First & Harlan Carriage Homes Condominium 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

Policy Period: 11/29/24 - 11/29/25

Broker Information:

JJ Insurance Tracy Warren

303.552.3758 303.733.5091 (fax)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/Y YY) 12/9/2024

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).

this cert	ificate does not confer rights to the certificate holder in lieu of s	uch endorsement(s).					
PRODUCER		CONTACT Tracy Warren					
JJ Insuran 880 Buchte		PHONE (A/C, No, Ext): (303) 552-3758 FAX (A/C, N	lo): (303) 7	33-5091			
Denver, CO 80210		E-MAIL ADDRESS tracy@jj-insurance.com					
		INSURER(S) AFFORDING COVERAGE		NAIC #			
		INSURER A: The Standard Fire Insurance Compan	ıy	19070			
INSURED	First & Harlan Carriage Homes Condominiums Association, Inc C/O Realty One, Inc	INSURER B : GREENWICH INSURANCE COMPANY	1				
		INSURER C: Pennsylvania Manufactures' Association Ins	urance				
		INSURER D : TRAVELERS CASUALTY AND SURETY COMPANY OF A	MERICA	31194			
	1630 Carr Street, Suite D Lakewood, CO 80214	INSURER E :					
		INSURER F:					
COVERA	GES CERTIFICATE NUMBER:	REVISION NUMBER:	:				
INDICATE	TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW ED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFOR	ON OF ANY CONTRACT OR OTHER DOCUMENT WITH RES	SPECT TO	WHICH THIS			

NSR TR	SR TYPE OF INSURANCE INSD		TYPE OF INSURANCE ADDL SI				POLICY EXP	LIMITS		
Α	X	X COMMERCIAL GENERAL LIABILITY				(11111)	EACH OCCURRENCE	s	1,000,000	
		CLAIMS-MADE X OCCUR	Х	BIP-A2915608-24-42	11/29/2024	11/29/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000	
							MED EXP (Any one person)	\$	5,000	
							PERSONAL & ADV INJURY	\$	1,000,000	
	GEN	I'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000	
		POLICY PRO- JECT X LOC					PRODUCTS - COMP/OP AGG	\$	2,000,000	
63		OTHER:						\$		
	AUT	OMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO OWNED SCHEDULED					BODILY INJURY (Per person)	\$		
	AUTOS ONLY HIRED AUTOS ONLY AUTOS AUTOS						BODILY INJURY (Per accident) \$		
							PROPERTY DAMAGE (Per accident)	\$	_	
								\$		
В	X	UMBRELLA LIAB X OCCUR				11/29/2025	EACH OCCURRENCE	\$	5,000,000	
		EXCESS LIAB CLAIMS-MADE		PPP7505138	11/29/2024		AGGREGATE	\$	5,000,000	
		DED RETENTION \$						\$		
С	WOR	KERS COMPENSATION EMPLOYERS' LIABILITY					X PER OTH- STATUTE ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A			11/29/2025	E.L. EACH ACCIDENT	\$	1,000,000	
			.,,,,,				E.L. DISEASE - EA EMPLOYE	E \$	1,000,000	
					_	E.L. DISEASE - POLICY LIMIT	\$	1,000,000		
D	D Directors&Officers		106209530	11/29/2024	11/29/2025	Per Claim/Aggregate		1,000,000		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Proof of Insurance

CERTIFICATE HOLDER	CANCELLATION
Realty One Inc 1630 Carr Street, Ste D Lakewood, CO 80214	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
	They Warren



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 12/9/2024

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY PHONE (A/C, No, Ext): (303) 552-3758		COMPANY	-		_		
JJ Insuran 880 Buchte Denver, CO	el Blvd			The Standard Fire Inst	urance Company		
FAX (A/C, No): (30	3) 733-5091	E-MAIL ADDRESS: ti	acy@jj-insurance.com				
CODE:			SUB CODE:				
AGENCY CUSTOMER ID	#:FIRS&HA-)1					
INSURED	Inc	st & Harlan Carriage Homes Condominiums Association, C Realty One, Inc		LOAN NUMBER POLICY NUMBER BIP-A2915608-24-42			
	1630 Carr Street, Suite D Lakewood, CO 80214		D	11/29/2024	EXPIRATION DATE 11/29/2025	CONTINUED UNTIL TERMINATED IF CHEC	KED
				THIS REPLACES PRIOR EVIDENCE DATED:			

PROPERTY INFORMATION

LOCATION/DESCRIPTION Loc # 0, Bldg # 0, 32-86 Harlan Street and 11-89 Gray Street, Lakewood, CO 80226-2213

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	Х	SPECIAL		
	COVERAGE / PERILS	/ FORMS				AMOUNT OF INSURANCE	DEDUCTIBLE
Loc # 0, Bldg # 0 TIV Buildings - 33 Units Replacemen Building, Windstorm - 5% Per Buildi Equipment Breakdown - Included Pe Business Income with Extra Expens Ordinance or Law - Coverage A - Inc Ordinance Or Law Coverage B & C - Water/Sewage Pump, - Per Building Crime/Fidelity - Property Manager lis	ng er Building e - Actual Loss Sustained sluded Per Building	12 Months		-		\$8,281,100 \$8,281,100 \$100,000 \$100,000 \$25,000 \$150,000	25,00 5.00009 25,00 7 25,00 25,00 25,00 1,00
	¥7						

REMARKS (Including Special Conditions)

Special Conditions:

Coverage applies per the associations governing documents:

"The Association's insurance policy shall be a "bare walls" policy that will rebuild the building structures. The Association's insurance policy shall exclude the finished surfaces of perimeter and partition walls, floors, and ceilings within the Unit (including, but not limited to paint, wallpaper, panellng, other wall coverings and window coverings, tile, carpet and any floor covering). The Association's policy shall also exclude all cabinetry, fixtures, interior appliances and improvements and betterments to Units made by Owners.

Proof of Insurance.

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INT	EREST									
NAME AND ADDRESS			ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE					
		X	MORTGAGEE							
Realty One Inc 1630 Carr Street, Ste D Lakewood, CO 80214		LOA	LOAN#							
	AUT	THORIZED REPRESENTATIV	Æ							
		3	acy Warren							