





## ADDITIONAL REMARKS SCHEDULE

<b>AGENCY</b> LaVonne Gorsuch, Agent		<b>NAMED INSURED</b> ALPINE MEADOWS HOMEOWNERS ASSOCIATION INC 2650 NORTH AVE UNIT 116	
<b>POLICY NUMBER</b> 96-CF-0183-2		GRAND JCT, CO 81501-6404	
<b>CARRIER</b> State Farm Fire and Casualty Company	<b>NAIC CODE</b> 25143	<b>EFFECTIVE DATE:</b> 05/15/2026	

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 24      FORM TITLE: CERTIFICATE OF PROPERTY INSURANCE**

CORNER OF H & 27 RD 40 UNITS

FORMS, OPTIONS AND ENDORSEMENTS:

- CMP-4100      BUSN COVG FORM
- CMP-4206.2    AMENDATORY END
- CMP-4550      RES COMM END
- CMP-4710      EMPL DISHON
- FD-6007       IM ATTACH DEC
- CMP-4508      MONEY & SECUR
- FE-3650       ACV END
- CMP-4532      EXCL CYBER INC
- CMP-4815      D&O LIAB
- FE-6999.3     TERRORISM NOTE
- CMP-4746.1    HIRED AUTO LIA
- FE-8739       IM CONDITIONS
- FE-8743.1     IM COMP PROP
- CMP-4705.2    LOSS OF INCOME

COVERAGES:

    COVERAGE INFORMATION  
 A-BILDING \$129,200

LOSS INC 12 MONTH

- L-BUSINESS LIAB    \$1,000,000
- GENERAL AGGREGT \$2,000,000
- PCO AGGREGT      \$2,000,000
- M-MED/PERSON     \$5,000

DEDUCTIBLE APPLIED: \$1000 ALL PER OTHER DED MAY APPLY

COVERAGE:

Unless otherwise endorsed, this policy provides replacement cost coverage on described property and common areas detailed within Association bylaws including the following types of property within a unit, regardless of ownership:

1. Fixtures, improvements and alterations that are a part of the building or structure; and
2. Appliances such as those used for refrigerating, ventilating, cooking, dishwashing, laundering, security or housekeeping.

Replacement cost coverage is subject to the terms and conditions of the policy and any endorsements.  
 Coverage under this policy may have been modified to provide actual cash value coverage rather than replacement cost coverage, or remove specified property from coverage, if any endorsement containing in its title "ACV" or "Actual Cash Value," or "Additional Property Covered" is identified on this Certificate of Insurance.

Endorsements: FE-3650, FE-3653, FE-3658, and FE-3659 (Actual Cash Value)- These endorsements describe what the term "actual cash value" means where used in the policy. However, these endorsements do not change any replacement cost coverage provided by the policy.  
 This policy provides coverage on a standalone/individual condominium association.  
 Commercial General Liability  
 State Farm refers to this coverage as Business Liability Coverage. Coverage amount shown is Per Occurrence.  
 Loss of Rents, Loss of Income and Extra Expense  
 If this coverage is shown, limits are "Actual Loss Sustained". Contact the agent to confirm the number of day's coverage.