

BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

PRODUCER LaVonne Gorsuch 501 Highway 50 Grand Jct, CO 81503-1907 CONTACT NAME: LaVonne Gorsuch PHONE (A/C, No, Ext): (970) 243-1117 E-MAIL ADDRESS: lavonne.gorsuch.gopp@statefarm.com PRODUCER CUSTOMER ID		FAX (AC, NO): (970) 245-9839 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr> <td>INSURER A : State Farm Fire and Casualty Company</td> <td>25143</td> </tr> <tr><td>INSURER B :</td><td></td></tr> <tr><td>INSURER C :</td><td></td></tr> <tr><td>INSURER D :</td><td></td></tr> <tr><td>INSURER E :</td><td></td></tr> <tr><td>INSURER F :</td><td></td></tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : State Farm Fire and Casualty Company	25143	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURED RENAISSANCE IN THE REDLANDS HOME OWNERS ASSO 2650 NORTH AVE UNIT 116 GRAND JCT, CO 81501-6404																

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) REFER TO ACORD 101.		

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.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	☒ PROPERTY CAUSES OF LOSS DEDUCTIBLES ☐ BASIC ☐ BROAD ☒ SPECIAL ☐ EARTHQUAKE ☐ WIND ☐ FLOOD BUILDING CONTENTS	96-KV-7365-3	03/12/2025	03/1		

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

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AGENCY LaVonne Gorsuch		NAMED INSURED RENAISSANCE IN THE REDLANDS HOME OWNERS ASSO	
POLICY NUMBER 96-KV-7365-3			
CARRIER State Farm Fire and Casualty Company	NAIC CODE 25143	EFFECTIVE DATE: 03/12/2025	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: 24 **FORM TITLE:** Certificate of Property Insurance

Association Type: Residential Community Association Policy

Forms, Options and Endorsements:

CMP-4100	Businessowners Coverage Form
FE-6999.3	Terrorism Insurance Cov Notice
CMP-4561.5	Policy Endorsement

Forms, Options and Endorsements:

CMP-4550	Residential Community Assoc
CMP-4206.2	Amendatory Endorsement
CMP-4815	Dir & Officers \$2,000,000

Coverages:

Business Liability	\$2,000,000
Medical Payments	\$5,000
Products-Completed Operations	\$4,000,000
General Aggregate	\$4,000,000

Coverage

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within the Association Covenants, Conditions, and Restrictions (CC&Rs) including the following types of property within a unit, regardless of ownership:

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