Brentwood Estates Townhome 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: 2/9/25 - 2/9/26

Broker Information:

JJ Insurance Corporation Tracy Warren

303.552.3758

TWARREN



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/17/2025

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.

lf th	SUBROGATION IS WAIVED, subject is certificate does not confer rights to	ot to	the certif	terms and conditions o ficate holder in lieu of s	f the pol uch end	licy, certain lorsement(s)	policies may	require an e	ndorsemer	nt. As	statement on
PRO	DUCER				CONTAC	CT Tracy W	arren				
JJ Insurance					PHONE (202) FEO 27F0 FAX						
	Buchtel Blvd ver, CO 80210					_{ss:} tracy@jj		com	(A/C, No):		
	101, 00 00210				ADDRE	The Commission of the Commissi	*****************************			***************************************	
					INSURER(S) AFFORDING COVERAGE INSURER A : St. Paul Mercury Insurance Company					NAIC #	
INSU	DEN		INSURER B . TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA					24791			
11430	Brentwood Estates Townho	mes /	Asso	ciation Inc	1		- CAOUALII A	TO CONETT COM	ANT OF AME	MUA	31194
	c/o Realty One, Inc				INSURE	RC:					
	1630 Carr Street, Suite D				INSURE	RD:					
	Lakewood, CO 80214				INSURE	RE:					
					INSURE	RF:					1
	The state of the s		***********	NUMBER:		250		REVISION N			
C	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUII PERT	REME ΓΑΙΝ.	NT, TERM OR CONDITION THE INSURANCE AFFOR	ON OF A	NY CONTRA	CT OR OTHER	R DOCUMENT I	MITH RESPE	ECT TO	WHICH THIS
INSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)		LIMIT	'S	
A	X COMMERCIAL GENERAL LIABILITY	1000	1110			(MARCO DITTI	(MIGI/DD/1111)	EACH OCCURR		s	2,000,000
	CLAIMS-MADE X OCCUR			BIP-7X776609-25-42		2/9/2025	2/9/2026	DAMAGE TO RE	NTED	S	300,000
								MED EXP (Any o	ne person)	s	5,000
								PERSONAL & A	OV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGG	REGATE	s	4,000,000
	X POLICY PRO- OTHER:							PRODUCTS - CO	OMP OP AGG	s	4,000,000
	AUTOMOBILE LIABILITY							COMBINED SIN (Ea accident)	GLE LIMIT	s	**************************************
	ANY AUTO							BODILY INJURY	(Por porcon)	s	
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY	n - thousand and a fam.		***************************************
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAM			
	AUTOS ONLY							(Per accident)	*	S	
	UMBRELLA LIAB OCCUR							E + 011 0001 KIII		S	
	EXCESS LIAB CLAIMS-MADE							EACH OCCURR	ENGE	\$	
	DED RETENTION \$	1						AGGREGATE		\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			***************************************				PER STATUTE	OTH-	\$	
	AND EMPLOYERS' LIABILITY ANY DEODEST OF PARTIES (EXECUTIVE Y/N)								i ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A			and the same of th			E.L. EACH ACCI		S	
	If yes, describe under							E.L. DISEASE - I		i	
В	DESCRIPTION OF OPERATIONS below Directors&Officers			107576208		2/9/2025	2/9/2026	Per Claim/A		S	1 000 000
	Directors&Officers					2/3/2023	2/3/2020	rei CiamirA	ggregate		1,000,000
Proc	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI of Insurance.	LES (A	CORD	101, Additional Remarks Sched	lule, may b	e attached if mor	e space is requii	red)			
CEI	RTIFICATE HOLDER			***************************************	CANC	ELLATION					
	Realty One, Inc 1630 Carr Street, Suite D Lakewood, CO 80214				SHO	ULD ANY OF	N DATE TH	ESCRIBED PO IEREOF, NOT CY PROVISIONS	ICE WILL		
	Lakewood, CO 80214				AUTHOR	RIZED REPRESE	NTATIVE		20 000		
					Jan	Alexander					



