



EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Jesse Dryer Agency LLC 2777 Crossroads Blvd Ste 2 Grand Junction CO 81506		PHONE (A/C, No, Ext): (970) 444-1111	COMPANY NAME AND ADDRESS Truck Insurance Exchange Member Of The Farmers Insurance Group Of Companies 6301 Owensmouth Ave., Woodland Hills, CA 91367	NAIC NO:
FAX (A/C, No):	E-MAIL ADDRESS: service@jessedryeragency.com		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE:	SUB CODE:		POLICY TYPE Habitational BOP	
AGENCY CUSTOMER ID #:		LOAN NUMBER		POLICY NUMBER 607138400
NAMED INSURED AND ADDRESS SOLAR SIXPLEX CONDOMINIUM C/O CRESTED YETI PROPERTY MANAGEMENT 2 ELCHO AVE, CRESTED BUTTE, CO 81224		EFFECTIVE DATE 08/11/2025	EXPIRATION DATE 08/11/2026	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)		THIS REPLACES PRIOR EVIDENCE DATED:		

PROPERTY INFORMATION (ACORD 101 may be attached if more space is required) BUILDING OR BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION 6 units in 1 building located at 26 CASTLE RD CRESTED BUTTE CO 81224
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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION		PERILS INSURED	BASIC	BROAD	<input checked="" type="checkbox"/> SPECIAL
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$ 1,750,000		DED: \$5,000			
<input type="checkbox"/> BUSINESS INCOME	<input type="checkbox"/> RENTAL VALUE	YES	NO	N/A	If YES, LIMIT: Actual Loss Sustained; # of months:
BLANKET COVERAGE					If YES, indicate value(s) reported on property identified above: \$
TERRORISM COVERAGE					Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?					
IS DOMESTIC TERRORISM EXCLUDED?					
LIMITED FUNGUS COVERAGE					If YES, LIMIT: DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)					
REPLACEMENT COST		<input checked="" type="checkbox"/>			
AGREED VALUE					
COINSURANCE					If YES, %
EQUIPMENT BREAKDOWN (If Applicable)		<input checked="" type="checkbox"/>			If YES, LIMIT: Included DED: \$2,500
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg		<input checked="" type="checkbox"/>			If YES, LIMIT: Included DED: None
- Demolition Costs		<input checked="" type="checkbox"/>			If YES, LIMIT: \$43,750 DED: None
- Incr. Cost of Construction		<input checked="" type="checkbox"/>			If YES, LIMIT: \$43,750 DED: None
EARTH MOVEMENT (If Applicable)					If YES, LIMIT: DED:
FLOOD (If Applicable)					If YES, LIMIT: DED:
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		<input checked="" type="checkbox"/>			If YES, LIMIT: DED:
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:		<input checked="" type="checkbox"/>			If YES, LIMIT: DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS					

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST		LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE		LENDER SERVICING AGENT NAME AND ADDRESS
<input checked="" type="checkbox"/> CONTRACT OF SALE	<input type="checkbox"/> MORTGAGEE			
NAME AND ADDRESS		AUTHORIZED REPRESENTATIVE Jesse Dryer		

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ADDITIONAL REMARKS SCHEDULE

AGENCY Jesse Dryer Agency LLC	NAMED INSURED Solar Sixplex Condominium
POLICY NUMBER 607138400	EFFECTIVE DATE: 08/11/2025 - 08/11/2026
CARRIER Truck Insurance Exchange	
NAIC CODE	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER: **28** FORM TITLE: **EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**

Coverage Option Valuation Limit of Insurance Deductible/Waiting Period
 Building ERC \$1,750,000 \$5,000
 Accounts Receivables - On-Premises \$5,000 \$5,000
 Building - Automatic Increase Amount 8%
 Building Ordinance Or Law - 1 (Undamaged Part) Included None
 Building Ordinance Or Law - 2 (Demolition Cost) \$43,750 None
 Building Ordinance Or Law - 3 (Increased Cost) \$43,750 None
 Building Ordinance Or Law - Increased Period of Restoration Included None
 Cosmetic Damage Exclusion
 Debris Removal 25% Of Loss + 10,000
 Electronic Data Processing Equipment \$5,000 \$5,000
 Exterior Building Glass Included \$5,000
 Outdoor Property \$2,500 \$5,000
 Outdoor Property - Trees, Shrubs & Plants (Per Item) \$500 \$5,000
 Personal Effects \$2,500 \$5,000
 Pollutant Clean Up And Removal Aggregate \$10,000 \$5,000
 Specified Property \$2,500 \$5,000
 Valuable Paper And Records - On-Premises \$5,000 \$5,000

Base Coverage and Extensions Limit of Insurance Deductible/Waiting Period
 Accounts Receivables - Off-Premises \$2,500 \$5,000
 Association Fees And Extra Expense \$100,000
 Back Up Of Sewers Or Drains \$50,000 \$5,000
 Crime Conviction Reward \$5,000 None
 Drone Aircraft - Direct Damage (per occurrence) \$10,000 \$5,000
 Drone Aircraft - Direct Damage (per item) \$2,500 \$5,000
 Employee Dishonesty \$5,000 \$500
 Fire Department Service Charge \$1,000 None
 Fire Extinguisher Systems Recharge Expense \$2,500 None
 Forgery And Alteration \$2,500 \$5,000
 Limited Biohazardous Substance Coverage - Per Occurrence \$10,000 \$5,000
 Limited Biohazardous Substance Coverage - Aggregate \$20,000 \$5,000
 Limited Cov. - Fungi Wet Rot Dry Rot & Bacteria - Aggregate \$15,000 \$5,000
 Master Key \$5,000 None
 Master Key - Per Lock \$100 None
 Money And Securities - Inside Premises \$5,000 \$500
 Money And Securities - Outside Premises \$5,000 \$500
 Money Orders And Counterfeit Paper Currency \$1,000 \$5,000
 Newly Acquired Or Constructed Property \$250,000 \$5,000
 Outdoor Signs \$2,500 \$500
 Outdoor Signs - Per Sign \$1,000
 Personal Property At Newly Acquired Premises \$100,000 \$5,000
 Personal Property Off Premises \$5,000 \$5,000
 Preferred Community Association Management - Crisis Response \$50,000 None
 Premises Boundary 100 Feet
 Preservation Of Property 30 Days
 Valuable Paper And Records - Off-Premises \$2,500 \$5,000



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POLICY NUMBER 607138400			
CARRIER Truck Insurance Exchange	NAIC CODE	EFFECTIVE DATE: 08/11/2025 - 08/11/2026	

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Coverage Amount/Date

General Aggregate (Other Than Products & Completed Operations) \$4,000,000

Products And Completed Operations Aggregate \$2,000,000

Personal And Advertising Injury Included

Each Occurrence \$2,000,000

Tenants Liability (Each Occurrence) \$75,000

Medical Expense (Each Person) \$5,000

Pollution Exclusion - Hostile Fire Exception Included

Preferred Community Association Management - Per Claim \$1,000,000

Preferred Community Association Management - Aggregate \$1,000,000

Directors and Officers Errors and Omissions Liability - Per Claim/Aggregate Included

Third Party Discrimination and Employment Practices Liability - Per Claim/Aggregate Included

Preferred Community Association Management - Self Insured Retention \$1,000

Preferred Community Association Management - Retroactive Date Date Established

Preferred Community Association Management - Prior Knowledge Date 08/11/2025

Separation Of Insureds

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this policy to the first Named Insured, this insurance applies:

- a. As if each Named Insured were the only Named Insured; and
- b. Separately to each insured against whom claim is made or "suit" is brought.