



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/15/2025

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).

PRODUCER	JESSE DRYER 2558 Patterson Rd Grand Junction, CO 81505	(07-50-318)	CONTACT NAME:
			PHONE (A/C, NO, EXT): (970) 444-1111
INSURED	FAIRWAY TOWNHOMES ASSOCIATION FAIRWAY TWNHOMES C/O HPM 2650 NORTH AVE STE 116 GRAND JUNCTION, CO 81501	E-MAIL ADDRESS: jdryer@farmersagent.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: Truck Insurance Exchange	21709
		INSURER B: Farmers Insurance Exchange	21652
		INSURER C: Mid Century Insurance Company	21687
		INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAME 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	ADDTL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
C	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/>	□	□	606724895	12/31/2025	12/31/2026	EACH OCCURRENCE	\$1,000,000	
	DAMAGE TO RENTED PREMISES (Ea Occurrence)						\$75,000		
	MED EXP (Any one person)						\$5,000		
	PERSONAL & ADV INJURY						\$1,000,000		
	GENERAL AGGREGATE						\$2,000,000		
	PRODUCTS - COMP/OP AGG						\$1,000,000		
							\$		
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:									
C	AUTOMOBILE LIABILITY	□	□	606724895	12/31/2025	12/31/2026	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
	ANY AUTO OWNED AUTOS ONLY						BODILY INJURY (Per person)	\$	
	X HIRED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
	GAR LIAB						PROPERTY DAMAGE (Per accident)	\$	
							GAR AGGREGATE	\$	
□	UMBRELLA LIAB	□	□				EACH OCCURRENCE	\$	
	EXCESS LIAB						AGGREGATE	\$	
	DED RETENTION \$							\$	
□	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A	□				PER STATUTE	\$	
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
2059 S BROADWAY UNIT F, GRAND JUNCTION, CO, 81507

CERTIFICATE HOLDER

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.
	AUTHORIZED REPRESENTATIVE