUMMARY:

Provisional Premium	\$	22,706.00
Due at Inception	\$	
Due at Each	\$	

NAME AND ADDRESS OF AGENT OR BROKER

COUNTERSIGNED BY:

STAILEY INSURANCE CORP
2084 S MILWAUKEE ST

G0355

DENVER

CO 80210

Authorized Representative

IL TO 25 08 01 (Page 1 of 01)

DATE: 09/06/2019

Office: DENVER CO DOWN



One Tower Square, Hartford, Connecticut 06183

BUSINESSOWNERS COVERAGE PART DECLARATIONS

CONDOMINIUM PAC

POLICY NO.: 680-0K236396-19-42

ISSUE DATE: 09/06/2019

INSURING COMPANY:

TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA

POLICY PERIOD:

From 11-02-19 to 11-02-20 12:01 A.M. Standard Time at your mailing address

FORM OF BUSINESS: CORPORATION

COVERAGES AND LIMITS OF INSURANCE: Insurance applies only to an item for which a "limit" or the word "included" is shown.

COMMERCIAL GENERAL LIABILITY COVERAGE

OCCURRENCE FORM

	LIMITS OF INSURANCE	
General Aggregate (except Products-Completed Operations Limit)	\$	4,000,000
Products-completed Operations Aggregate Limit	\$	4,000,000
Personal and Advertising Injury Limit	\$	2,000,000
Each Occurrence Limit	\$	2,000,000
Damage to Premises Rented to You	\$	300,000
Medical Payments Limit (any one person)	\$	5,000

BUSINESSOWNERS PROPERTY COVERAGE

DEDUCTIBLE AMOUNT: Businessowners Property Coverage: \$ 5,000 per occurrence.
Building Glass: \$ 5,000 per occurrence.

BUSINESS INCOME/EXTRA EXPENSE LIMIT: Actual loss for 12 consecutive months

Period of Restoration-Time Period: Immediately

ADDITIONAL COVERAGE:

Other additional coverages apply and may be changed by an endorsement. Please read the policy.

SPECIAL PROVISIONS:

**COMMERCIAL GENERAL LIABILITY COVERAGE
IS SUBJECT TO A GENERAL AGGREGATE LIMIT**

MP T0 01 02 05 (Page 1 of 2)

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EFFECTIVE DATE: 11/02/2019

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LISTING OF FORMS, ENDORSEMENTS AND SCHEDULE NUMBERS

THIS LISTING SHOWS THE NUMBER OF FORMS, SCHEDULES AND ENDORSEMENTS
BY LINE OF BUSINESS

*	PN U3 20 04 19	LIBERALIZATION LETTER - GENERAL LIABILITY PRODUCT MODERNIZATION
	IL T0 19 02 05	COMMON POLICY DECLARATIONS
*	IL T0 25 08 01	RENEWAL CERTIFICATE
*	MP T0 01 02 05	BUSINESSOWNERS COVERAGE PART DECLARATIONS
*	IL T8 01 01 01	FORMS ENDORSEMENTS AND SCHEDULE NUMBERS
	IL T3 15 09 07	COMMON POLICY CONDITIONS

BUSINESSOWNERS

	MP T1 30 02 05	TABLE OF CONTENTS - BUSINESSOWNERS COVERAGE PART - DELUXE PLAN
	MP T1 02 02 05	BUSINESSOWNERS PROPERTY COVERAGE SPECIAL FORM
	MP T1 03 02 05	AMENDATORY PROVISIONS CONDOMINIUM ASSOCIATION COVERAGE
*	MP T1 75 03 06	WINDSTORM OR HAIL PERCENTAGE DEDUCTIBLES
*	MP T3 63 03 15	POWER PAC PREMIER ENDORSEMENT
	MP T3 25 01 15	FEDERAL TERRORISM RISK INSURANCE ACT DISCLOSURE
	MP T3 50 11 06	EQUIPMENT BREAKDOWN - SERVICE INTERRUPTION LIMITATION
	MP T3 56 02 08	AMENDATORY PROVISIONS - GREEN BUILDING AND BUSINESS PERSONAL PROP COV ENHANCEMENTS
*	MP T3 23 08 06	FUNGUS, ROT, BACTERIA AND OTHER CAUSES OF LOSS CHANGES
*	MP T3 36 02 05	EQUIPMENT BREAKDOWN EXCLUSION
	MP T9 54 02 05	EMPLOYEE DISHONESTY AND FORGERY OR ALTERATION EXCLUSION

COMMERCIAL GENERAL LIABILITY

*	CG T0 34 02 19	TABLE OF CONTENTS - COMMERCIAL GENERAL LIABILITY COVERAGE FORM CG T1 00 02 19
*	CG T1 00 02 19	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
*	CG D2 37 02 19	EXCLUSION - REAL ESTATE DEVELOPMENT ACTIVITIES - COMPLETED OPERATIONS
*	CG D3 09 02 19	AMENDATORY ENDORSEMENT - PRODUCTS-COMPLETED OPERATIONS HAZARD
	CG D2 03 12 97	AMEND - NON CUMULATION OF EACH OCC
*	CG D8 42 02 19	XTEND ENDORSEMENT FOR SMALL BUSINESSES
*	MP T1 25 11 03	HIRED AUTO AND NON-OWNED AUTO LIABILITY
	CG D2 43 01 02	FUNGI OR BACTERIA EXCLUSION
	CG D4 21 07 08	AMEND CONTRAL LIAB EXCL - EXC TO NAMED INS
	CG D6 18 10 11	EXCLUSION - VIOLATION OF CONSUMER FINANCIAL PROTECTION LAWS
	CG D0 76 06 93	EXCLUSION - LEAD
*	CG D1 42 02 19	EXCLUSION - DISCRIMINATION

* TEXT IN THIS FORM HAS CHANGED, OR THE FORM WAS NOT ON POLICY BEFORE.