



2958115

CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
11/03/2023

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).

PRODUCER USI Insurance Services, LLC One South Nevada Avenue, Suite 230 Colorado Springs, CO 80903 (719) 228-1070	CONTACT NAME: EOI Direct PHONE (A/C, No, Ext): 877-456-3643 E-MAIL ADDRESS: help@eoidirect.com	FAX (A/C, No):
INSURED Sierra Pointe Homeowners Association c/o RowCal Management CO, LLC 9705 45th Ave Unit 421150 Minneapolis, MN 55442	INSURER(S) AFFORDING COVERAGE INSURER A: United States Liability Insurance Co. INSURER B: Pennsylvania Manufacturers Assoc. INSURER C: Continental Casualty Company INSURER D: Federal Insurance Company INSURER E: INSURER F:	
		NAIC #

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			NPP1615008	11/1/2023	11/1/2024	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ Included
							Hired/Non-Owned	\$ Included
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	2023010652636Y	11/1/2023	11/1/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
C	Crime/Fidelity/Emp Dish			618825847	11/1/2023	11/1/2024	\$1,877,000	\$7,500 Deductible
C	Directors & Officers			618825847	11/1/2023	11/1/2024	\$1,000,000	\$1,000 Retention

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

Master Certificate, XXXXXXXXXXXXXXXX, XXXXXXXXXXXXXXXX, CO 00000

*****See Attached*****

CERTIFICATE HOLDERMaster Certificate
.
XXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXX, CO 00000
Loan Number: N/A**CANCELLATION**

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

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ADDITIONAL REMARKS SCHEDULE

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AGENCY USI Insurance Services		NAMED INSURED Sierra Pointe Homeowners Association	
POLICY NUMBER		RowCal Management CO, LLC 9705 45th Ave, Unit 421150	
CARRIER	NAIC CODE	Minneapolis, MN 55442	
		EFFECTIVE DATE: 11/01/2023	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ **FORM TITLE:** _____

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

RowCal Management CO, LLC

9705 45th Ave, Unit 421150

Minneapolis, MN 55442

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

COVERAGE: Property

INSURERS: AXIS Surplus Insurance Company, Westchester Surplus Lines Insurance Company, Arch Specialty Insurance Company, Mt. Hawley Insurance

Company, Starr Surplus Lines Insurance Company, Kinsale Insurance Company, Great Lakes Insurance SE

POLICY NUMBERS: P-001-001255861-01, D9499262A 004, ESP1048598-00, MCP0173419, 23SLCFM12155301, 0100266885-0, GLSE181399

POLICY DATES: 11/1/2023 to 11/1/2024

Total Buildings Limit: \$35,051,728

Deductible: \$25,000

Wind/Hail Coverage is included. Wind/Hail Deductible: 7%

of Units: 282

of Buildings: 32

100% Replacement Cost applies up to the buildings limit

No Coinsurance/Agreed Value

Special causes of loss excluding earthquake and flood

Subject to policy limits and exclusions.

Equipment Breakdown/Boiler & Machinery coverage is included up to \$5,000,000.

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 \$500,000

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

Waiver of Subrogation in favor of unit owners applies.

Locations must be shown on policy for coverage to apply.

This is the only complex covered under the policies listed on the certificate. Policy does not cover multiple unaffiliated projects.

Severability of Liability (Separation of Insureds) is included.

If Mortgagee is listed as Certificate Holder, then Holder is recognized as Mortgagee.

Cancellation - 10 days prior to cancellation date.

*****PLEASE READ*****

Insurance is for Building structures and common areas for which the Association has a requirement to insure per the governing documents. The governing documents showing the insurance requirement of the Association can only be provided by the Unit Owner or the Community Manager. Each Unit Owner or their Tenant may be required to carry an HO6 (owner's policy) or HO4 (tenant's policy) and should consult their own insurance agent to confirm coverages needed.

Location Addresses Covered by Policy (All addresses are Colorado Springs, CO 80917)

*Street Address *Building Limit *Number of Units

3110 A-H Van Teylingen Drive - \$905,862 - 8 Units

3120 A-H Van Teylingen Drive - \$963,955 - 8 Units

3130 A-H Van Teylingen Drive - \$1,127,159 - 8 Units

3140 A-R Van Teylingen Drive - \$1,965,942 - 18 Units

3150 A-H Van Teylingen Drive - \$865,492 - 8 Units

3210 A-F Van Teylingen Drive - \$893,308 - 6 Units

3220 A-M Van Teylingen Drive - \$1,644,952 - 13 Units

3230 A-H Van Teylingen Drive - \$962,109 - 8 Units

3240 A-H Van Teylingen Drive - \$1,127,159 - 8 Units

3250 A-H Van Teylingen Drive - \$878,293 - 8 Units

3260 A-H Van Teylingen Drive - \$856,015 - 8 Units

3405 A-H Rebecca Lane - \$962,109 - 8 Units

3415 A-F Rebecca Lane - \$796,075 - 6 Units

3425 A-H Rebecca Lane - \$1,127,159 - 8 Units

3430 A-F Parkmoor Drive - \$658,719 - 6 Units

3435 A-H Rebecca Lane - \$1,021,718 - 8 Units

3440 A-V Parkmoor Drive - \$2,451,981 - 22 Units

3445 A-M Rebecca Lane - \$1,420,332 - 13 Units

3450 A-H Parkmoor Drive - \$1,065,496 - 8 Units



ADDITIONAL REMARKS SCHEDULE

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FORM NUMBER: _____ **FORM TITLE:** _____

3455 A-H Rebecca Lane - \$794,352 – 8 Units
 3460 A-H Parkmoor Drive - \$1,127,159 – 8 Units
 3465 A-K Rebecca Lane - \$1,203,959 – 11 Units
 3470 A-H Parkmoor Drive - \$905,862 – 8 Units
 3475 A-M Rebecca Lane - \$1,376,517 – 13 Units
 3485 A-M Rebecca Lane - \$1,603,228 – 13 Units
 3510 A-H Parkmoor Drive - \$962,109 – 8 Units
 3515 A-F Rebecca Lane - \$649,119 – 6 Units
 3520 A-H Parkmoor Drive - \$905,862 – 8 Units
 3525 A-H Rebecca Lane - \$987,587 – 8 Units
 3530 A-H Parkmoor Drive - \$1,127,159 – 8 Units
 3535 A-M Rebecca Lane - \$1,376,517 – 13 Units
 3480 Parkmoor Drive (Clubhouse/Office) - \$338,467
 Total Buildings Limits - \$35,051,728
 All Detached Garages and Outdoor Property - \$1,561,197

Cancellation – 10 days prior to cancellation date