

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Robert Harris Insurance Agency, Inc.		NAMED INSURED Brittany Place of Breckenridge Homeowners Association, Inc.	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

LOCATION: 304 MAIN STREET, BRECKENRIDGE, SUMMIT COUNTY, BRECKENRIDGE, CO 80424
OF BUILDINGS - 3
OF UNITS - 11

COMMERCIAL PROPERTY COVERAGE:
INSURANCE CARRIER: AMERICAN ALTERNATIVE INS. CO. / CAU
POLICY #CAU508530-4
POLICY TERM: 03/17/21 - 03/17/22

BLANKET BUILDING LIMIT: \$1,275,000 GUARANTEED REPLACEMENT COST
SEWER / DRAIN BACKUP: GUARANTEED REPLACEMENT COST
ORDINANCE OR LAW:
A) UNDEAMAGED PORTIONS - GUARANTEED REPLACEMENT COST
B) DEBRIS REMOVAL - \$300,000 -ACTUAL LOSS SUSTAINED
C) INCREASED COST OF CONSTRUCTION - \$300,000 - INCREASED REPLACEMENT COST
LOSS OF INCOME: ACTUAL LOSS SUSTAINED
EQUIPMENT BREAKDOWN: GUARANTEED REPLACEMENT COST
STANDARD POLCY DEDUCTIBLE: \$2,500 PER OCCURRENCE
WIND/HAIL DEDUCTIBLE: \$5,000

CRIME / FIDELITY COVERAGE:
INSURANCE CARRIER: AMERICAN ALTERNATIVE INS. CO. / CAU
POLICY #CAU508530-4
POLICY LIMIT: \$150,000
DEDUCTIBLE: \$0
CAUSES OF LOSS: EMPLOYEE DISHONESTY, COMPUTER FRAUD, DEPOSITORS FORGERY
VALUATION: ACTUAL LOSS SUSTAINED