



COMMON POLICY DECLARATIONS

Named Insured HIGHLAND GREENS CONDOMINIUM
 *SEE J7104 AMEND TO NAMED INS

F006072620-001-00001

Account No.

Prod. Count

07-50-22H

60438-74-42

Agent No.

Policy Number

Mailing Address PO BOX 4987
 BRECKENRIDGE, CO 80424-4987

Form of Business
 Individual
 Joint Venture
 Limited Liability Co.
 Corporation
 Partnership
 Other Organization

Business Description:
 Condominium

Policy Period From 04-01-2024 (not prior to time applied for)
 To 04-01-2025 12:01 A.M. Standard time at your mailing address shown above.

If this policy replaces other coverage that ends at noon standard time of the same day this policy begins, this policy will not take effect until the other coverage ends. **This policy will continue for successive policy periods as follows:** If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect.

This policy consists of the following coverage parts listed below and for which a premium is indicated. This premium may be subject to change.

| Coverage Parts | Premium After Discount And Modification |
|--|---|
| Condominiums Owners Policy | \$32,040.00 |
| Preferred Community Association Management | \$467.00 |
| Certified Acts Of Terrorism - See Disclosure Endorsement | Included |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total (See Additional Fee Information Below) | \$32,507.00 |