

**BUSINESSOWNERS PACKAGE POLICY
CONDOMINIUM CERTIFICATE OF INSURANCE**

American Family Insurance Company
American Family Mutual Insurance Company if selection box is not checked.
6000 American Parkway, Madison, Wisconsin 53783-0001

Agent's Name, Address:
Jeff Champine
9250 East Costilla Avenue #603
Greenwood Village, CO 80112
(303) 706-1766

This Certificate of Insurance is issued as a matter of information only and confers no rights upon the Certificate Holder.

This Certificate of Insurance does not amend, extend or alter the coverage afforded by the policy listed below.

Effective Date: 11/21/2014 New Ownership/Occupancy Change Ownership/Occupancy

CERTIFICATE HOLDER(S)

UNIT OWNER'S NAME AND ADDRESS OR UNIT DESIGNATION NO. <p align="center">Colorado Springs, CO 80923</p>	
UNIT OWNER'S MORTGAGEE NAME AND ADDRESS 1 st . 2 nd .	LOAN NO. 1 st . 2 ND .
UNIT OWNER'S CONTRACT OF SALES NAME AND ADDRESS	LOAN NO.

This is to certify that the UNIT OWNER is insured under a policy issued to the Insured named below and is in force at this time.

INSURED

CONDOMINIUM ASSOCIATION'S NAME AND ADDRESS Oakwood Village HOA 6015 Lehman Drive Suite 205 Colorado Springs, CO 80918			
MORTGAGEE'S NAME AND ADDRESS			
KIND OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MO., DAY, YR.)	POLICY EXPIRATION DATE (MO., DAY, YR.)
BUSINESSOWNERS PACKAGE POLICY	05-XU735801	11/21/2015	11/21/2016

★ SECTION I - BUSINESS PROPERTY Special Form Named Perils Form **\$ 2500** Deductible

PROPERTY COVERED	VALUATION OF COVERED PROPERTY	LIMITS OF INSURANCE +
Building(s)	<input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value	\$ 8,643,345
Business Personal Property	<input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value	\$ 0 # of Units: 54

+ Condominium Association's Limits. (The Unit Owner is covered as a percentage of the total, as their interest may appear.)

★ SECTION II - BUSINESS LIABILITY AND MEDICAL PAYMENTS

COVERAGE	LIMITS OF INSURANCE
Bodily Injury and Property Damage	\$2,000,000 Each Occurrence ++ \$4,000,000 Aggregate ++
Medical Payments	\$5,000 Each Person
Employee Dishonesty	\$50,000

Consult the Condominium Association's policy for insurance afforded Unit Owners.
++ Products - Completed Operations aggregate is equal to each occurrence limit and is included in policy aggregate.

UNIFORM CONDOMINIUM ACT STATES

Subject to the provisions of the Mortgage Clause, all proceeds covering any loss of property collectively owned shall be payable to Insurance Trustee, identified below:	
INSURANCE TRUSTEE'S NAME AND ADDRESS	
DATE ISSUED December 17, 2015	<i>Jeff Champine</i>