

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/20/2021

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.

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).

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PRODUCER			CONTACT NAME:	John Karstens		
Karstens Insur	ance Services, LLC		PHONE (A/C, No, Ext	t): (719) 636-3336	(A/C, No):	
3225 Templeton Gap Rd Suite 104			E-MAIL ADDRESS: John@KarstensAgency.com			
				INSURER(S) AFFORDING COVERAGE	GE	NAIC#
Colorado Springs		CO 80907	INSURER A: AMGUARD INSURANCE COMPANY			42390
INSURED			INSURER B	: UNITED STATES LIABILITY INST	JRANCE CO	25895
	Camelback Village Condominium Association Inc		INSURER C	: UNITED STATES LAIBILITY INST	JRANCE CO	25895
	c/o Z & R Management		INSURER D	: PINNACOL ASSURANCE		52410
	6015 Lehman Drive Ste 205		INSURER E	:		
	Colorado Springs	CO 80918-3432	INSURER F	:		
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COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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		INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
	COMMERCIAL GENERAL LIABILITY							\$	1,000,000
	CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	\$	50,000
							MED EXP (Any one person)	\$	5,000
Α				CABP141385	10/20/2020	10/20/2021	PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:						Building Coverage	\$	8,700,134
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO						BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY AUTOS HIRED NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
							PROPERTY DAMAGE (Per accident)	\$	
	CONTROL PROPERTY OF THE CONTROL OF T	11						\$	
	UMBRELLA LÍAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					The same	PER OTH- STATUTE ER		
	D OFFICER/MEMBER EXCLUDED?		A 2263962	03/01/2021	03/01/2022	E.L. EACH ACCIDENT	\$	1,000,000	
				2263962	03/01/2021		E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
В	B Directors & Officers			CAP1563653	10/20/2020	10/20/2021	\$1,000,000		
C Employee Dishonesty				CR1552727	10/20/2020	10/20/2021	\$200,000		

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

- Policy provides full replacement cost per policy provisions.
- If required by written contract, Z & R Management is included as Additional Insured with regard to General Liability and Employee Dishonesty.
- Property Deductible: \$10,000
- Wind or Hail Deductible: 5% of Building Coverage

CERTIFICATE HOLDER	CANCELLATION
Z & R Property Management Derek Patterson Derek@zandrmgmt.com	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
6015 Lehman Dr Ste 205 Colorado Springs, CO 80918	AUTHORIZED REPRESENTATIVE  Melina De La Rosa

AGENCY CUSTOMER ID:	
LOC#	



## ADDITIONAL REMARKS SCHEDULE

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AGENCY	NAMED INSURED	
Karstens Insurance Services LLC	Camelback Village Condo Association	
POLICY NUMBER	C/O Z&R Property Management	
	6015 Lehman Dr., Ste. 205	
CARRIER NAIC CODE	Colorado Springs, CO 80918	
	EFFECTIVE DATE:	

## ADDITIONAL REMARKS

## THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25

FORM TITLE: Certificate of Liability Insurance

If Mortgagee is listed as Certificate Holder, then Holder is recognized as Mortgagee. Special causes of loss excluding earthquake and flood. Subject to policy limits and exclusions.

Locations must be shown on policy for coverage to apply.

Severability of Liability is included.

Ordinance and Law is included.

A - Undamaged Portion of Building is included in Building Limit

B&C - Demolition Cost & Increased Cost of Construction Combined is \$900,000

Per Building Sub Limit \$100,000

Fidelity, General Liability, and Directors & Officers Liability policies include Property Management Company as an Insured:

c/o Z&R Property Management 6015 Lehman Drive Ste 205 Colorado Springs, CO 80918

COVERAGE: Crime/Fidelity/Employee Dishonesty INSURER: United States Liability Insurance Company

POLICY NUMBER: CR 1552727 LIMIT: \$200,000 DED: \$250

POLICY DATES: 10/20/2020 to 10/20/2021

COVERAGE: Directors & Officers

INSURER: United States Liability Insurance Company

POLICY NUMBER: CAP1563653 LIMIT: \$1,000,000 DED: \$1,000

POLICY DATES: 10/20/2020 to 10/20/2021

Location Addresses covered by Policy (All addresses are Colorado Springs, CO 80904)

Location 1: 2901, 2905, 2909, 2913 Mesa Rd Location 2: 2945, 2941, 2937, 2935 Mesa Rd

Location 3: 2979, 2983 Mesa Rd Location 4: 2953, 2949 Mesa Rd Location 5: 2973, 2969 Mesa Rd Location 6: 2963 Mesa Rd

Location 7: 2917, 2921 Mesa Rd Location 8: 2925,2927,2931 Mesa Rd

Location 9: 2959 Mesa Rd

\*\*\*\*\* PLEASE READ \*\*\*\*

The building is "All -Inclusive" coverage and includes interior and exterior coverage built to original specifications. Coverage does NOT include individual condo owners personal belongings, betterments, and improvements. Each unit owner is recommended to carry their own HO6 policy to cover upgrades and loss assessment and should consult their insurance agent to confirm coverage's needed. Tenant's are recommended to carry HO4 insurance to further protect unit owners in the event of a loss caused by the tenant.

100% Replacement Cost applies up to the blanket limit

No Coinsurance/Agreed Value

Inflation Guard is not included on policy. Limits are reviewed annually to ensure adequate building coverage on the project.

Wind/Hail Coverage is included

Waiver of Subrogation in favor of unit owners applies

This is the only complex covered under the policies listed on the certificate.

Crime/Fidelity/Employee Dishonesty policy includes coverage for Property Management Company and Manager, Board Members and Volunteers

Cancellation - 10 days prior to cancellation date