

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/25/2024

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).

		INSURER F:	
Denver CO 80206		INSURER E: Great American Ins Company	16691
191 University Blvd #358	I	INSURER D: Travelers Casualty and Surety	31194
Pioneer Hills Owners Association c/o Teleos Management Group		INSURER C : Pennsylvania Manufacturers' As	12262
INSURED	PIONHIL-01	ınsurer в : Greenwich Insurance Company	22322
	License#: 45339	INSURER A: Auto Owners Insurance Company	18988
		INSURER(S) AFFORDING COVERAGE	NAIC#
Englewood CO 80112		E-MAIL ADDRESS: certificate@thinkccig.com	
CCIG 155 Inverness Drive West		PHONE (A/C, No, Ext): 303-799-0110	FAX (A/C, No): 303-799-0156
PRODUCER		CONTACT NAME:	

COVERAGES CERTIFICATE NUMBER: 1584648101 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
Χ	COMMERCIAL GENERAL LIABILITY			74284448	4/22/2024	4/22/2025	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
GEN							GENERAL AGGREGATE	\$2,000,000
Х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:						HNOA	\$1,000,000
AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
Χ	UMBRELLA LIAB X OCCUR			PPP7486049	4/22/2024	4/22/2025	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$5,000,000
	DED X RETENTION \$ 0							\$
	EMPLOYEDELLIA DILITY			2024011078757Y	4/22/2024	4/22/2025	X PER OTH-	
ANYF	PROPRIETOR/PARTNER/EXECUTIVE N	N/A					E.L. EACH ACCIDENT	\$1,000,000
(Man	idatory in NH)	,,,					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
				107081610 EPPE29748005	4/22/2024 4/22/2024	4/22/2025 4/22/2025	Deductible: \$3,750 Deductible: \$1,000	\$375,000 \$1,000,000
	X AUT X WOFAND ANYYOFFI (Man I) (Man DES) Crim	CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/BARTHER/EXECUTIVE Y/N ANYPROPRIETOR/BARTHER/EXECUTIVE	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Crime/Fidelity/Employee Dishonest	CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Crime/Fidelity/Employee Dishonest	CLAIMS-MADE X OCCUR GENL AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Crime/Fidelity/Employee Dishonest Crime/Fidelity/Employee Dishonest AUTOS ONLY SCHEDULED AUTOS ONLY AUTOS ONLY PPP7486049 PPP7486049 2024011078757Y	GENL AGGREGATE LIMIT APPLIES PER: X POLICY PROJECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Crime/Fidelity/Employee Dishonest 107081610 4/22/2024	CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED NON-OWNED AUTOS ONLY HIRED NON-OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE N N/A MOPPRIETOR/PARTNER/EXECUTIVE N N/A If yes, describe under DESCRIPTION OF OPERATIONS below Crime/Fidelity/Employee Dishonest 107081610 4/22/2024 4/22/2025	CLAIMS-MADE X OCCUR CLAIMS-MADE X OCCUR CLAIMS-MADE X OCCUR CRITICAL AGGREGATE LIMIT APPLIES PER: X POLICY

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Crime and D&O listed on the first page with policy date/limits/deductibles

Fidelity, General Liability, and Directors & Officers Liability policies include Property Management Company as an insured: Teleos Management Croup 191 University Blvd #358

Denver, CO 80206

Crime/Fidelity/Employee Dishonesty policy includes coverage for Property Management Company and Manager, Board Members and Volunteers See Attached...