EVIDENCE OF PROPERTY INSURANCE

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

DATE (MM/DD/YYYY) 2/17/2025

ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODU AGENCY PHONE (A/C, No, Ext): (303) 552-3758	COMPANY					
JJ Insurance 880 Buchtel Blvd Denver, CO 80210	Lexington Insurance C	ompany				
FAX (A/C. No): (303) 733-5091 E-MAIL ADDRESS: tracy@jj-insurance.com	and a specialistic report					
CODE: SUB CODE:	v), selection*					
AGENCY CUSTOMER ID #: BRENEST-01	44,141,013,441,141					
INSURED Brentwood Estates Townhomes Association Inc c/o Realty One, Inc	LOAN NUMBER		POLICY NUMBER WKFCC-05281-02			
1630 Carr Street, Suite D Lakewood, CO 80214	EFFECTIVE DATE 2/9/2025	EXPIRATION DATE 2/9/2026		O UNTIL ED IF CHECKED		
	THIS REPLACES PRIOR EVID	ENCE DATED:	name tari chi il Arii ili si nakiminin An processi al accioni sa delenci caninani			
PROPERTY INFORMATION						
LOCATION/DESCRIPTION Loc # 1, Bldg # 1, 605 - 677 Brentwood Street, Lakewood, CO 80214						
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PISUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SU	F ANY CONTRACT OR OTH ERTAIN, THE INSURANCE AF	HER DOCUMENT \ FORDED BY THE P	VITH RESPECT TO OLICIES DESCRIB	WHICH THIS ED HEREIN IS		
COVERAGE INFORMATION PERILS INSURED BASIC	BROAD X SPECIA					
COVERAGE / PERILS / FORMS		The second second	UNT OF INSURANCE	DEDUCTIBLE		
Loc # 1, Bldg # 1 Building RC Co-Ins Waived, Special Incl Theft 28 Units Building, Windstorm - 5% Per Building Business Income with Extra Expense and Rental Value Business Personal Property Back up of Water and Sewer Building Ordinance or Law - Coverage A Included Building Ordinance or Law Coverage B & C Combined Crime - Property Manager Included as an Additional Insured			\$12,093,386 \$12,093,386 \$70,000 \$60,500 \$100,000 \$100,000 \$75,000	100,000 5,0000% 100,000 25,000		
REMARKS (Including Special Conditions)						
Special Conditions: Coverage applies per the associations governing documents:						
"The Association's insurance policy shall be a "walls out" policy that will Association's insurance policy shall exclude the finished surfaces of peri limited to paint, wallpaper, panellng, other wall coverings and window covexclude all cabinetry, fixtures, interior appliances and improvements and Waiver of Subrogation applies. SEE ATTACHED ACORD 101	meter and partition walls, floo	rs, and ceilings with oor covering). The A	in the Unit (includi	na, but not		
CANCELLATION						
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE OF DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	ANCELLED BEFORE THE	EXPIRATION DAT	E THEREOF, NOT	ICE WILL BE		
ADDITIONAL INTEREST						
NAME AND ADDRESS	X ADDITIONAL INSURED	LENDER'S LOSS PA	YABLE LOS	S PAYEE		
	MORTGAGEE					
Realty One, Inc	MORTGAGEE LOAN #					
Realty One, Inc 1630 Carr Street, Suite D	LOAN#	VE				
Realty One, Inc	LOAN # AUTHORIZED REPRESENTATI	VE				
Realty One, Inc 1630 Carr Street, Suite D	AUTHORIZED REPRESENTATI	VE				

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY		NAMED INSURED			
JJ Insurance		Brentwood Estates Townhomes Association Inc			
POLICY NUMBER		1630 Carr Street, Suite D			
WKFCC-05281-02		Lakewood, CO 80214			
CARRIER NAIC CODE Lexington Insurance Company					
		EFFECTIVE DATE: 02/09/2025			
		EFFECTIVE DATE: 02/09/2025			

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PROPERTY INSURANCE

Special Conditions:

Lexington Ins Company is on the \$5,000,000 primary Layer, Policy #WKFCC-05281-01 Underwriters at Lloyds is on the \$7,223,936 Excess Layer - Policy #WKFCXS-01484-00 2/9/2025 to 2/9/2026.

Proof of Insurance.