

A Custom Insurance Program

PREPARED FOR:

Meadow Creek Condominiums of Vail

PO Box 6130
Avon, CO 81620

PRESENTED BY:

MEGHAN WILSON, CIC



201 Centennial Dr., Fourth Floor
Glenwood Springs, CO 81601
Phone 970-945-9111 or Toll Free 800-255-6390
Fax 970-945-2350



We are pleased to present this proposal, which is valid until 06/28/19.

CAI GOLD SPONSOR OF THE ROCKY MOUNTAIN CHAPTER



Your Neil-Garing team is available to assist you when you need to make a change to your policy, require claim service, and/or have any questions. The primary duties are listed below for each individual; however, all of these members are available at any time for any issue.

Meghan Wilson, CIC, Commercial Lines Producer

Phone extension 147

meghanw@mtnwst.com

- Visits to review and discuss operational changes in your organization
- Presentation of coverage recommendations and competitive pricing options
- Review of contracts and provides insurance recommendations to your firm on an ongoing basis
- Analysis of claims data
- Offers risk management recommendations

Stefan Hodgden, Account Executive

Phone extension 141

stefanh@mtnwst.com

- Serves as your primary contact for insurance solutions
- In-house review and analysis of coverage
- Manages the insurance placement process to provide coverage options and competitive pricing

Dawndrea Morse, Account Manager

Phone extension 158

dawndream@mtnwst.com

- Serves as additional contact for insurance questions and assistance
- Primary contact for billing and general accounting questions, and policy changes
- Receives and reviews certificate of insurance and evidence of insurance requests to be certain adequate coverage and limits are in effect. Coordinates issuance of certificates and evidence forms within 24 hours of receipt
- Serves as contact for filing of new claims
- Monitors claim status to conclusion

Employee Benefits Department

- Provides expertise and creative solutions for employer groups with 20 or more benefits-eligible employees
- Scope of service includes group medical, dental, vision, life and disability benefit plans
- Help clients with employee paid supplemental plans such as accident and critical illness

Personal Insurance

- Provides a wide range of personal insurance products that include homeowner's, automobile, recreational vehicles and personal umbrellas
- Offers a complimentary review of your current personal insurance program

In the event the individuals listed are unavailable, we have a full staff at your service. Please contact our office and ask our friendly receptionists to direct you to the appropriate team member. We also offer a full range of products for your employee benefits needs, as well as your personal insurance. We look forward to a successful partnership providing you with your insurance needs!

COVERAGE TYPE

Bare Walls As Originally Conveyed All-In

PROPERTY COVERAGE // Munich Reinsurance

2500-2753 Kinnikinnick Road / Vail, CO / 81657			Location #1 Blanket Limits	Buildings #1-12
Coverage	Limit	Co-Insurance	Valuation	Deductible
Building	\$20,380,000**	Waived	Guaranteed Replacement Cost	\$5,000**
Loss of Association Income	\$260,000	Waived	Actual Loss Sustained	N/A
Building Ordinance or Law – Coverage A	Included	Waived	Guaranteed Replacement Cost	N/A
Building Ordinance or Law	\$300,000	Waived	Actual Cost	N/A
Building Ordinance or Law	\$300,000	Waived	Increased Replacement Cost	N/A
Backup - Sewers & Drains	Included	Waived	Guaranteed Replacement Cost	\$5,000
Equipment Breakdown	Included	Waived	Guaranteed Replacement Cost	\$5,000

****Ratable Limit only – Guaranteed Replacement Cost applies.**

****Additions/Upgrades/Improvements: if any additions, upgrades, or improvements are made to the Association's portion of the buildings which increase the value of the building(s) by more than \$25,000, the new value must be reported to the carrier – otherwise Guaranteed Replacement Cost will not apply.**

****Per-unit ice damming deductible applies.**

Standard Property insurance does not include Flood, Earthquake or Earth Movement coverage.

PLEASE NOTE: Earthquake and Earth Movement coverage is available through a Difference In Conditions policy, but due to the proximity of some Association buildings to the 100-year flood plain, the carrier is not able to include Flood coverage within the DIC policy. Separate, per-building Flood policies are available from the FEMA National Flood Program. Quotes are available upon request.

Ordinance or Law Coverage Explanation

In the event of covered damage to a building, the owner may have three ordinance/law-related exposures not covered by the usual commercial property form:

Coverage A: Coverage for loss to the undamaged portion of the building

- If the loss is only PARTIAL but the remaining part of the building must be demolished, this covers the value of the undamaged portion. Coverage A is usually included within the limit of insurance showing in the declaration as applicable to the covered building property. Coverage A does not increase the limit of insurance and it does not cover cost to demolish.

Coverage B: Coverage for demolition cost

- If the loss is only PARTIAL but the remaining part of the building must be demolished, this covers the cost to demolish the undamaged portion. This coverage will pay the cost to demolish and clear the site of undamaged parts of the property caused by enforcement of building, zoning or land use, and ordinance or law.

Coverage C: Coverage for the increased cost of construction

- This coverage will pay for the increased cost to repair, reconstruct or remodel damage or undamaged portions of the building when the increased cost is the consequence of building, zoning or land use laws.

GENERAL LIABILITY	
Coverage	Proposed Munich Reinsurance
General Aggregate	N/A
Per Occurrence	\$1,000,000
Products/Completed Operations Aggregate	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Fire Legal Liability	\$1,000,000
Medical Payments	\$5,000
Hired and Non-Owned Auto	\$1,000,000

Exposure Type	Premium Basis Exposure
Residential Condominiums	(Per Unit) 64

No Deductible – Occurrence Form

Today's litigious society requires careful business planning. Accident victims look for someone else to pay for bodily injury and property damage. Even if a suit is eventually dismissed or proved groundless, the high cost of defense can bankrupt even the most secure business.

DIRECTORS & OFFICERS LIABILITY	
Coverage	Proposed Munich Reinsurance
General Aggregate Limit	\$1,000,000
Per Occurrence Limit	\$1,000,000
Self-Insured Retention (Deductible)	\$0

This pays on behalf of the insured director or officer for loss arising from claims during the policy period by reason of wrongful acts made while acting in their individual or collective capacities as directors or officers.

THIS COVERAGE IS WRITTEN ON A “CLAIMS-MADE BASIS”

“Claims-made coverage” means an insurance policy that provides coverage only if a claim is made during the policy period or any applicable extended reporting period. A claim made during the policy period could be charged against a claims-made policy even if the injury or loss occurred many years prior to the policy period. If a claims-made policy has a retroactive date, an occurrence prior to that date is not covered.

