CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/20/2026

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
Stailey Insurance Corporation
2084 S. Milwaukee Street
Denver CO 80210-

CONTACT NAME: Certificate Department
PHONE (A/C, No, Ext): (303)759-2796 **FAX (A/C, No):** (303)759-2960
E-MAIL ADDRESS: certificates@staileycorp.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Kinsale Insurance Co	38920
INSURER B : Pinnacol Assurance	41190
INSURER C : Travelers Cas & Surety Co	31194
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
The Timbers Homeowners Association I, Inc.
C/O The CO Property Mgmt Specialists, Inc.
19751 E Mainstreet, Suite 275
Parker CO 80138-

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X **COMMERCIAL GENERAL LIABILITY** CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:			010048080000	09/30/2026	09/30/2027	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
A	**AUTOMOBILE LIABILITY** ANY AUTO OWNED AUTOS ONLY X SCHEDULED AUTOS X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY			010048080000	09/30/2026	09/30/2027	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) 	$ 1,000,000 $ $ $ $
	UMBRELLA LIAB OCCUR **EXCESS LIAB** CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE AGGREGATE 	$ $ $
B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		4222433	09/30/2026	09/30/2027	PER STATUTE X OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 500,000 $ 500,000 $ 500,000
C	Fidelity - Includes Management Co.			105679192	09/30/2024	09/30/2027	$7,500 Ded Limit	$750,000
C	Directors/Officers - Claims Made			106993357	09/30/2026	09/30/2027	$1,000 Ded Limit	$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
PROPERTY COVERAGE Eff 9/30/26 to 09/30/2027 -- Westchester Surplus - Policy #D39185131004- Limit $5,000,000; Excess Property - Richmond National Policy #RN70502237-03 Limit $10,000,000: Excess Property Scottsdale Insurance Policy #SP12007803 - Limit $80,614,278. TOTAL LIMIT OF INSURANCE $95,614,278. $100,000 Deductible all covered losses except 5% Wind/Hail Deductible. 394 Units; 103 Buildings. PROPERTY FORMS INCLUDE: 100% Replacemet Cost up to the Limit of Insurance. No Coinsurance; Special Form , Ordinance/Law Coverage A,B,C, No Inflation Guard. Equipment Breakdown - Travelers #BME1-8S206074 - Eff 09/30/26-09/30/27 - 10 day cancellation notice applies. Severability of Interest/Separation of Insured's included. **PLEASE REFER TO ASSOCIATIONS LEGAL DOCUMENTS FOR INSURANCE RESPONSIBILITY FOR OWNERS vs ASSOCIATION**.

CERTIFICATE HOLDER

26-27 Informational Certificate of Insurance

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CANCELLATION AI 085612

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 Jennifer Matheson

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