Brookside 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: 8/15/24 - 8/15/25

Broker Information:

Tracy Warren
JJ Insurance
880 Buchtel Blvd.
Denver, CO 80210

303.552.3758



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/21/2024

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).

	nis certificate does not confer rights t	o the cert	ificate holder in lieu of su	ch endorsement(s CONTACT Tracy W).	•		
JJ Insurance 880 Buchtel Blvd Denver, CO 80210				PHONE (A/C, No, Ext): (303) 552-3758 FAX (A/C, No): E-MAIL EDDREss: tracy@jj-insurance.com				
					* * *	RDING COVERAGE		NAIC#
				INSURER A : Auto Owners Insurance				18988
Brookside Condominium Association, Inc c/o Realty One, Inc 1630 Carr Street, Suite D Lakewood, CO 80214				INSURER B : GREAT AMERICAN INSURANCE COMPANY				16691
				INSURER C:				
				INSURER D :				
				INSURER E : INSURER F :				
			NUMBER:			REVISION NUMBER:		
C	HIS IS TO CERTIFY THAT THE POLICII IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERTAIN, POLICIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORI LIMITS SHOWN MAY HAVE	N OF ANY CONTRA DED BY THE POLIC BEEN REDUCED BY	CT OR OTHER IES DESCRIE PAID CLAIMS	R DOCUMENT WITH RESPI	ECT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	rs	
Α	X COMMERCIAL GENERAL LIABILITY				(AMAGE)	EACH OCCURRENCE	s	2,000,000
	CLAIMS-MADE X OCCUR		74234229-24	8/15/2024	8/15/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	s	300,000
					**************************************	MED EXP (Any one person)	\$	10,000
						PERSONAL & ADV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	4,000,000
	X POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:					HIRED NONOWNED	s	2,000,000
10-11	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO					BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS					1		
	HIRED NON-OWNED AUTOS ONLY	l				BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)		
	AUTOS CINET					(Per accident)	\$	
	UMBRELLA LIAB OCCUR					EACH OCCUPRENCE	\$	
	EXCESS LIAB CLAIMS-MADE					EACH OCCURRENCE	\$	
	DED RETENTION\$	•				AGGREGATE	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER	\$	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y / N							
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT	\$	
						E.L. DISEASE - EA EMPLOYEE \$		
В	Directors& Officers		EPPE460135-03	8/15/2024	8/15/2025	Per Claim /Aggregate	\$	1,000,000
						or ordini /Aggregate		1,000,000
DES ² roc	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC of Insurance.	LES (ACORE	0 101, Additional Remarks Schedu	le, may be attached if mo	re space is requi	red)	mana a de	
CF	RTIFICATE HOLDER			CANCELLATION				
				CANCELLATION			-	
Realty One Inc 1630 Carr Street, Suite 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.				
Euromood, 00 00214				AUTHORIZED REPRESENTATIVE				
				Tracy Warren				