FIDELITY/CRIME	
Coverage	Proposed Munich Reinsurance (Limit/Deductible)
Employee Dishonesty / Forgery or Alteration / Computer Fraud / Funds Transfer Fraud	Combined Fidelity Limit: \$240,000 / \$0

There are many different types of bonds, commonly known as contract, surety or fiduciary. They are primarily written to guaranty or assure the performance of a contract in construction, according to plans and specifications. Miscellaneous bonds are written to guaranty performance in accordance to laws, regulations and ordinances. Crime coverage is also categorized as a type of bond.

UMBRELLA LIABILITY	
Coverage	Proposed Greenwich Insurance Co.
General Aggregate Limit	\$5,000,000
Per Occurrence Limit	\$5,000,000
Self-Insured Retention (Deductible)	N/A

SCHEDULE OF UNDERLYING POLICIES				
Description	Company/Policy	Policy Term	Policy	Limit
Automobile Liability	Munich Re / CAU512219	06/30/19 to 06/30/20	Combined Single Limit	\$1,000,000
General Liability	Munich Re / CAU512219	06/30/19 to 06/30/20	Each Occurrence	\$1,000,000
			General Aggregate	N/A
			Products & Comp Ops	\$1,000,000
			Personal Injury	\$1,000,000
Directors & Officers	Munich Re / CAU512219	06/30/19 to 06/30/20	All Claims	\$1,000,000

Commercial Umbrella Liability, also known as Excess, provides coverage in addition to the limits of an insured's General Liability, Automobile Liability, Directors and Officers, and Employers Liability (underlying or primary) policies. Umbrellas also protect against exclusions and gaps in the primary policies that serve as underlying insurance. Covered losses that are not included in primary policies are subject to a self-insured retention (SIR) which is similar to a deductible.

Damages arising out of Construction are excluded. This does not apply to operations, maintenance, or non-structural interior modifications. Construction means any construction, remodeling, upgrades, landscaping or repairs performed, or products installed into or on real property, including structures, common areas, streets, or utilities. We recommend that the Association make sure that contractors have appropriate insurance when doing any type of work for the Association.

**PREMIUM SUMMARY FOR
Meadow Creek Condominiums of Vail**

Coverage	Expiring Annual Premium	Proposed Annual Premium	Accept or Decline (note below)
Package: Includes Property & General Liability	\$36,686	\$37,242	Accept
Fidelity/Crime	Included in Package	Included in Package	Accept
Hired & Non-Owned Auto	Included in Package	Included in Package	Accept
Directors & Officers Liability	Included in Package	Included in Package	Accept
Umbrella/Excess Liability	\$946	\$946	Accept
Total Premium	\$37,632	\$38,188	
Cost per Unit	\$588.00	\$596.69	

CURRENT POLICY TERMS

Coverage	Insuring Company	Policy Period	A.M. Best Rating
Package: Includes Property & General Liability	Munich Reinsurance	06/30/18 to 06/30/19	A+
Fidelity/Crime	Munich Reinsurance	06/30/18 to 06/30/19	A+
Hired & Non-Owned Auto	Munich Reinsurance	06/30/18 to 06/30/19	A+
Directors & Officers Liability	Munich Reinsurance	06/30/18 to 06/30/19	A+
Umbrella/Excess Liability	Greenwich Insurance	06/30/18 to 06/30/19	A

RENEWAL POLICY TERMS

Coverage	Insuring Company	Policy Period	A.M. Best Rating
Package: Includes Property & General Liability	Munich Reinsurance	06/30/19 to 06/30/20	A+
Fidelity/Crime	Munich Reinsurance	06/30/19 to 06/30/20	A+
Hired & Non-Owned Auto	Munich Reinsurance	06/30/19 to 06/30/20	A+
Directors & Officers Liability	Munich Reinsurance	06/30/19 to 06/30/20	A+
Umbrella/Excess Liability	Greenwich Insurance	06/30/19 to 06/30/20	A

COVERAGE OPTIONS	
Coverage	Limit
Workers' Compensation	
Bodily Injury by Accident – each accident	\$1,000,000
Bodily Injury by Disease – policy limit	\$1,000,000
Bodily Injury by Disease – each disease	\$1,000,000

Coverage	Annual Premium	Accept or Decline (note below)
PMA Insurance Group Add Workers' Compensation policy**	\$352**	
CAU Package Policy Increase BOLAW B&C limits to \$500K each	\$210	
Greenwich Umbrella Policy Increase policy limit to \$10,000,000	\$594	

**Indication only. Requires separate application.

Please note Accept or Decline as appropriate, sign and return to bind coverage.

The following documents are required to bind coverage:

- Signed and completed proposal
- Signed and completed CAU Package application
- Signed and completed Workers Compensation application (if coverage accepted)

Named Insured: Meadow Creek Condominiums of Vail Association

SIGNATURE: *Michael McClinton*

Vail Management Company Manager of Meadow Creek HOA

DATE: 27 June 2019

This is not a contract of insurance. No coverage is provided by this summary, nor does it replace any provisions of any policy ultimately delivered. The policy alone determines the scope of insurance protection. Please read your policy carefully and review its Declarations for complete information on coverage. If you would like to discuss this account or obtain sample forms and endorsements please contact your agent.



May 31, 2019

Meadow Creek Condominiums of Vail
c/o Vail Management
PO Box 6130
Avon, CO 81620

FEE DISCLOSURE

You are hereby informed in accordance with Colorado Division of Insurance Regulation 1-2-9 that a fee is being charged to you for one of the following services:

- Risk Management
- Financial Planning
- Investment Counseling
- Qualified Retirement Plan Design or Administration
- Estate Planning
- Third Party Employee Benefit Plans
- **Other services for which the agency does not receive a commission from the insurance company.**

You are under no obligation to purchase any insurance product through the agent in exchange for receiving the specific services.

The State of Colorado requires that we obtain your signature based upon this disclosure. Please sign in the below area and return to our office prior to 06/28/19.

If you have any questions please let us know.

Sincerely,

Meghan Wilson

Meghan Wilson, CIC
Commercial Lines Agent

Michael McClinton

Signature of Authorized Representative

Vail Management Company Manager of Meadow Creek HOA

27 June 2019

Date



DISCLOSURE FORM - CLAIMS-MADE POLICY IMPORTANT NOTICE TO POLICYHOLDER

THIS DISCLOSURE FORM IS NOT YOUR POLICY. IT DESCRIBES SOME OF THE MAJOR FEATURES OF OUR CLAIMS-MADE POLICY FORM. READ YOUR POLICY CAREFULLY TO DETERMINE RIGHTS, DUTIES, AND WHAT IS AND IS NOT COVERED. ONLY THE PROVISIONS OF YOUR POLICY DETERMINE THE SCOPE OF YOUR INSURANCE PROTECTION.

