

February 20, 2025

Shelbie Laurita MICHAEL TRUJILLO STATE FARM AGENCY 2019 S Townsend Ave Montrose. CO 81401-5444

Producer Facsimile: (970) 249-5344

RE: DOUBLE DIAMOND CONDOMINIUM ASSOCIATION

COVERAGE: Condominium & Homeowners D&O Liability Insurance

CLIENT NO.: 329148

POLICY NUMBER: PS0000007712500

BINDER EXPIRATION DATE: Until replaced by Policy

Dear Shelbie:

Thank you for your order on the captioned account. The Binder of Insurance is enclosed. The Invoice for the premium will be mailed directly to the Insured. Please review the Binder carefully and advise if you note any discrepancies or have any questions. If there are no discrepancies, please forward the Binder of Insurance and the attached Policyholder Disclosure to the Insured.

Please note, coverage is in force and premium is being earned.

Please do not hesitate to contact us if you have any questions or comments. Again, thank you for this order and we look forward to being of further service.

Best Regards,

Michael Jeffs Underwriter



Total Premium:

Telephone: (866) 737-6877 Facsimile: (847) 572-6262

BINDER OF INSURANCE

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	PER THE TERMS OF THIS DOCUMENT - COVERAGE IS IN FORCE AND PREMIUM IS BEING EARNED		
1.	. Delivered To: Shelbie Laurita		
	MICHAEL TRUJILLO STATE FARM AGEI	NCY	
	2019 S Townsend Ave		
	Montrose, CO 81401-5444		
	Producer Code #: 062211 Producer Fa	acsimile: (970) 249-5344	
С	Coverage is bound pursuant to the following terms and conditions:		
2.	. Parent Organization: DOUBLE DIAMOND CONDO	MINIUM ASSOCIATION	
	350 S Mahoney		
	Telluride, CO 81435		
	Client Code #: 329148		
3.	·	n the date stated unless extended in writing by State Farm	
	Specialty Products or unless superc	ceded by the Policy or Renewal Declarations.	
	Binder Effective Date: February 19, 2025 B	inder Expiration Date: Until replaced by Policy	
	12:01 A.M. standard time at the address of t		
4.	. Policy Provisions: The Policy or Renewal Declaration provided all conditions of this binder	ns will be issued to incorporate the following provisions, r have been met.	
	D-1:#- D0000007740500		
	Policy #: PS0000007712500		
	Policy Period: From: February 19, 2025	To: February 19, 2026	
	12:01 A.M. standard time at the address of		
	Insurer: State Farm Fire and Casualty		
	Program: Condominium & Homeowners	•	
	Coverage Type: Claims – Made	Defense Costs: Defense Costs Outside Limits	
	Limit of Liability	Retention	
	In the Aggregate	Each Claim	
	\$1,000,000	\$1,000	
5.	. Premium Payment & Terms: (Invoice to Follow Under S	eparate Cover)	
	Premium Payment Plan: Annually	0	
	Policy Period Premium: \$777.0	J	

\$777.00



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BINDER OF INSURANCE

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PSCHO1001(04/11)	Condominium And Homeowner Association Liability Policy Including Employment Practices Liability Coverage
PS1039-01(01/15)	Certified Acts of Terrorism Endorsement
PS1041 (01/15)	Policyholder Disclosure Notice of Terrorism Insurance Coverage
PS1044 (02/21)	U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") Advisory Notice To Policyholders
PS1045 (02/21)	Trade Or Economic Sanctions
PSCHO1020(04/11)	Prior And Pending Matter Exclusion
PSCHO1026CO(04/11)	Colorado Amendatory Endorsement

8. Subjectivities:

Subject to our receipt & approval of the following requirements:

Not Applicable

This binder requires payment of premium to State Farm Specialty Products, at the location listed on the invoice, on the premium due date shown in the invoice. This binder may be cancelled if payment is not received by the premium due date on the invoice.

In the event of cancellation or expiration of this binder without a Policy or Renewal Declarations Page being issued, the Insurer shall be entitled to an earned premium for the time in force as calculated by the Insurer in accordance with the provisions of the applicable specimen policy or expiring policy.

Date of Issue: February 21, 2025

By:

Authorized Representative