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 8/21/2024

PHONE (20	3) 552-3758					
AGENCY (A/C, No, Ext): (30		COMPANY	7.0.2000			
JJ Insurance 880 Buchtel Blvd Denver, CO 80210	Arch Specialty Insura	nce Company				
FAX (A/C, No): (303) 733-5091 E-MAIL ADDRESS: tracy@jj						
CODE:						
AGENCY CUSTOMER ID #: BROOCON-01	ODE.					
NSURED Brookside Condominium Association, Inc c/o Realty One, Inc 1630 Carr Street, Suite D		LOAN NUMBER	LOAN NUMBER POLICY NUMBER NHPRP0036003			
Lakewood, CO 80214		EFFECTIVE DATE	EXPIRATION DATE			
		8/15/2024	8/15/2025	CONTINUE! TERMINATE	UNTIL ED IF CHECKED	
	THIS REPLACES PRIOR EVI	THIS REPLACES PRIOR EVIDENCE DATED:				
PROPERTY INFORMATION						
LOCATION/DESCRIPTION Loc # 1, Bldg # 1, 8900 Fox Drive, Thorton, CC Loc # 2, Bldg # 1, 8910 Fox Drive, Thorton, CC Loc # 3, Bldg # 1, 8920 Fox Drive, Thorton, CC	80206	2				
THE POLICIES OF INSURANCE LISTED NOTWITHSTANDING ANY REQUIREMENT EVIDENCE OF PROPERTY INSURANCE SUBJECT TO ALL THE TERMS, EXCLUSION	, TERM OR CONDITION O MAY BE ISSUED OR MAY PE	OF ANY CONTRACT OR OT ERTAIN, THE INSURANCE A ICH POLICIES. LIMITS SHO	THER DOCUMENT N FFORDED BY THE P WN MAY HAVE BEEN	WITH RESPECT TO	WHICH THIS	
COVERAGE INFORMATION PI	ERILS INSURED BASIC	BROAD X SPECI	AL			
Loc # 1, Bldg # 1	COVERAGE / PERILS / FORMS		AMO	UNT OF INSURANCE	DEDUCTIBLE	
Building, Special, Agreed Amount - 6 Units Building, Windstorm Business Income with Extra Expense and Re Equipment Breakdown Broad - Included Combined Building Ordinance or Law and In Backup - Sewers and Drains - All Locations Crime - Property Manager Included as an Ad SEE ATTACHED ACORD 101	ental Value ALS creased Cost of Construction	n - All Locations		\$1,558,000 \$1,558,000 \$21,600 \$300,000 \$100,000 \$100,000	10,000 2.0000% 7: 10,000 10,000 1,000	
REMARKS (Including Special Conditions	:)					
Special Conditions: Coverage is provided based on Governing Do A. policy of property insurance in an amount		typlus (i.e. 4009/ of the august	mt IIDaula annu nt	411		
and other items normally excluded from cove and if necessary, an "Increased Cost Constru Inflation Guard does not apply. Values are re	rage" of the Improvements Id action Endorsement" or equiv	ocated on the Common Area	s with a "Demolition	Endorsement" or it	, excavation s equivalent,	
Proof of Insurance.						
CANCELLATION						
SHOULD ANY OF THE ABOVE DES DELIVERED IN ACCORDANCE WITH THE	CRIBED POLICIES BE C POLICY PROVISIONS.	ANCELLED BEFORE THE	EXPIRATION DAT	E THEREOF, NOT	ICE WILL BE	
ADDITIONAL INTEREST						
NAME AND ADDRESS		ADDITIONAL INSURED MORTGAGEE	LENDER'S LOSS PA	YABLE LOS	S PAYEE	
Realty One, Inc		LOAN #				
1630 Carr Street, Suite D		AUTHODIZED DEDDESCUZA				
Lakewood, CO 80214		AUTHORIZED REPRESENTAT	IVE			
		Tracy Warren				

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY JJ Insurance POLICY NUMBER NHPRP0036003		NAMED INSURED Brookside Condominium Association, Inc c/o Realty One, Inc 1630 Carr Street, Suite D Lakewood, CO 80214		
Arch Specialty Insurance Company		EFFECTIVE DATE: 08/15/2024		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

Coverage Information:

Loc # 2, Bldg # 1

Building, Special , Agreed Amount, 12 Units Co-Ins Waived, Amount of Insurance: \$2,676,000, Deductible: 10,000

Building, Windstorm, Amount of Insurance: \$2,676,000, Deductible: 2.0000%

Business Income with Extra Expense and Rental Value, ALS, Amount of Insurance: \$43,200, Deductible: 72

Equipment Breakdown Broad Included, Deductible: 10,000

Loc # 3, Bldg # 1

Building, Special Agreed Amount, 6 Units Co-Ins Waived, Amount of Insurance: \$1,652,000, Deductible: 10,000

Building, Windstorm, Amount of Insurance: \$1,652,000, Deductible: 2,0000%

Business Income with Extra Expense and Rental Value, ALS, Amount of Insurance: \$21,600, Deductible: 72

Equipment Breakdown, Broad Included, Deductible: 10,000