DEFINITIONS

1. "Claims-made coverage" means an insurance policy that provides coverage only if a claim is made during the policy period or any applicable extended reporting period. A claim made during the policy period could be charged against a claims-made policy even if the injury or loss occurred many years prior to the policy period. If a claims-made policy has a retroactive date, an occurrence prior to that date is not covered.
2. "Extended reporting period" means a period allowing for making claims after expiration of a claims-made policy. This is also known as a "tail".
3. "Occurrence coverage" means an insurance policy that provides liability coverage only for injury or damage that occurs during the policy term, regardless of when claim is actually made. A claim made in the current policy year could be charged against a prior policy year, or may not be covered, if it arises from an occurrence prior to the effective date.
4. "Retroactive date" means the date on a claims-made policy which denotes the commencement date of coverage under the policy.

YOUR POLICY

Your policy is a claims-made policy. It provides coverage only for injury or damage, occurring after the policy retroactive date (if any) shown on your policy and the incident is reported to your insurer prior to the end of the policy period. Upon termination of your claims-made policy an extended reporting period option may be available at the company's discretion.

There is no difference in the kinds of injury and damage covered by occurrence or claims-made policies. Claims for damages may be assigned to different policy periods, however, depending on which type of policy you have.

If you make a claim under your claims-made policy, the claim must be a demand for damages by an injured party. Your policy contains specific reporting requirements. Under most circumstances, a claim is considered made when it is received and recorded by you or by us. Sometimes a claim may be deemed made at an earlier time. This can happen when another claim for the same injury or damage has already been made, or when the claim is received and recorded during an extended reporting period.

PRINCIPAL BENEFITS

This policy provides coverage for Directors & Officers Liability up to the maximum dollar limit specified in the policy.

The principal benefits and coverages are explained in detail in your claims-made policy. Please read it carefully and consult your insurance producer about any questions you might have.

EXCEPTIONS, REDUCTION AND LIMITATIONS

Your claims-made policy contains certain exceptions, reductions and limitations. Please read them carefully and consult your insurance producer about any questions you might have.

RENEWALS AND EXTENDED REPORTING PERIODS

Your claims-made policy has some unique features relating to renewal, extended reporting periods and coverage for events with long periods of exposure. If there is a retroactive date in your policy, no event or occurrence prior to that date will be covered under the policy even if reported during the policy period. It is therefore important for you to be certain that there are no gaps in your insurance coverage. These gaps can occur in several ways. Among the most common are:

1. If you switch from an occurrence policy to a claims-made policy, the retroactive date in your claims-made policy should be no later than the expiration date of the occurrence policy.
2. When replacing a claims-made policy with a claims-made policy, you should consider the following:
 - a. The retroactive date in the replacement policy should extend far enough back in time to cover any events with long periods of liability exposure, or
 - b. If the retroactive date in the replacement policy does not extend far enough back in time to cover events with long periods of liability exposure, you should consider purchasing extended reporting period coverage under the old claims-made policy.
3. If you replace this claims-made policy with an occurrence policy, you may not have insurance coverage for a claim arising during the period of claims-made coverage unless you have purchased an extended reporting period under the claims-made policy

Extended reporting period coverage may be offered to you for at least one year after the expiration of the claims-made policy at a premium not to exceed 200% of your last policy premium.

CAREFULLY REVIEW YOUR POLICY REGARDING THE AVAILABLE EXTENDED REPORTING PERIOD COVERAGE, INCLUDING THE LENGTH OF COVERAGE, THE PRICE AND THE TIME PERIOD DURING WHICH YOU MUST PURCHASE OR ACCEPT ANY OFFER FOR EXTENDED REPORTING PERIOD COVERAGE.

PROOF OF DELIVERY

Policy Type: Directors & Officers Liability
Insuring Company: Munich Reinsurance
Policy Effective Date: 06/30/19

I hereby certify that the above disclosure form was delivered to Meadow Creek Condominiums of Vail.

By: *Meghan Wilson*

Meghan Wilson

Date: 05/31/19



**Neil-Garing Insurance an affiliate of
Mountain West Insurance & Financial Services, LLC
Two Rivers Park Plaza, 201 Centennial St – 4th Floor
Glenwood Springs, CO 81601**

www.mtnwst.com

Thank you for the opportunity to be of service to you.

This is not a contract of insurance. No coverage is provided by this summary, nor does it replace any provisions of any policy ultimately delivered. The policy alone determines the scope of insurance protection. Please read your policy carefully and review its Declarations for complete information on coverage. If you would like to discuss this account or obtain sample forms and endorsements please contact your agent.

WORKERS COMPENSATION

But, We Don't Have Any Employees!

In addition to your association master policy, we have included a Workers Compensation and Employers Liability quotation. This insurance would cover Colorado mandated medical and income benefits for employees who become injured or sick as a consequence of their employment. The estimated annual premium for this one year policy is \$300 to \$500. This is the minimum premium and is based on your having no employees as of the policy commencement date. Unless you have employees during the policy period, it will be your final, total premium.

Even though you have no employees, currently, and do not anticipate hiring any, you still need this important coverage. Here are the two principal reasons for that and the answers to frequently asked questions.

Reason #1: Employees of Independent Contractors

- **Isn't the contractor responsible for its own employees?** Normally, independent contractors with employees are required, by State law, to maintain Workers Compensation insurance. However, when a contractor fails to maintain the required insurance, a sick or injured employee may -- and often does -- recover direct from the association...even though he or she is not an association employee.
- **Doesn't a certificate of insurance protect us?** Obtaining a certificate of insurance from each contractor, indicating the existence of Workers Compensation insurance, is a sound measure. However, all it means is that the required coverage is in force on a particular date. It provides no guarantee that coverage will remain in force.
- **If coverage lapses, doesn't the contractor's insurer notify us?** Most certificates of insurance impose a "best efforts" or "reasonable efforts" standard on the insurer regarding the notification of certificate holders. This does not guarantee timely notification.
- **Isn't a hold-harmless agreement from the contractor effective?** Obtaining a properly drafted, enforceable hold-harmless agreement from each contractor can be an effective measure and one we recommend. Under this type of agreement, the contractor guarantees to insulate your association from liability for the injuries and illnesses of its employees. However, an agreement is only as good as the contractor's solvency. If the contractor is not financially up to its legal obligations, its agreements are worthless.
- **Can a contractor drop its insurance and rely on ours?** Anyone who is legally required to maintain Workers Compensation insurance, and fails to do so, is subject to the fines and other penalties prescribed by the District of Columbia Workers Compensation statute. These penalties are intended to be far more burdensome than simple compliance. A prudent and financially sound contractor is unlikely to risk noncompliance. However, financial distress and simple oversight are frequent causes of noncompliance. Even many contractors who are insured attempt to treat some of their employees as independent contractors. This common practice, intended to save on Workers Compensation insurance costs, is virtually impossible for you to detect.

