

**BUSINESSOWNERS POLICY  
CONDOMINIUM CERTIFICATE OF INSURANCE**

American Family Mutual Insurance Company  
American Family Insurance Company  
6000 American Pkwy Madison, WI 53783-0001

Agent's Name, Address  
**Monica Goldstein Agency**  
**97 Main St Suite W-106**  
**Edwards, CO 81632**

**This Certificate of Insurance is issued as a matter of information only and confers no rights upon the Certificate Holder.**

**This Certificate of Insurance does not amend, extend or alter the coverage afforded by the policy listed below.**

**This Certificate does not constitute a contract between the issuing insurer, authorized representative and the certificate holder.**

**INSURED**

CONDOMINIUM ASSOCIATION'S NAME AND ADDRESS

**The Riverwalk Village Market Building Condominium Association Inc**  
**PO Box 2264, Edwards, CO 81632**

| POLICY NUMBER       | POLICY EFFECTIVE DATE<br>(Mo., Day, Yr.) | POLICY EXPIRATION DATE<br>(Mo., Day, Yr.) |
|---------------------|------------------------------------------|-------------------------------------------|
| <b>05-XZ7479-01</b> | <b>05/31/20</b>                          | <b>05/31/21</b>                           |

**★ PROPERTY**

Risks of Direct Physical Loss       Named Perils      \$ **2,500** Property Deductible

| PROPERTY COVERED                 | VALUATION OF COVERED PROPERTY                                                                   | LIMIT OF INSURANCE     |
|----------------------------------|-------------------------------------------------------------------------------------------------|------------------------|
| Building(s) .....                | <input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value | \$ <b>9,350,961.00</b> |
| Business Personal Property ..... | <input type="checkbox"/> Replacement Cost                                                       | \$ .....               |

**★ BUSINESSOWNERS LIABILITY AND MEDICAL EXPENSES**

| COVERAGE                                                   | LIMIT OF INSURANCE |
|------------------------------------------------------------|--------------------|
| Liability And Medical Expenses                             | <b>\$2,000,000</b> |
| Damage To Premises Rented To You                           | \$50,000           |
| Medical Expenses - Any One Person                          | <b>\$5,000</b>     |
| Aggregate Limit (Other Than Products Completed Operations) | <b>\$4,000,000</b> |
| Products - Completed Operations Aggregate Limit            | <b>\$4,000,000</b> |

Consult the Condominium Association's policy for insurance afforded Unit Owners.

**CERTIFICATE HOLDER(S)**      Effective Date 05/31/20       New Ownership/Occupancy       Change Ownership/Occupancy

UNIT OWNER'S NAME AND ADDRESS OR UNIT DESIGNATION NO.

**\*Blank**

UNIT OWNER'S MORTGAGEE NAME AND ADDRESS

**\*Blank**

LOAN NO.

UNIT OWNER'S CONTRACT OF SALES NAME AND ADDRESS

LOAN NO.

MISCELLANEOUS

**18 Units; Crime & Fidelity Policy 05-XZ7479-03 (\$1000 Deductible applies per occurrence; property manager included per endorsement) Employee Theft (Blanket) \$50,000; Law & Ordinance is endorsed with \$300,000 per building in coverage; Buildings covered to replacement cost as noted above; Equipment & mechanical coverage (BP 87 01) included.**

DATE ISSUED  
**01/21/2021**

AUTHORIZED REPRESENTATIVE  
**Troy Tyler**