

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)8/5/2024

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)

th	is certificate does not confer rights to	the	certit	ficate holder in lieu of su							
PRODUCER						CONTACT NAME: Michael Parr					
Waterton Insurance Group LLC						PHONE (A/C, No, Ext): (720) 683-6721 FAX (A/C, No):					
7600 E Orchard Road						ADDRESS: Mike.Parr@watertoninsurance.com					
Suite 130S						INSURER(S) AFFORDING COVERAGE NAIC #					
Greenwood Village CO 80111					INSURER A: UNITED STATES LIAB INS CO					25895	
INSURED					INSURER B: TECHNOLOGY INS CO INC					42376	
Bent Tree Property Owners Association					INSURER C:						
	Sox 2631										
ror	30X 2031				INSURER D:						
Management				00.00122	INSURER E :						
Monument				CO 80132	INSURER F :						
			NUMBER:	REVISION NUMBER: BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOR.				/ DEDIOE	. 1		
IN Ce	DICATED. NOTWITHSTANDING ANY REQUESTRICKS MAY PERGUESTRICKS MAY BE ISSUED OR MAY PERGUEUSIONS AND CONDITIONS OF SUCH P	JIREM TAIN,	IENT, THE I	TERM OR CONDITION OF A INSURANCE AFFORDED BY	NY CON	ITRACT OR OT DLICIES DESCR	THER DOCUMI RIBED HEREIN	ENT WITH RESPECT TO WH	ICH THIS		
INSR LTR TYPE OF INSURANCE			SUBR WVD	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMITS	S		
	COMMERCIAL GENERAL LIABILITY	INSE	WVD			(MINING BY 1111)	(MINING BY 1 1 1 1)		\$	1,000,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED	\$ \$	100,000	
	SEANIO-NIABE A GOODIN							(\$ \$	5,000	
Α			NPP1631389			05/03/2024	05/03/2025	` , ' ,	\$ \$	1,000,000	
11	GEN'L AGGREGATE LIMIT APPLIES PER:			14111031309		03/03/2024	03/03/2023		\$ \$	2,000,000	
	PRO-									Included	
									\$ \$	meraded	
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$		
	ANY AUTO							(Ea accident)	\$		
	OWNED SCHEDULED							` ' /	\$		
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE	\$ \$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$ \$		
	UMBRELLA LIAB OCCUB								•		
	H _{EVOEOD LAB}								\$		
	CEATIVIS-IVIADE	1							\$		
	DED RETENTION \$ WORKERS COMPENSATION								\$		
	AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER		1 000 000	
В	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	TWC4468048			08/18/2024	08/18/2025	E.L. EACH ACCIDENT	\$	1,000,000	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	DÉSCRIPTION OF OPERATIONS below								\$	1,000,000	
	Directors and Officers							Directors and Officers			
A	Directors and Officers			NPP1631389		05/03/2024	05/03/2025	Each Claim		1,000,000	
								Aggregate		1,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
CERTIFICATE HOLDER						CANCELLATION					
OLIVIII IOATE HOLDER						CANCELLATION					
COI					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						
					Mich	ael Parr					