Reason #2: Part-time, Casual, Seasonal and Unanticipated Employees

- **Are all employees covered by Workers Compensation?** The *State of Colorado* Workers Compensation statute determines the scope and application of its benefits. This is usually based on some combination of number of employees, number of hours an employee works each week and types or categories of employment. Each State's statute is unique and only an examination of your statute can provide this information.
- **Is it possible to have an employee and not know it?** A person performing services for you may or may not be an employee for Workers Compensation purposes. What appears to be an independent contractor relationship -- and which may indeed be one for all other purposes -- could be an employment relationship where Workers Compensation is concerned. Aside from any other considerations, courts and Workers Compensation commissions lean toward an employment relationship whenever the person in question is otherwise uninsured.
- **Who can tell us when we need Workers Compensation?** Your insurance or legal advisor can help you with your Workers Compensation requirements. The chief source of information is District of Columbia's Workers Compensation statute. In addition to a plain reading of the statute, there is undoubtedly case law, which has provided interpretations of the statute when necessary.

The only certainty of full compliance with Workers Compensation requirements and the protection of your community's financial resources is this inexpensive coverage. Without it, some degree of unnecessary risk persists. With it, you avoid a potentially severe loss, a possible assessment needed to pay it and the punitive aspects of noncompliance.

GENERAL APPLICATION

Residential Condominium Associations
Cooperative Apartments
Homeowners Associations
Office Condominium Associations

COMMUNITY ASSOCIATION INSURANCE PROGRAM



Community Association Underwriters of America, Inc.

2 Caufield Place
Newtown, PA 18940

Community Association Underwriters of America, Inc. does business as "CAU Insurance Services" in California, "Community Association Underwriters Agency" in New York, as "CAU" in Nevada, and as "Community Association Underwriters Insurance, Inc." in Utah.

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I. General Information

Community Association Type:

- Residential Condominium
- Cooperative Apartment
- Homeowners Association (with residential building coverage)
- Homeowners Association (with **NO** residential building coverage)
- Homeowners Association – Master (comprised of members of affiliated community associations)
- Office Condominium

Required Attachments:

Complete declarations and bylaws(**not just insurance sections**)
Current financial statement including auditor's management letter
Current photographs of representative residential buildings and nonresidential buildings
Site plan
Currently valued insurance company loss runs

Additional attachments may be required. A description of the necessary attachment will follow the  symbol.

A. **Association Name** (Legal name based on articles of incorporation or filings on record with the State):
Meadow Creek Condominiums of Vail Association

B. **Association Mailing Address** (C/O, Street, City, State, Zip Code):
C/O Vail Management Co.
PO Box 6130
Avon, CO 81620

C. **Association Billing Address** (C/O, Street, City, State, Zip Code or check if same as B.):
C/O Vail Management Co.
PO Box 6130
Avon, CO 81620

D. **Proposed Effective Date** (mm/dd/yy): 06 / 30 / 2019

Is account being quoted midterm? yes no

Does your agency currently write this account? yes no

Is this account being brokered? yes no

E. **Agency Name:** Neil-Garing Insurance **Producer Name:** Meghan Wilson

F. **Independent Property Management Firm Name:** Vail Management Co. **Site Manager Name:** Paul Redmond
Site Manager Email:
Site Manager Phone: (970) 476-4262
Site Manager Fax:

G. **Independent Property Management Firm Address:** **Phone:** (970) 476-4262
(Street, City, State, Zip Code or check if same as: B. or C.): **Fax:** (970) 476-9624
143 East Meadow Drive, Suite 395 **Email:**
Vail, CO 81657

H. **Inspection Contact Name:** Paul Redmond **Position:** MANAGER **Phone:** (970) 476-4262
Mailing Address: **Fax:** (970) 479-9624
Email:

I. **Board Member Contact Name:** Heather Price **Position:** Board President **Phone:** (970) 331-1234
Mailing Address: **Fax:**
Email:

II. Property Location

Fire Protection:

Name of the responding fire department: Vail Fire Department
 Is the responding fire department located within 2 miles? **yes** **no**
 Fire hydrants are located within how many feet from the building? 100 feet

MORTGAGE HOLDERS AND INSURANCE TRUSTEES

Provide the following for each:

Type:	<input type="checkbox"/> Mortgage Holder <input type="checkbox"/> Insurance Trustee
Name:	
Address:	
City, State, Zip Code:	
Loan Number:	

III. Residential Ownership and Occupancy Information

Indicate total number of units:

Built # 64
 Sold # 64
 Planned # 0
 Owner occupied # 29
 Owner occupied for periods less than 6 months # 25
 Rented on annual basis # 10
 Rented for periods less than 6 months # 0
 Timeshare or Fractional Ownership # 0

EXCLUDED EXPOSURES

Endorsement form CAU 3318 Exclusion – Specified Activities is required for secondary residence associations, timeshare and fractional ownership associations. The following exposures are excluded by this endorsement:

1. Armed security or guard dog services;
2. Hunting or archery;
3. Indoor or outdoor pistol, trap, or skeet shooting ranges;
4. Day care, medical, first aid or nursing facilities;
5. All terrain vehicles, ski areas, skiing activities, snowmobiling, parasailing, water skiing, or water ski jets;
6. Saddle animals, horseback riding clubs or any other equestrian activities or facilities; and
7. Beauty, salon, and spa facilities, products, and services including but not limited to therapeutic, massage, wellness, aesthetic, tanning, facials, body treatments, aromatherapy and personal beautification services.

IV. Rating Information – Property and Employee Dishonesty Coverages

ALL COVERAGES, LIMITS AND DEDUCTIBLES ARE SUBJECT TO UNDERWRITING APPROVAL.

