



November 11, 2008

Association Insurance Ready Reference for Riverwalk at Edwards Property

Please retain this form in your insurance file along with your policy.

Thank you for choosing Neil-Garing Insurance for your Community Association Master Insurance Policy. To provide the best possible service to the unit owners, we ask that you review and observe the following procedures regarding coverage, claim reporting and certificates of insurance.

Retain this form for future reference with the actual policy to answer any questions that may arise. Coverage questions should be referred to Neil-Garing Insurance. It is preferred that the property manager or a board member makes contact.

Please provide a copy of the enclosed Unit Owners letter, the Association Insurance Summary, a certificate of insurance, and a copy of the association declarations and bylaws to each unit owner.

Your Neil-Garing Team

Producer: Steve DeRaddo
Commercial Service Representative: Susan Schmitz
Commercial Claims Representative: Cassie Maddox
Phone: 970-945-9111
Toll Free: 800-255-6390
Fax: 970-945-2350

Claim Reporting

Report all claims promptly to Neil-Garing Insurance at 970-945-9111 to the attention of Cassie Maddox.

Certificates

All requests for certificates of insurance for lending purposes must be faxed to our office at 970-945-2350 and must include the full name, physical address and complete mortgagee clause for each owner. Blank certificates may not be issued under any circumstance.

Coverage

Please reference the following page for a summary of all insurance policies written through Neil-Garing Insurance.

The attached Unit Owner letter summarizes the coverage as applicable to the Association relative to our agreed interpretation of its Declarations and Bylaws.

This notice is furnished to you in accordance with Colorado Revised Statute 38-33.3-209.4 (2) (f)



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Association Insurance Summary for Riverwalk at Edwards Property

Package Policy

Carrier: QBE Insurance Corporation
Policy #: 2154172/26992
Policy Term: 11/15/08 to 11/15/09
Association Buildings/Structures: \$3,250,000
Loss Assessment Income: Included
Property Deductible: \$2,500
General Liability: \$3,000,000 per occurrence
Medical Payments: \$5,000 per person
Hired & Non-Owned Auto: \$3,000,000

Directors and Officers Liability

Carrier: Travelers
Policy #: 104210176
Policy Term: 11/19/08 to 11/15/09
Limit: \$1,000,000 per occurrence/aggregate
Deductible: \$5,000

Fidelity

Carrier: QBE Insurance Corporation
Policy #: 2154172/26992
Policy Term: 11/15/08 to 11/15/09
Employee Dishonesty Limit: \$75,000
Deductible: \$0
Forgery or Alteration Limit: \$50,000
Deductible: \$0

Commercial Automobile Policy

Carrier: Acuity
Policy #: L796649
Policy Term: 3/18/08-3/18/09
Liability Limit: \$1,000,000 Combined Single Limit
1999 Ford VIN # 1FMDU34E7XZB91284
Other than Collision Deductible: \$500
Collision Deductible: \$500
Uninsured/Underinsured motorist limit: \$1,000,000
Medical Payments: \$5,000