



3 Ravinia Drive
Atlanta GA 30346-2117

M-20-2158-FAD1 F V

002665 3123

Named Insured

MONTCLAIR SUBDIVISION HOA
PO BOX 812
PALISADE CO 81526-0812

| | | |
|---|-----------------------|------------------------|
| Policy Number | 96-BV-K617-4 | |
| Policy Period | Effective Date | Expiration Date |
| 12 Months | DEC 28 2017 | DEC 28 2018 |
| The policy period begins and ends at 12:01 am standard time at the premises location. | | |

Agent and Mailing Address
ERIC LUSBY INSURANCE AGCY INC
2584 PATTERSON RD STE 1
GRAND JCT CO 81505-1451

PHONE: (970) 242-0156

Residential Community Association Policy

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: HOMEOWNERS ASSOCIATION
Requested By: Policyholder

| | |
|--|-----------------|
| Location of Insured Premises | Location Number |
| 844 MONTCLAIR DR PALISADE CO 81526-0812 | 001 |

Policy Premium \$ 625.00
Minimum Premium
Discounts Applied:
Renewal Year
Claim Record

Prepared
DEC 12 2017
CMP-4000

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DECLARATIONS (CONTINUED)

Residential Community Association Policy for MONTCLAIR SUBDIVISION HOA
Policy Number 96-BV-K617-4

Policy Period: 12 Months
 Effective Date: DEC 28 2017
 Expiration Date: DEC 28 2018
 The policy period begins and ends at 12:01 am standard time at the premises location.

This Policy does not provide any SECTION I - PROPERTY coverage

SECTION II - LOCATION SCHEDULE

| Location Number | Location of Described Premises |
|-----------------|--|
| 001 | 844 MONTCLAIR DR PALISADE CO 81526-8403 |

SECTION II - LIABILITY

| COVERAGE | LIMIT OF INSURANCE |
|--|--------------------|
| Coverage L - Business Liability | \$1,000,000 |
| Coverage M - Medical Expenses (Any One Person) | \$5,000 |
| Damage To Premises Rented To You | \$300,000 |
| Directors And Officers Liability | \$1,000,000 |
| AGGREGATE LIMITS | LIMIT OF INSURANCE |
| Products/Completed Operations Aggregate | \$2,000,000 |
| General Aggregate | \$2,000,000 |
| Directors and Officers Aggregate | \$1,000,000 |

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.