

AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY

POLICY NUMBER
05XT739101

DECLARATIONS

CUSTOMER BILLING ACCOUNT
018-523-929 16

NAMED INSURED DANIELS LOFT CONDOMINIUM OWNERS ASSOCIATION INC

MAILING ADDRESS C/O WYLENE CAROL
108 N TEJON ST APT F
COLORADO SPGS, CO 80903-1437

POLICY PERIOD FROM 12-01-2018 TO 12-01-2019
12:01 A.M. Standard Time at your mailing address shown above.

FORM OF BUSINESS CORPORATION

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

SECTION I PROPERTY

ALL PROPERTY COVERAGES ARE SUBJECT TO THE FOLLOWING:

COVERED CAUSES OF LOSS SPECIAL - RISK OF DIRECT PHYSICAL LOSS

COVERAGE PROVIDED INSURANCE AT THE FOLLOWING DESCRIBED PREMISES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN UNLESS COVERAGE IS PROVIDED BY AN ENDORSEMENT.

DESCRIPTION OF PREMISES

PREMISES NO. 0001 BUILDING NO. 001
LOCATION 108 N TEJON ST
COLORADO SPGS, CO 80903-1437

BUILDING INTEREST LEASED TO OTHERS
PREDOMINANT OCCUPANCY CONDOMINIUM ASSOCIATION - RESIDENTIAL WITH MERCANTILE

NUMBER OF UNITS 10
CONSTRUCTION MASONRY NON-COMBUSTIBLE
YEAR BUILT 2002
COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 373

POLICY PROPERTY DEDUCTIBLE \$5,000

OTHER PROPERTY DEDUCTIBLE(S)

OPTIONAL COVERAGE/GLASS DEDUCTIBLE \$500

COVERAGE	LIMIT OF INSURANCE	PREMIUM
BUILDING REPLACEMENT COST	\$3,986,481	\$7,526.00
BUSINESS PERSONAL PROPERTY REPLACEMENT COST	\$60,813	\$132.00
AUTOMATIC INCREASE IN COVERAGE	2%	

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AGENT 222-306
MICHAEL BRANDL AGENCY INC.
1965 DOMINION WAY STE 120
COLORADO SPRINGS, CO 80918-1449

PHONE
719-630-7557

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ENTRY DATE 09-20-2018

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MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICYPOLICY NUMBER
05XT739101**DECLARATIONS**CUSTOMER BILLING ACCOUNT
018-523-929 16ADDITIONAL COVERAGE
BUSINESS INCOMELIMIT OF INSURANCE
ACTUAL LOSS SUSTAINEDPREMIUM
INCLUDED

Property forms and endorsements applying to this premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 85 17 09 15 BP 04 30 01 06 BP 84 10 07 98 BP 84 11 07 98
BP 85 11 12 08

APPLICABLE PROPERTY ENDORSEMENT CHARGES \$204.00

TOTAL ADVANCE PROPERTY PREMIUM \$7,862.00

Property forms and endorsements applying to all premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 06 01 01 07 BP 83 01 07 98 BP 83 02 01 07

SECTION II LIABILITY AND MEDICAL EXPENSES

Except for Damage To Premises Rented To You, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to **Section II Liability** in the BUSINESSOWNERS COVERAGE FORM and any attached endorsements.

COVERAGE	LIMIT OF INSURANCE		
AGGREGATE LIMIT (OTHER THAN PRODUCTS COMPLETED OPERATIONS)	\$4,000,000		
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$4,000,000		
DAMAGE TO PREMISES RENTED TO YOU - ANY ONE PREMISES	\$50,000		
LIABILITY - EACH OCCURENCE LIMIT	\$2,000,000		
PREM 0001 BLDG 001 MEDICAL EXPENSES - ANY ONE PERSON	\$5,000		
LOCATION	PREMIUM BASIS	RATE	ADVANCE PREMIUM
PREMISES NO. 0001 BUILDING NO. 001	10 UNITS		\$53.00
APPLICABLE BUSINESS LIABILITY ENDORSEMENT CHARGES		\$148.00	
TOTAL ADVANCE BUSINESS LIABILITY PREMIUM		\$201.00	

Liability forms and endorsements applying to all premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 04 04 01 06 BP 04 17 07 02 BP 04 39 07 02 BP 04 54 01 06
BP 04 93 01 06 BP 05 17 01 06 BP 05 77 01 06 BP 10 05 07 02

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