CERTIFICATE HOLDER	CANCELLATION	
MASTER CERTIFICATE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
XXXX XXXXXXXXXX XXXXXX XX XXXXX	AUTHORIZED REPRESENTATIVE	

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AGENC I	CUSIDNER	ID.	I IOINI IIL-U	, ,

LOC #:



ADDITIONAL REMARKS SCHEDULE

Dana	4	of	2
Page	1	Oi	- 2

CARRIER NAIC CODE	
POLICY NUMBER 191 University Blvd #358 Denver CO 80206	
AGENCY CCIG Pioneer Hills Owners Association c/o Teleos Management Group	

ADDITIONAL REMARKS THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE FORM NUMBER: _ COVERAGE: Primary Property POLICY CARRIER: General Star Indemnity Company POLICY NUMBER: IAG973808 POLICY DATES: 4/22/2024 – 4/22/2025 BUILDING COVERAGE LIMIT: \$15,000,000 DEDUCTIBLE: \$50,000 WATER DAMAGE DEDUCTIBLE: \$100,000 Per Occurrence WIND/HAIL COVERAGE INCLUDED: 10% of the Declared Values of all insured property at the time of loss, including the Declared Values of any Business Personal Property, Business Income, Rental Value, or Extra Expense coverage. COVERAGE: Excess Property POLICY CARRIER: Convex Insurance UK Limited POLICY NUMBER: SP15079500 POLICY DATES: 4/22/2024 - 4/22/2025 BUILDING COVERAGE LIMIT: \$70,635,141 **DEDUCTIBLES: Follows Primary Property** # Buildings: 64 # Units: 197 Replacement Cost applies up to the buildings limit Coinsurance - NIL Special Causes of Loss excluding Earthquake and Flood Subject to policy limits and exclusions. Equipment Breakdown/Boiler & Machinery Included Ordinance or Law Included: A - Undamaged Portion of Building is Included in Building Limit B & C - Demolition Cost and Increased Cost of Construction Combined Limit is 10% of the building limit. Inflation Guard is not included on policy. Limits are reviewed/reassessed annually to ensure adequate building coverage on project. Waiver of Subrogation is included in favor of unit owners applies. Locations must be shown on policy for coverage to apply. This is the only complex covered under the policies listed on the certificate. Policy does not cover multiple unaffiliated project. Severability of Liability (Separate of Insureds) is included. If Mortgagee is listed as Certificate Holder, then Holder is recognized as Mortgagee. Cancellation – 10 days prior to cancellation date. ******PI FASF RFAD*** Insurance is for Building structures and common areas for which the Association has a requirement to insure per the governing documents. The Governing Documents showing the insurance requirement of the Association can only be provided by the Unit Owner or the Community Manager. Each Unit Owner or their Tenant may be required to carry an HO6 (owner's policy) or HO4 (tenant's policy) and should consult their own insurance agent to confirm coverages needed. Location Addresses covered by Policy (All addresses are Aurora, CO 80015) *Street Addresses *Building Limit *Number of Units 14631, 14641 E. Poundstone Dr – \$737,180 – 2 Units 14651, 14661 E. Poundstone Dr – \$802,483 – 2 Units 14691, 14701 E. Poundstone Dr - \$803,609 - 2 Units

**Refer Addresses "Building Limit Number of Units 14631, 14641 E. Poundstone Dr - \$737,180 - 2 Units 14691, 14701 E. Poundstone Dr - \$802,483 - 2 Units 14711, 14721 E. Poundstone Dr - \$733,240 - 2 Units 14731, 14741 E. Poundstone Dr - \$701,434 - 2 Units 14751, 14761 E. Poundstone Dr - \$701,434 - 2 Units 14771, 14781 E. Poundstone Dr - \$733,240 - 2 Units 14791, 14801 E. Poundstone Dr - \$733,240 - 2 Units 14791, 14801 E. Poundstone Dr - \$733,240 - 2 Units 14821, 14831 E. Poundstone Dr - \$733,240 - 2 Units 14841, 14851 E. Poundstone Dr - \$716,634 - 2 Units 14861, 14871 E. Poundstone Dr - \$801,076 - 2 Units 14632, 14642 E. Poundstone Dr - \$803,609 - 2Units 14652, 14662 E. Poundstone Dr - \$801,076 - 2 Units 14692, 14702 E. Poundstone Dr - \$801,076 - 2 Units 14712, 14722 E. Poundstone Dr - \$801,076 - 2 Units 14732, 14742 E. Poundstone Dr - \$801,076 - 2 Units 14732, 14742 E. Poundstone Dr - \$801,076 - 2 Units 14752, 14762 E. Poundstone Dr - \$801,076 - 2 Units 14752, 14762 E. Poundstone Dr - \$801,076 - 2 Units 1472, 14782 E. Poundstone Dr - \$801,076 - 2 Units 14822, 14832 E. Poundstone Dr - \$733,240 - 2 Units 14824, 14852 E. Poundstone Dr - \$733,240 - 2 Units 14824, 14852 E. Poundstone Dr - \$806,142 - 2 Units 14863, 14633 E. Crestridge Dr - \$733,804 - 2 Units 14603, 14613 E. Crestridge Dr - \$739,996 - 2 Units 14673, 14663 E. Crestridge Dr - \$739,996 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$739,996 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14683 E. Crestridge Dr - \$730,434 - 2 Units 14673, 14

