

NOTICE:

WITH RESPECT TO ASSOCIATION LIABILITY COVERAGE PART, THIS IS A CLAIMS MADE POLICY AND, SUBJECT TO ITS PROVISIONS, APPLIES ONLY TO ANY CLAIM FIRST MADE AGAINST THE NAMED ENTITY INSURED DURING THE POLICY PERIOD. NO COVERAGE EXISTS FOR CLAIMS FIRST MADE AFTER THE END OF THE POLICY PERIOD UNLESS, AND TO THE EXTENT THAT, THE EXTENDED REPORTING PERIOD APPLIES.

THE CRIME COVERAGE PART APPLIES TO A COVERED LOSS SUSTAINED RESULTING FROM ACTS OR EVENTS OCCURRING DURING THE POLICY PERIOD UNLESS CERTAIN CONDITIONS CONCERNING PRIOR INSURANCE ARE MET.

DEFENSE COSTS INCURRED UNDER COVERAGE PARTS A REDUCE THE LIMIT OF LIABILITY AND ARE SUBJECT TO THE RETENTION. PLEASE REVIEW THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

| NAMED ENTITY AND MAILING ADDRESS | NAMED ENTITY NUMBER AND PHYSICAL ADDRESS |
|---|---|
| Item 1. HOLIDAY ACRES PROPERTY OWNERS ASSOCIATION c/o SUE RAMEY/ALLAN BUNCH P.O. BOX 2705 Pagosa Springs, CO 81147 | P.O. BOX 2705 Pagosa Springs, CO 81147 |
| POLICY NUMBER | INSURER |
| 0250725463 | Continental Casualty Company CNA Plaza, 333 Wabash Avenue Chicago, IL 60604 |

Item 2. **Policy Period:** 05/15/2017 to 05/15/2018
 12:01 a.m. local time at the address stated in Item 1.

Item 3. **Policy Premium:** \$1,703.00

Total Amount Due: \$1,703.00

Item 4. Notices to Insurer:

Claims: Claim Manager
 CNA Global Specialty Lines
 40 Wall Street, 8th Floor
 New York, New York 10005

All other notices:
 Ian H. Graham Insurance, a division of
 Affinity Insurance Services, Inc.
 Managing General Underwriter
 15303 Ventura Boulevard, 12th Floor
 Sherman Oaks, CA 91403

Item 5. Coverage:

This Policy is issued with the Limits of Liability and Retentions set forth, subject to the Prior or Pending Date, if applicable all as set forth in the schedule below.

Defense Costs are included within the applicable limit of liability for **Association Liability Coverage Part**. Defense costs are neither covered nor included within the applicable limits(s) of liability for the **Crime Coverage Part**.



This Policy includes *only* those coverages designated with a "Yes" as "Included" in column ① of the Coverage Schedule set forth below. *If neither "Yes" or "No" is designated for a Coverage Part or a specific Crime Coverage Part Insuring Agreement, such Coverage Part or specific Crime Coverage Part Insuring Agreement is not included.*

| COVERAGE PART | ① INCLUDED (YES OR NO) | ② SCHEDULED LIMITS OF LIABILITY | ③ SCHEDULED RETENTIONS | ④ PRIOR OR PENDING DATE |
|---|------------------------------|---|------------------------------|-------------------------------|
| Association Liability | Yes | \$1,000,000 Aggregate Limit of Liability for all Loss paid on behalf of all Named Entity Insureds for all Claims first made during each Policy Period. | \$1,000 | 05/15/1997 |
| Crime: | | \$ per loss | | Not Applicable |
| Insuring Agreement 1: Employee Dishonesty | No | N/A | N/A | |
| Insuring Agreement 2: Forgery or Alteration | No | N/A | N/A | |
| Insuring Agreement 3: Theft, Disappearance and Destruction | No | N/A | N/A | |
| Insuring Agreement 4: Computer Fraud and Wire Transfer Fraud | No | N/A | N/A | |

Item 6. Any natural person or entity property manager hired by the **Named Entity** to provide **Property Management Services**.