




CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
10/13/2021

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.

PRODUCER  Dax Mattox 1915 Alpine Plz Unit C-2 Steamboat Spr, CO 80487-2112		CONTACT NAME: Dax Mattox PHONE (A/C No. Ext): (970) 879-7773 FAX (A/C No.): (970) 879-7775 E-MAIL ADDRESS: dax.mattox.nqxt@statefarm.com PRODUCER CUSTOMER ID:	
INSURED Stagecoach Townhouse Assoc PO Box 774444 Steamboat Spr, CO 80477-4444		INSURER(S) AFFORDING COVERAGE INSURER A: State Farm Fire and Casualty Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 25143

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
REFER TO ACORD 101.

THIS IS TO CERTIFY THAT 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 CERTIFICATE 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.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
<input checked="" type="checkbox"/>	PROPERTY	96-BC-G636-4	10/15/2021	10/15/2022	BUILDING	\$	
	CAUSES OF LOSS				DEDUCTIBLES	PERSONAL PROPERTY	\$
	BASIC				BUILDING \$25,000	BUSINESS INCOME	\$ SEE ACORD 101
	BROAD				CONTENTS	EXTRA EXPENSE	\$ SEE ACORD 101
<input checked="" type="checkbox"/>	SPECIAL					RENTAL VALUE	\$ SEE ACORD 101
	EARTHQUAKE					<input checked="" type="checkbox"/> BLANKET BUILDING	\$ \$36,984,000
	WIND					BLANKET PERS PROP	\$
	FLOOD					BLANKET BLDG & PP	\$
					\$		
					\$		
	INLAND MARINE	TYPE OF POLICY				\$	
	CAUSES OF LOSS	POLICY NUMBER				\$	
	NAMED PERILS					\$	
						\$	
	CRIME					\$	
	TYPE OF POLICY					\$	
						\$	
<input checked="" type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$	
						\$	
						\$	
						\$	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
REFER TO ACORD 101.

CERTIFICATE HOLDER**CANCELLATION**

Double H Management PO Box 774444 Steamboat Spr, CO 80477-4444	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
	IF SIGNATURE IS REQUIRED, PLEASE CONTACT AGENT.



ADDITIONAL REMARKS SCHEDULE

AGENCY Dax Mattox		NAMED INSURED Stagecoach Townhouse Assoc	
POLICY NUMBER 96-BC-G636-4			
CARRIER State Farm Fire and Casualty Company	NAIC CODE 25143	EFFECTIVE DATE: 10/15/2021	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 24 **FORM TITLE:** Certificate of Property Insurance

Unit Owner:

STAGECOACH TOWNHOUSE ASSOC - PO Box 774444 - Steamboat Spr, - CO - 80477-4444 - Unit Loan Number:N/A - Number Of Units: 0090

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

CMP-4100 Businessowners Coverage Form
 FE-6999.3 Terrorism Insurance Cov Notice
 CMP-4862 Building Ordinance Or Law Cov
 CMP-4710 Emp Dishonesty \$25,000
 CMP-4705.2 Loss of Income & Extra Expnse
 CMP-4561.1 Policy Endorsement

Forms, Options and Endorsements:

CMP-4206.1 Amendatory Endorsement
 CMP-4815 Dir & Officers \$1,000,000
 CMP-4550 Residential Community Assoc
 CMP-4508 Money and Securities
 FE-3650 Actual Cash Value Endorsement

Coverages:

Business Liability \$1,000,000
 Medical Payments \$5,000
 Products-Completed Operations \$2,000,000
 General Aggregate \$2,000,000

Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association bylaws including the following types of property within a unit, regardless of ownership:

1. Fixtures, improvements and alterations that are a part of the building or structure; and
2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.

Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or to remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Not Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value) - These endorsements describe what the term "actual cash value" means where used in the policy. **However, these endorsements do not change any replacement cost coverage provided by the policy.**

This policy provides coverage on a standalone/individual condominium association.

Commercial General Liability

State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.

Loss of Rents, Loss of Income and Extra Expense

If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.