A. **INSURING AGREEMENT: The producer is responsible for determining the appropriate insuring agreement.** Refer to the state statutes and the association documents to determine the correct insuring agreement. Bare Walls or All In coverage can be provided only when allowed by **both** the state statute and the association's documents. Bare Walls and All In coverages are also subject to underwriting review of association documents.

Insuring Agreement:	Policy coverage:
<input type="checkbox"/> BARE WALLS:	Buildings and Structures, only. No coverage for Units.
<input checked="" type="checkbox"/> SINGLE ENTITY:	Buildings, Structures, Units on Original Specifications basis.
<input type="checkbox"/> ALL IN:	Buildings, Structures, Units on Additional Installations basis.

B. PROPERTY LIMITATION – UNITS (OPTIONAL) : Coverage is not provided for the finished surfaces of perimeter and partition walls, floors and ceilings within the units, which includes paint, wallpaper, paneling, other finishes; coatings and coverings of walls and ceilings, tile, carpet and any floor coverings. However, floor covering does not mean unfinished hardwood or unfinished parquet flooring.

Indicate how this optional limitation shall apply:

Special Causes of Loss Water Causes of Loss

C. RESIDENTIAL BUILDINGS:

1. Building Construction

How many residential buildings? # 12

Is the association 100% complete? yes no

How many additional residential buildings are planned? # 0

Do all buildings have the same construction classification? yes no

Indicate construction classification:

Frame

2. Summary of Building Common Features

If all buildings have the same number of stories, enter the number of stories per building, or "N/A": 3

If all buildings have the same number of units, enter the number of units per building, or "N/A": N/A

If all buildings have a sprinkler system covering the entire building, enter All. Otherwise, enter None or Some: None

If all buildings have attached garages or carports, enter All. Otherwise, enter None or Some: All

If all buildings have elevators, enter All. Otherwise, enter None or Some: None

If all buildings have basements, enter All. Otherwise, enter None or Some: None

If all buildings have wood shingled roofs, enter All. Otherwise, enter None or Some: None

Minimum distance between buildings: 25 feet

Maximum distance between buildings: 75 feet

Are grills permitted on balconies? yes no

Charcoal/Combustible grills permitted? yes no

Are balconies constructed of wood? yes no

Is there a minimum distance of 10 feet between the floor to ceiling/overhang? yes no

3. Individual Building Details- See Section XII Property List

D. OTHER BUILDINGS AND STRUCTURES:

Coverage for other buildings and structures is provided on a guaranteed replacement cost basis.

Year Association was established: 2003

1. Other Buildings: Coverage applies only if other buildings are included in the policy declarations description of premises.


Are there any of the following other building types: detached garages, detached carports, clubhouse meeting center, sewage treatment facility, or buildings which house heating and air conditioning plants? yes no

Is future construction of any other buildings planned? yes no

2. Structures: The following structures are automatically covered: Cabanas, courts for handball, courts for racquet sports, pool houses, gate houses, storage sheds, shelters, mailboxes, gazebos, pump houses, fences, walkways, roadways and other paved surfaces, recreation fixtures, outdoor fixtures, outdoor swimming pools, flagpoles, light poles, fountains, outside statues and freestanding walls other than retaining walls. **No additional information is required.**

Unscheduled Structures (not listed above)

\$ _____ 100% Insurable Replacement Cost

If requested limit is greater than \$50,000  Attach schedule

3. Additional Buildings or Structures Not described in Section D1 and D2: Coverage applies **only** if other buildings are included in the policy declarations description of premises.

Is there any building or structure type not shown in D.1 or D.2.? yes no

E. COMMUNITY PERSONAL PROPERTY AND PROPERTY CONTAINED IN UNITS:

1. Community Personal Property: Do not include the value of any property covered under section IV.I.
OTHER PROPERTY COVERAGES.

100% replacement cost Limit

\$0

3. Scheduled Community Personal Property Limit Attach schedule

\$40,000

F. DEDUCTIBLES: The minimum basic deductible is \$2,500. Higher optional deductibles are available for:

Basic:	<input checked="" type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Apply deductible per unit
Water Damage:	<input checked="" type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Apply deductible per unit
Ice Damming:	<input checked="" type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$ _____	Deductible always applies per unit
Sprinkler Leakage:	<input checked="" type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Apply deductible per unit
Sewer Backup:	<input checked="" type="checkbox"/> \$5,000	<input type="checkbox"/> \$10,000	<input type="checkbox"/> \$ _____	<input type="checkbox"/> Apply deductible per unit
Wind or Hail:	Percentage Deductible		OR	Occurrence Deductible
	(Applies per building based on replacement cost)			(Applies per building)
	<input type="checkbox"/> 1%	<input type="checkbox"/> 2%	<input type="checkbox"/> _____ Other %	<input type="checkbox"/> \$5,000 <input type="checkbox"/> \$7,500 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$15,000 <input type="checkbox"/> \$25,000

G. CONSEQUENTIAL COVERAGES: Coverage is provided for MAINTENANCE FEES AND ASSESSMENTS, COMMUNITY INCOME and ACCOUNTS RECEIVABLE EXPENSES on an actual loss sustained basis. Coverage is provided for EXTRA EXPENSE on an actual cost basis.

Maintenance Fees and Assessments (Rents on Co-ops) \$265,000 **Annual Receipts**

H. EQUIPMENT BREAKDOWN (Boiler and Machinery): Coverage is included for equipment breakdown on a guaranteed replacement cost basis.

Does any building have a hot water or steam boiler? yes no

Does any building have a central air conditioning system servicing the entire building? yes no

I. OTHER PROPERTY COVERAGES: Basic Limits are included at no additional premium. Limits may be increased.

Coverage / Covered Property	Basic Limit	Increased Limit	Coverage/Covered Property	Basic Limit	Increased Limit	
Bridges, Bulkheads, Docks, Piers, Retaining Walls and Wharves	\$ 10,000	\$ _____	Personal Property of Others:			
Natural Outdoor Property	\$20,000	\$ _____		Per Person	\$5,000	\$ _____
Maximum per Tree, plant, or shrub <input type="checkbox"/> Include golf course	\$1,000	\$ _____		Per Occurrence	\$15,000	\$ _____
Newly Acquired Buildings and Structures	\$250,000	\$ _____	Off Premises Community Personal Property Community Personal Property In Transit			
Newly Conveyed Buildings and Structures	\$250,000	\$ _____			\$50,000	\$ _____
Newly Acquired Community Personal Property	\$250,000	\$ _____			\$50,000	\$ _____
			Demolition Cost	\$300,000	\$ _____	
Fine Arts:						
Per item	\$15,000	\$ _____	Increased Cost of Construction	\$300,000	\$ _____	
Per Occurrence	\$50,000	\$ _____	Debris Removal	\$300,000	\$ _____	
Attach schedule						
Personal Effects:						
Per Person	\$5,000	\$ _____	Fire Extinguisher Recharge	\$1,000	\$ _____	
Per Occurrence	\$15,000	\$ _____				
Removal of Fallen Trees Per Occurrence	\$ 10,000	\$ _____	Pollutant Clean Up and Removal	\$25,000 per 12 month period		
Maximum Per Tree	\$1,000					

