

Renewal Declarations Businessowners Policy

Please read your policy



American Family Insurance Company
6000 American Parkway
Madison WI 53783

For customer service and claims service
24 hours a day, 7 days a week

1-800-MY AMFAM (1-800-692-6326)
amfam.com

Named Insured And Mailing Address

The Winfield Condominium Association Inc
600 E Hopkins Ave Ste 203
Aspen CO 81611-2933

Policy Information

Policy number	Policy period	Billing account number
91003-72043-51	7/16/2024 to 7/16/2025 12:01 A.M. Standard Time at your mailing address shown above.	620-792-984-87

Business and Operations Information

Year Started: 2014

Description of Business and Operations:

Form of Business: Corporation

Insurance applies only for coverages for which a limit of insurance or the word "Included" is shown unless coverage is provided by an endorsement. Blanket Insurance applies only for coverages for which a Blanket Limit of Insurance is shown.

As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

In return for the payment of the premium, and subject to all of the terms of this policy, we agree with you to provide the insurance as stated in this policy.

Policy Number: 91003-72043-51

Premium Information

Total Advance Premium Per Term (Excluding Surcharges and Terrorism):	\$31,259.90
Certified Acts of Terrorism Premium (may include state mandated fire loss coverage premium):	\$0.00
Total Advance Premium Per Term:	\$31,259.90
Premium with Customer Full Pay Discount (not available on policies billed to a Third Party):	\$29,697.36

This premium may be subject to adjustment. You may be charged a fee when: (a) you pay less than the full amount due; (b) your payment is late; and/or (c) when your bank does not honor your check or electronic payment. Refer to your Billing Notice for fee amounts.

Policy Level Coverages**Property Causes Of Loss**

Causes Of Loss Risks of Direct Physical Loss

Per Occurrence Property Deductible

Deductible \$10,000

General Liability

Liability And Medical Expense Limit \$2,000,000 Per Occurrence

Medical Expense Limit \$5,000

Other Than Products/Completed Operations Aggregate..... \$4,000,000

Products/Completed Operations Aggregate \$4,000,000

Computer Fraud And Funds Transfer Fraud Coverage

Limit \$50,000

Condominium Enhancement Refer to BPF 87 90

Level Platinum

Directors And Officers Liability

Level Silver

Named Association The Winfield Condominium
Association Inc

Directors And Officers Liability Annual Aggregate
Limit Of Insurance \$1,000,000

Deductible \$1,000

Retroactive Date 07/16/2014

Extended Reporting Period No

Employee Dishonesty

Includes Forgery Or Alteration

Limit \$50,000 Per Occurrence

Deductible \$1,000


Policy Number: 91003-72043-51

Additional Insured(s) Information			
Name	Type	Interest	Location
Aspen Places LLC	Additional Insured - Managers or Lessors Of Premises	All Buildings	119 E Cooper Ave ASPEN CO 81611-1756

Agent Information

The Ben Kelloff Agency, Inc

bkelloff@amfam.com

350 HIGHWAY 133 # 1
CARBONDALE CO 81623-1650
1-970-963-5711AUTHORIZED
REPRESENTATIVE
President
Secretary

Policy Number: 91003-72043-51

Location 1 - Location Details

Program: Condo/Townhouse Associations

Location Address: 119 E Cooper Ave ASPEN CO 81611-1756

Location Description:

Policy Number: 91003-72043-51

Location 1 Building 1 - Building Level Coverages**Location 1 Building 1 - Building Level Details****Building Address:** 119 E Cooper Ave ASPEN CO 81611-1756**Occupancy:** Residential Condominiums without Mercantile**Building Interest:** Owner - Leased to Other**Building Description:** 119 E Cooper Ave-1**Water Damage Or Ice Damming Deductible - Per Unit**

Deductible \$10,000

Building

Limit Of Insurance \$7,209,400

Guaranteed Replacement Cost applies.

Replacement Cost Coverage applies.

