Garden Park 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: Westfield National Insurance Company - Policy Period: 8/15/21 - 8/15/22

Broker Information:

TruNorth Companies, L.C. 275 S. Main Street, Suite 100 Longmont, CO 80501

Brett Bandy

303.776.5122 303.776.5495 (fax)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/3/2021

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).

	is certificate does not confer rights t	O tile	cen	ilicate noider in lieu of st								
	DUCER				CONTA NAME:	RM Longm	ont				589	
TrueNorth Companies, L.C. 275 S Main Street, Suite 100						DUONE					303-776-5495	
Longmont CO 80501						E-MAIL ADDRESS: coservicemanager@truenorthcompanies.com						
3						INSURER(S) AFFORDING COVERAGE						
						INSURER A: Westfield National Insurance Company					24120	
INSURED GARDPAR-01						INSURER B:					24120	
Garden Park Homeowners Association						INSURER C:						
c/o Realty One, Inc. 1630 Carr Street, Ste. D					INSURER D :					-		
Lakewood CO 80214						INSURER E :						
COVERAGES CERTIFICATE NUMBER: 329392511						INSURER F:						
			REVISION NUMBER: /E 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,												
l CI	ERTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	PERT	AIN.	THE INSURANCE AFFORDI	ED BY	THE POLICIES	S DESCRIBED	HEREIN IS SUI	BJECT TO	ALL T	HE TERMS,	
			SUBR		BEEN F		POLICY EXP					
INSR TYPE OF INSURANCE			WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	-	LIMIT	s		
A	X COMMERCIAL GENERAL LIABILITY			BOP5322072		8/15/2021	8/15/2022	DAMAGE TO RENT		\$ 1,000,	000	
CLAIMS-MADE X OCCUR								PREMISES (Ea occu		\$ 100,000		
							MED EXP (Any one	person)	\$5,000			
								PERSONAL & ADV	INJURY	\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREC	SATE	\$ 2,000,000		
	POLICY PRO- X LOC							PRODUCTS - COMP/OP AGG		\$ 2,000,000		
	OTHER:									\$		
Α	AUTOMOBILE LIABILITY			BOP5322072		8/15/2021	8/15/2022	COMBINED SINGLE LIMIT \$ 1,0		\$ 1,000,	000	
	ANY AUTO							BODILY INJURY (Per person) \$		\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident) \$		\$		
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	SE .	\$		
										\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$		\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$		
	DED RETENTION\$									S		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER	<u> </u>		
	NYPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDE		\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A						E.L. DISEASE - EA EMPLOYEE		S		
								E.L. DISEASE - POLICY LIMIT		\$		
Α	Property			BOP5322072		8/15/2021	8/15/2022	1,804,137	JOT LIVII	Ψ		
							40.000.00000000000000000000000000000000					
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101. Additional Remarks Schedu	le, may b	e attached if more	space is require	ed)				
Bui	ding is on Replacement Cost.							· - /				
3 ui	ation%- 2% hits											
Pro	perty Manager is included as Additional	Insu	red.									
Equipment Breakdown is included. Wind/Hail- 1%												
Walls-out												
Ordinance or Law: Coverage 1 Applies, Coverage 2 and 3 Combined- \$50,000												
<u></u>	TITICATE UOI DED				0.000	NEL 1 4						
CERTIFICATE HOLDER						CANCELLATION						
						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE						
					THE	THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN						
l		ACCORDANCE WITH THE POLICY PROVISIONS.										

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Realty One, Inc. 1630 Carr Street, Ste. D

Lakewood CO 80214

AUTHORIZED REPRESENTATIVE