J. Is EARTHQUAKE AND VOLCANIC ERUPTION Coverage desired? yes no

K. Is Power Failure or Interruption Coverage- Sump Pump desired? yes no

If yes, Form CAU 3208 applies

L. **Is Additional Claims Expenses coverage desired?** yes no
If yes, Form CAU 3207 applies

M. **CRIME COVERAGES: EMPLOYEE DISHONESTY, COMPUTER FRAUD, DEPOSITORS FORGERY:** Basic limit is included at no additional premium. Limit may be increased, or Actual Loss Sustained option may be selected. Optional coverage to include the independent property manager and firm for Employee Dishonesty Coverage only is included and is subject to underwriting approval. Coverage can not be increased if the developer, sponsor, builder or their representatives are on the board of directors.

Basic Limit \$150,000

Increased Limit* \$ 240,000

*FNMA requires a coverage limit equal to 3 months of assessments plus reserves.

OR

Actual Loss Sustained Limit Option \$ 0 total amount of 3 months of
association income + the amounts of all reserve accounts

Do not include coverage for independent community manager and firm

N. **Is Deductible Allowance endorsement CAU 3227 desired?** yes no

O. **Is Deductible Credit endorsement CAU 3226 desired?** yes no

P. **Is Cosmetic Damage Exclusion endorsement CAU 3222 desired?** yes no

V. Rating Information – Liability Coverages

A. GENERAL LIABILITY

No General Aggregate applies. Limit equals the sum of primary and excess/umbrella per occurrence limits. The basic GL limit is \$1,000,000. The limit may be increased.

Increased GL Limit

\$2,000,000 \$3,000,000 \$4,000,000 \$5,000,000 \$6,000,000 \$7,000,000 \$8,000,000
 \$9,000,000 \$10,000,000

B. **Is DIRECTORS AND OFFICERS LIABILITY coverage desired?** yes no

Coverage is provided on a claims made basis. An Annual Aggregate applies. The minimum offered limit of \$1,000,000 may be increased but can not exceed General Liability limit chosen in A. above. Coverage is provided for independent property manager and firm. Full prior acts coverage is provided when "None" is shown as the Retroactive Date on the policy declaration page.

Increased D&O Limit

\$2,000,000 \$3,000,000 \$4,000,000 \$5,000,000 \$6,000,000 \$7,000,000 \$8,000,000
 \$9,000,000 \$10,000,000

Do not include coverage for independent property manager and firm

Include Counsel Select form CAU 3042. An additional premium applies. Premium is fully earned.

C. ENVIRONMENTAL IMPAIRMENT LIABILITY

Coverage is provided on a claims made basis. Annual Aggregate applies. The basic liability limit is \$500,000. The limit may be increased. The minimum retention is \$5,000. Coverage for Underground Storage tanks applies only when scheduled on the policy.

Increased EIL Limit

\$1,000,000 \$1,500,000 \$2,000,000

Sewage Treatment Facility

Do not include coverage for Environmental Impairment Liability

EIL Retention

\$0 \$10,000 \$25,000

0 Underground Storage Tanks

D. GARAGE AND PARKING AREA LEGAL LIABILITY

Basic coverage limits of \$25,000 apply separately for comprehensive and collision. These limits may be increased. The basic deductible is \$500.

Comprehensive **Increased Limit**
 Collision **\$25,000**
\$25,000

Higher Deductible
 \$1,000 \$1,500 \$2,500 \$500
 \$1,000 \$1,500 \$2,500 \$500

E. Is EMPLOYEE BENEFITS LIABILITY coverage desired? yes no

F. HIRED AND NONOWNED AUTO LIABILITY

Coverage for hired and nonowned auto liability will be included at the general liability occurrence limit. No primary coverage is provided for hired and nonowned auto liability if there is an owned auto exposure.

#0 Owned Autos

G. RATING EXPOSURES

	# of		Annual Receipts		Square Footage
Swimming pools (Not wading pools)	0	Restaurant	\$0	Mercantile and Office Area	0
Lakes, ponds, retention basins	0	Liquor	\$0		
Acreage of largest lake or pond	0	Golf course	\$0		
Dock slips	0	Boat rental	\$0		
		Golf cart rentals	\$0		
		Facility rental to non-members	\$0		

H. ADDITIONAL INSURED

Does any additional insured need to be named on the policy? yes no

VI. Other Insurance Information

1. Is a Workers Compensation policy desired? yes no

3. Is Employee Benefits Liability coverage desired? yes no

VII. Underwriting Information

A. RESIDENTIAL OWNERSHIP AND OCCUPANCY

Average sale/resale price of units: \$650,000

Indicate total number of units in each category:

Owned by developer/sponsor/builder # 0
 Owned by financial institutions # 0
 Owned by the association # 0

Is the developer/builder/sponsor or their representatives on the board? yes no

Does association have any ownership or rental restrictions for owners or residents (e.g. over age 55)? yes no

1. Units Rented on an Annual Basis

Are the rules governing use of the unit and emergency procedures provided? yes no
 Is proof of insurance obtained from all tenants? yes no

2. Seasonal, Short Term Rental and Timeshare or Fractional Ownership Units

Are vacant or unoccupied units monitored for temperature, fire, and security? yes no
 Are the units inspected after each occupancy? yes no
 Are the rules governing use of the unit and emergency procedures provided? yes no

C. INDEPENDENT CONTRACTORS (e.g. street/road maintenance, snow removal, security, parking, transportation, etc)

Does the association or independent property management firm hire independent contractors? yes no
 Does the association hire or arrange transportation for residents? yes no
 Does the independent contractor provide a hold harmless or indemnification agreement? yes no
 Are current certificates of insurance obtained from all independent contractors? yes no

- Is the association named as an additional insured? yes no
- Are liability limits at least \$1,000,000 per Occurrence with a \$1,000,000 General Aggregate? yes no
- Does the association indemnify or hold harmless any independent contractor by contractual agreement? yes no
- Does the association obtain proof of Workers Compensation coverage from all independent contractors? yes no

