

**AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.**

MADISON, WISCONSIN 53783-0001

**COMMERCIAL LIABILITY UMBRELLA POLICY**POLICY NUMBER  
05XQ761704**DECLARATIONS**CUSTOMER BILLING ACCOUNT  
021-451-198 09NAMED SNOWBRIDGE SQUARE CONDOMINIUM ASSOCIATION  
INSUREDMAILING PO BOX 4533  
ADDRESS FRISCO, CO 80443-4533POLICY PERIOD FROM 10-15-2017 TO 10-15-2018  
12:01 A.M. Standard Time at your mailing address shown above.

FORM OF BUSINESS CORPORATION

**LIMITS OF INSURANCE**

AGGREGATE LIMIT \$2,000,000

EACH OCCURRENCE LIMIT \$2,000,000

PERSONAL AND ADVERTISING INJURY LIMIT \$2,000,000

SELF INSURED RETENTION \$10,000

**SCHEDULE OF UNDERLYING INSURANCE**

UNDERLYING INSURANCE - BUSINESSOWNERS POLICY INCLUDING CERTIFIED ACTS OF TERRORISM	LIMIT OF INSURANCE
AGGREGATE LIMIT (OTHER THAN PRODUCTS-COMPLETED OPERATIONS)	\$4,000,000
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$4,000,000
LIABILITY & MEDICAL EXPENSES	\$2,000,000

UNDERLYING INSURANCE - AUTOMOBILE LIABILITY INCLUDING CERTIFIED ACTS OF TERRORISM	LIMIT OF INSURANCE
HIRED & NON OWNED AUTO LIABILITY	\$2,000,000

**TOTAL COMMERCIAL LIABILITY UMBRELLA PREMIUM****CERTIFIED ACTS OF TERRORISM****TOTAL ADVANCE PREMIUM**

Forms and endorsements applying to and made part of this policy at time of issue:

CU 00 00 05 17	CU 00 01 12 07	CU 00 04 05 09	CU 01 46 09 00	CU 21 12 09 00
CU 21 15 09 00	CU 21 18 09 00	CU 21 23 02 02	CU 21 27 12 04	CU 21 31 01 15
CU 21 42 12 04	CU 21 50 03 05	CU 21 52 12 05	CU 21 56 06 06	CU 71 01 10 01
CU 71 02 07 10	CU 71 06 10 01	CU 71 08 10 01	CU 73 01 12 04	IL 00 17 11 98
IL 01 25 11 13	IL 02 28 09 07	IL 09 85 01 15	IL 75 26 12 05	IL 75 40 03 16

AGENT 167-307  
WIESE AGENCY, INC  
PO BOX 24359  
SILVERTHORNE, CO 80497-4359PHONE  
970-668-6600PAGE 01  
BRANCH KJR022 NEWB  
ENTRY DATE 10-20-2017