Business Income Options

Extended Number of Days For Ordinary Payroll Expense 60 Days - Included

Extended Number of Days For Extended Business Income 60 Days - Included

Business Income From Dependent Properties

Limit Of Insurance \$5,000

Business Income And Extra Expense - Revised Period of

Indemnity - Number Of Consecutive Days 12-Months

72 Hour Waiting Period applies.

Ordinance Or Law

Coverage 1 Limit Of Insurance

Coverage 2 Limit Of Insurance

Coverage 3 Limit Of Insurance

Coverages 2 And 3 Combined Limit Of Insurance

Coverages 1, 2 And 3 Combined Limit Of Insurance \$300,000

Business Income And Extra Expense Optional Coverage applies Refer to BPF 84 64

Number Of Hours Waiting Period For Period Of Restoration

Applicable To Business Income And Extra Expense Optional

Coverage 72 Hours

Water Back-Up And Sump Overflow (Building)

Building Limit \$300,000

Deductible \$1,000

Policy Number: 91003-72043-51

Forms And Endorsements		
Form Number	Edition Date	Title
BP 00 03	07 13	Businessowners Coverage Form
BP 04 02	07 13	Additional Insured - Managers Or Lessors Of Premises
BP 04 12	04 17	Limitation Of Coverage To Designated Premises, Project Or Operation
BP 04 17	01 10	Employment-Related Practices Exclusion
BP 04 19	07 13	Amendment - Liquor Liability Exclusion - Exception For Scheduled Premises Or Activities
BP 04 30	07 13	Protective Safeguards
BP 04 39	07 02	Abuse Or Molestation Exclusion
BP 04 54	01 06	Newly Acquired Organizations
BP 04 93	01 06	Total Pollution Exclusion With A Building Heating Equipment Exception And A Hostile Fire Exception
BP 05 01	07 02	Calculation of Premium
BP 05 17	01 06	Exclusion - Silica Or Silica-Related Dust
BP 05 24	01 15	Exclusion Of Certified Acts Of Terrorism
BP 05 41	01 15	Exclusion Of Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside The United States
BP 05 47	07 13	Computer Fraud And Funds Transfer Fraud
BP 05 77	01 06	Fungi Or Bacteria Exclusion (Liability)
BP 05 98	07 13	Amendment Of Insured Contract Definition
BP 14 78	07 13	Exclusion Of Loss Due To By-Products Of Production Or Processing Operations (Rental Properties)
BP 15 04	05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - With Limited Bodily Injury Exception
BP 85 04	07 10	Exclusion - Lead Liability
BP 85 05	07 98	Exclusion - Punitive Damages
BP 85 10	07 98	Other Insurance Limitation Liability And Medical Expenses
BP 85 12	01 06	Asbestos Exclusion
BP IN 01	07 13	Businessowners Coverage Form Index
BPF 80 01	08 18	Businessowners Policy Jacket
BPF 80 03	08 18	Businessowners Coverage Form Changes
BPF 81 04	08 18	Colorado Changes
BPF 83 09	08 18	Water Damage Or Ice Damming Deductible - Per Unit
BPF 84 11	08 18	Building Limit Inflation Protection Coverage
BPF 84 21	08 21	Water Back-Up and Sump Overflow
BPF 84 64	08 21	Ordinance Or Law Coverage
BPF 84 71	08 18	Employee Dishonesty - Property Manager(s)
BPF 84 73	08 18	Guaranteed Replacement Cost Coverage

Policy Number: 91003-72043-51

Forms And Endorsements (continued)		
Form Number	Edition Date	Title
BPF 85 25	08 18	Marijuana Exclusion
BPF 85 26	05 22	Exclusion - Biometric Data, Identifiers or Information
BPF 86 03	08 18	Roof Surfacing Loss Payment Schedule
BPF 87 01	08 18	Condominium Association Coverage
BPF 87 90	08 21	Condominium Enhancement Endorsement
BPF 89 01	08 18	Directors And Officers Liability Endorsement - Silver (Condominiums, Co-Ops, Associations)
BPF 89 04	08 18	Colorado Changes Directors And Officers Liability Endorsement (Condominiums, Co-Ops, Associations)
CFRN 015	05 22	Notice to Policyholders - Exclusion - Biometric Data, Identifiers or Information
CFRN 026	09 23	Notice of Increase in Premium
IL 75 26	12 05	Colorado Endorsement Change
PLCF 28833	12 20	Offer Of Terrorism Insurance Coverage And Disclosure Of Premium

The complete policy consists of these declarations and the forms and endorsements at the time of issue.

Each paid claim under **Section II - Liability** and **Medical Expenses** coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to **Section II - Liability** in the BUSINESSOWNERS COVERAGE FORM and any attached endorsements.