D. ASSOCIATION EMPLOYEES

Does the association have any employees? yes no

E. INDEPENDENT PROPERTY MANAGEMENT FIRM

- Is an independent property management firm utilized? yes no
- How long have they managed the property? 13
- Is the independent property manager on the premises full time? yes no
- Are on site visits conducted at regular intervals? yes no
- Does the independent property management firm have a maintenance staff? yes no
- Does the independent property management firm have any ownership interest in any contracting firm utilized by the association? yes no

F. BUILDING DETAILS, UPDATING and DEFECTS:

1. Was any building previously occupied for non-residential purposes? yes no

2. Is there an underground mine or quarry on association property? yes no

3. Are there Smoke detectors? yes no
 In common areas: yes no
 In units: yes no

Hard wired Battery powered with replacement program

4. Is there a Sprinkler system? yes no

5. Is any building over 25,000 square feet? yes no

Choose closest building shape below:



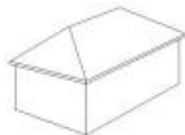
yes no

Does the building have any masonry fire walls?

Roof:

Indicate the average age of the roofs: 0-5 years 6-10 years 11-15 years 16-20 years 21+ years

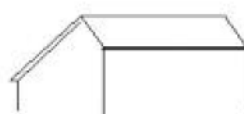
Indicate predominant roof type:



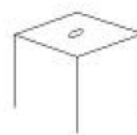
Hip



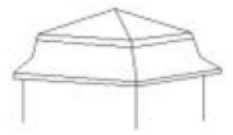
Gable



Salt Box



Flat



Mansard

6. Is there any building with roofing over 20 years old? yes no

7. Does any building or unit have polybutylene plumbing? yes no

8. Does any building or unit have PEX plumbing? yes no

9. Does any building or unit have galvanized plumbing (other than main waste lines)? yes no

10. Does any building or unit have fuses? yes no
11. Is there any aluminum wiring? yes no
12. Is or was asbestos ever present in common elements or units? yes no
13. Is or was lead paint ever present on common elements or units? yes no
14. Are there any identified construction defects? yes no
15. Does the association have a flood insurance policy? yes no

G. POTENTIAL EXPOSURES:


If you answer "YES" to a numbered question, answer the remaining questions in the section.
 If you answer "NO" to a numbered question, proceed to the next numbered question.

1. Are there any Day Care, Medical Care or Assisted Living facilities? yes no
2. Are there any Health and Fitness facilities? yes no
3. Is there a clubhouse or meeting center? yes no
4. Is there a restaurant on premises? yes no
5. Is street or road maintenance the responsibility of the association? yes no
6. Is snow clearance the responsibility of the association? yes no

For each area indicate who perform snow clearance :

Area	Municipality	Independent contractor	Manager	Association Employees
Streets and roads	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driveways	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking areas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways and stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If an independent contractor is utilized, does the association have a written contract? yes no
- Does the contract stipulate snow fall amount of 2" or more requires snow clearance to be performed? yes no
- Does the independent contractor provide a hold harmless and indemnification agreement? yes no
- Is a current certificate of insurance obtained from the independent contractor? yes no
- Is the association named as an additional insured? yes no
- Are the liability limits at least \$1,000,000 per Occurrence with a \$1,000,000 General Aggregate? yes no

 **Attach certificate of insurance.**

7. Is there a swimming pool or wading pool? yes no
8. Are there any lakes, ponds, retention basins, rivers or beaches on or adjacent to premises?(not detention basins) yes no
9. Dam, levee or dike? yes no
10. Do any athletic teams or organizations use association amenities or facilities? yes no

11. Are there any golf courses located on Association property? yes no
12. Are there any equestrian facilities, trails or stables located on association property? yes no
 Are there any skiing activities, including ski in and ski out, or snowmobiling allowed on association property? yes no
13. Are any association owned facilities or amenities shared with another organization (e.g. another association, hotel, etc.)? yes no
14. Is there a water, wastewater or sewage treatment facility located on association property? yes no
15. Does the association utilize security personnel? yes no
16. Is valet parking provided? yes no

VIII. Money & Securities and Crime / Employee Dishonesty

A. ASSOCIATION MONEY & SECURITIES VALUE

What does the association, at their premises, estimate the total maximum value for all its Money & Securities at any point in time for the upcoming policy period to be:

- Less than \$50,000:
- Between \$50,000 and \$100,000:
- Between \$100,000 and \$250,000:
- Between \$250,000 and \$500,000:
- Above \$500,000:

If the association's estimate is above \$500,000; list the value for each of the below items:

- Currency / Coins: \$0.00
- Bank notes: \$0.00
- Money Order: \$0.00
- Travelers Checks / Register Checks: \$0.00
- Tokens / Tickets: \$0.00
- Evidence of debt: \$0.00
- Any other financial instruments not listed above and its value : \$0.00

B. ASSOCIATION ACCOUNTS

- Does the association have both an operating account and a reserve account? yes no
- Are the account(s) in the association's name? yes no
- What is the \$ limit on board member's ability to disburse or transfer funds? \$2,500
- What is the \$ limit on independent property manager's ability to disburse or transfer funds? \$2,500
- Are operating account disbursements by the independent property manager limited to approved budgeted items? yes no
- Are the reserve account disbursements specifically authorized by the board? yes no
- Is countersignature of the checks required? yes no
- If not, who signs or controls? _____
- Are the following Securities subject to control of two or more board members / employees? yes no
- Tickets, Tokens, Stamps, Evidence of Debt, and negotiable or non-negotiable instruments or contracts.
- Are the bank statements reconciled monthly? yes no
- Does the person performing the reconciliation have the authority to deposit or disburse funds? yes no
- Who receives a copy of the account statement(s)? board member manager

C. ASSOCIATION FINANCIAL MANAGEMENT

- Does the association prepare an annual budget? yes no
1. Is there an annual certified audit? yes no
If no annual certified audit, are any of the following conducted on an annual basis:
 Review
 Compilation
 Report of cash receipts and expenditures
2. Are all financial transactions reviewed monthly by the board? yes no
3. Does an independent property management firm handle association funds? yes no
Is there a contractual agreement in place between the property management firm and the association defining the property management firm's financial responsibilities? yes no
Does the contract require the property management firm to maintain Employee Dishonesty coverage? yes no
Are association funds co-mingled with other funds? yes no
4. Does an accounting firm handle association funds? yes no
5. Are background checks done on everyone who has access to association funds? yes no

IX. Environmental Impairment Liability

In granting coverage under the Environmental Impairment Liability Coverage Part, we will rely upon the declarations and statements in this application for coverage. Declarations and statements are the basis of coverage and will be considered as incorporated in and constituting a part of the Environmental Impairment Liability Coverage Part.