AGENCY CUSTOMER ID:	PIONHIL-01	
LOC #:		



ADDITIONAL REMARKS SCHEDULE

Page	2	of	2
Page	2	Oi	- 2

AGENCY CCIG		NAMED INSURED Pioneer Hills Owners Association c/o Teleos Management Group
POLICY NUMBER		191 University Blvd #358 Denver CO 80206
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
14693, 14703 E. Crestridge Dr. = \$737, 180 – 2 Units 14713, 14725 E. Crestridge Dr. = \$733, 240 – 2 Units 14733, 14745 E. Crestridge Dr. = \$801,076 – 2 Units 14733, 14748 E. Crestridge Dr. = \$801,076 – 2 Units 14773, 14783 E. Crestridge Dr. = \$801,076 – 2 Units 14773, 14783 E. Crestridge Dr. = \$801,076 – 2 Units 14803, 14813 E. Crestridge Dr. = \$801,076 – 2 Units 14823, 14833 E. Crestridge Dr. = \$701,434 – 2 Units 14824, 14854 E. Crestridge Dr. = \$733,240 – 2 Units 14624, 14654 E. Crestridge Dr. = \$733,240 – 2 Units 14624, 14654 E. Crestridge Dr. = \$730,743 – 2 Units 14624, 14674 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 14704, 14714 E. Crestridge Dr. = \$801,076 – 2 Units 15009, 15019 E. Poundstone Pl. = \$1,080,016 – 2 Units 15009, 15019 E. Poundstone Pl. = \$1,080,016 – 2 Units 15009, 15019 E. Poundstone Pl. = \$1,080,016 – 2 Units 15009, 15019, 15009, 15079, 15099 E. Poundstone Pl. = \$2,281,567 – 5 Units 15009, 15070, 15080, 15090 E. Poundstone Pl. = \$2,281,567 – 5 Units 15009, 15070, 15080, 15090 E. Poundstone Pl. = \$1,878,418 – 4 Units 15019, 15019, 15019, 15019, 15019 E. Poundstone Pl. = \$1,876,418 – 4 Units 14881, 14891, 14991, 1491, 14921, 14931 E. Poundstone Dr. = \$2,747,470 – 6 Units 14882, 14992, 14902, 14972 E. Poundstone Pl. = \$2,382,819 – 6 Units 14882, 14992, 14902, 14972 E. Poundstone Dr. = \$2,387,740 – 6 Units 14983, 14993, 15013, 15023 E. Crestridge Dr. = \$2,382,819 – 6 Units 14983, 14993, 15013, 15023 E. Crestridge Dr. = \$2,382,819 – 6 Units 14984, 14954, 14954, 14954, 14956, 14976 E. Crestridge Dr. = \$2,382,819 – 6 Units 14994, 15004, 15014 E. Crestridge Dr. = \$2,382,819 – 6 Units 14994, 15004, 15014 E. Crestridge Dr. = \$2,382,819 – 6 Units
Cancellation – 10 days prior to cancellation date.
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