- A. Have any prior environmental reports, audits or studies been done for this property? yes no
📎 Attach copy of report, audit or study.
Have any of the following ever been on the property? yes no
- B. Does the association have any wells used for potable water? yes no
- C. Does the association have a septic system connected to residential buildings or to third parties? yes no
Does the association have a septic system connected to other association community buildings only? yes no
e.g. clubhouses, pool houses, etc.
- D. Is there a sewage treatment facility at the property? yes no
- E. **Associations may have above ground or underground tanks if they have any of the following exposures: Gasoline pumps, backup generator, irrigation systems, fire protection system, heated swimming pool, cooking grills, oil or propane heat source, drinking water system or septic system.**
Does the association have any Above ground Storage Tanks (ASTs)? yes no
Does the association have any Underground Storage Tanks (USTs)? yes no
- F. Are any hazardous* substances stored in containers greater than 50 gallons? yes no
*Hazardous substances include: pesticides, herbicides, paints, solvents, cleaning fluids and other similar chemicals.
- G. Have there been any environmental claims against the association? yes no
Has any environmental coverage been declined, canceled or nonrenewed? yes no
- H. In the last 5 years, has the association been cited or prosecuted for contravention or violation of any standard or law relating to any release of pollutants into sewers, rivers, seas, or onto land? yes no
- I. Are you aware of any circumstances that could reasonably be expected to give rise to an environmental liability claim under this policy? yes no

X. Directors and Officers Liability

In granting coverage under the Directors and Officers Liability Coverage Part, we will rely upon the declarations and statements in this application for coverage. Declarations and statements are the basis of coverage and will be considered as incorporated in and constituting a part of the Directors and Officers Liability Coverage Part.

A. BOARD MEMBERS

- Has board control transferred from developer/builder/sponsor? yes no
 Is the developer/builder/sponsor or their representatives on the board? yes no
 Does any board member own 10% or more of the units? yes no

B. LEGAL COUNSEL

- Is there a procedure in place to promptly deliver all demand letters to the insurance carrier? yes no
 Is legal counsel utilized in delinquent assessments, liens, or foreclosure processes? yes no
 Is legal counsel utilized in enforcement of covenant process? yes no

C. PRIOR ACTIVITY

1. Has any directors and officers liability coverage ever been declined, cancelled or non-renewed? yes no
2. Has any legal action been taken by the association against any member other than for collection of fees or assessments? yes no
3. Has any claim been made, or is any claim pending against the association or any person as a director, officer, executive trustee, employee, independent property manager, volunteer, staff or committee member or association member acting on behalf of the board? yes no
4. Are you aware of any fact, circumstance or situation not reported to your current or past Directors & Officers Liability insurer which you reasonably believe could give rise to a claim? yes no

XI. Property List

Information for all existing and planned residential properties appears in Subsections A, B and C below. Subsection C appears only if any buildings have mid rise or high rise parking garages:

A. Basic Information:

Unit #	Street #	Street	Construction	Year Built	Roof Material	100 % Replacement Cost	# of Stories	# of Units	100% Sprinklered?
M1, M2, M3, M4, M5, M6	2520	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
L1, L2, L3, L4, L5, L6	2510	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
K1, K2, K3, K4	2500	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,251,250	3	4	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
J1, J2, J3, J4	2550	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,251,250	3	4	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
H1, H2, H3, H4, H5, H6	2570	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
G1, G2, G3, G4	2540	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,251,250	3	4	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
F1, F2, F3, F4, F5, F6	2560	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
E1, E2, E3, E4, E5, E6	2633	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
C1, C2, C3, C4, C5, C6	2733	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,251,250	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
A1, A2, A3, A4, A5, A6	2743	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
B1, B2, B3, B4, B5, B6	2753	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	6	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
D1, D2, D3, D4	2637	Kinnickinnick	Frame	1980	Asphalt & Stone	\$1,876,875	3	4	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no

Unit #	Street #	Street	Construction	Year Built	Roof Material	100 % Replacement Cost	# of Stories	# of Units	100% Sprinklered?
Summary						\$20,020,000		64	

B. Additional Information:

Street #	Street	Building Square Footage	Basement Square Footage	% of Basements Finished*	Attached Garage Square Footage	Attached Carport Square Footage	# of Elevators	Anticipated Completion Date
2520	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2510	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2500	Kinnickinnick	6,480	0	0%	0	832	0	n/a
2550	Kinnickinnick	6,480	0	0%	0	832	0	n/a
2570	Kinnickinnick	10,380	0	0%	0	1,248	0	n/a
2540	Kinnickinnick	6,480	0	0%	0	832	0	n/a
2560	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2633	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2733	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2743	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2753	Kinnickinnick	9,720	0	0%	0	1,248	0	n/a
2637	Kinnickinnick	6,480	0	0%	0	832	0	n/a
Summary		104,340	0	-	0	13,312	0	-

* % of Basements Finished applies only if original specifications by developer or All In (if applicable).

XII. Fraud Statement

CO	<p>It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies</p>
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XIII. Authorization

A. **Association Name** (Legal name based on articles of incorporation or filings on record with state):
Meadow Creek Condominiums of Vail Association

B. **Association Mailing Address**(C/O, Street, City, State, Zip Code):
C/O Vail Management Co.
PO Box 6130
Avon, CO 81620

C. **Property Location**
City or Municipality: Vail **County:** Eagle **State:** CO **Zip Code:** 81657

D. **Proposed Effective Date** (mm/dd/yy): 06/30/19

I am an authorized representative of the applicant and certify that a diligent inquiry was made to obtain the answers to the questions on this application. To the best of my knowledge, I certify that the answers are accurate and complete.

I understand that the information provided in this application and related attachments were relied upon as the basis of coverage. Declarations and statements made relative to Employee Benefits Liability, Environmental Impairment Liability and Directors and Officers Liability will be considered as incorporated in and constituting a part of the respective Employee Benefits Liability, Environmental Impairment Liability and Directors and Officers Liability Coverage Parts.

Signature: Michael McClinton **Date:** 27 June 2019
Signature of board member or other authorized representative is required.

Name: Michael McClinton **Title:** Vail Management Company
Manager of Meadow Creek HOA

App Id: 161151 Account Code: 26178
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