



AMERICAN FAMILY INSURANCE COMPANY
817 COLORADO AVE STE 106
GLENWOOD SPRINGS CO 81601

AmFam.com

1-800-MY AMFAM (692-6326)

October 24, 2024



000180EC124DAA2042980530 022486 101
MOUNTAIN VALLEY HOMEOWNERS ASSOCIATION
PO BOX 11155
ASPEN CO 81612-9117

Regarding your Businessowners Policy

Our offer to renew your insurance policy is enclosed

Your renewal bill will be sent separately

Policy number	Billing account number	Renewal Date
91004-43237-61	653-757-748-02	12/29/2024

Thank you for putting your trust in American Family Insurance Company! We value your business and work hard to protect what's important to you.

What is in this packet?

- **Enclosed is our offer to renew the policy noted above.**
- For a summary of the policy coverage and limits provided, please see the enclosed Renewal Declarations. If you would like a more detailed explanation of the coverage, please refer to your policy and endorsements. We have also included other important and/or state specific notices relating to this policy.

What should I do?

- **Please review all of the enclosed information carefully.** Contact your agent if you would like to make any changes to your policy.

Anything else I should know?

- To accept our renewal offer and to maintain continuous coverage, we must receive payment by the date shown on your renewal billing notice, which will be sent separately.
- This renewal offer is only available to you if the premium for the prior term has been paid in full.

American Family Insurance Company
1-800-MY AMFAM (1-800-692-6326) Ext. 76000

Your Agent is:

Trish Romero Agency Inc

tr Romero@amfam.com

817 COLORADO AVE STE 106
Glenwood Springs CO 81601-3352
970-945-8169





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ASPEN CO 81612-9117

Regarding your Businessowners Policy

Notice of Increase in Premium

Please review information below.

Policy Number	Effective Date	Renewal Premium
91004-43237-61	12/29/2024	\$2,599.53

American Family Insurance is committed to ensuring our customers' coverage and premium accurately reflects their current situation. As part of this effort, we regularly review accounts for continued eligibility and other factors.

You are hereby notified in accordance with terms and conditions of the above mentioned policy and in accordance with law, the policy will be renewed effective on the date shown above at 12:01am, standard time, at the address shown in the policy, subject to the higher premium shown in this notice.

Note that the change in premium is based on your expiring policy premium and may include both rate changes, changes to rating factors and any changes in exposures.

This letter does not provide coverage or change Policy Provisions. Please read your policy for complete information regarding this change.

Thank you for being our customer. Your agent has received a copy of this letter. You have a right to cancel your policy. If you have questions about this notice or need assistance making changes to your policy, please contact your agent listed below or call us at 1-800-MY AMFAM (1-800-692-6326).

Commercial Lines Underwriting
1-800-MY AMFAM (1-800-692-6326)

AMERICAN FAMILY INSURANCE COMPANY

Your American Family Agent is:

Trish Romero Agency Inc

817 COLORADO AVE STE 106
Glenwood Springs CO 81601-3352
970-945-8169

tromero@amfam.com

Renewal Declarations Businessowners Policy

Please read your policy



American Family Insurance Company
6000 American Parkway
Madison WI 53783

For customer service and claims service
24 hours a day, 7 days a week

1-800-MY AMFAM (1-800-692-6326)
amfam.com

Named Insured And Mailing Address

Mountain Valley Homeowners Association
PO Box 11155
Aspen CO 81612-9117

Policy Information

Policy number	Policy period	Billing account number
91004-43237-61	12/29/2024 to 12/29/2025 12:01 A.M. Standard Time at your mailing address shown above.	653-757-748-02

Business and Operations Information

Year Started: 2013
Description of Business and Operations:
Form of Business: Corporation

Insurance applies only for coverages for which a limit of insurance or the word "Included" is shown unless coverage is provided by an endorsement. Blanket Insurance applies only for coverages for which a Blanket Limit of Insurance is shown.

As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

In return for the payment of the premium, and subject to all of the terms of this policy, we agree with you to provide the insurance as stated in this policy.

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Policy Number: 91004-43237-61

Premium Information	
Total Advance Premium Per Term (Excluding Surcharges and Terrorism):	\$2,582.85
Cyber Claim Support and Risk Management Surcharge:	\$7.00
Certified Acts of Terrorism Premium (may include state mandated fire loss coverage premium):	\$12.84
Total Advance Premium Per Term:	\$2,599.53
Premium with Customer Full Pay Discount (not available on policies billed to a Third Party):	\$2,476.56
This premium may be subject to adjustment. You may be charged a fee when: (a) you pay less than the full amount due; (b) your payment is late; and/or (c) when your bank does not honor your check or electronic payment. Refer to your Billing Notice for fee amounts.	

Policy Level Coverages	
Property Causes Of Loss	
Causes Of Loss	
General Liability	
Liability And Medical Expense Limit	\$2,000,000 Per Occurrence
Medical Expense Limit	\$10,000
Other Than Products/Completed Operations Aggregate.....	\$4,000,000
Products/Completed Operations Aggregate	\$4,000,000
Cyber Data Breach Coverage	Refer to BPF 84 75
Without Business Interruption	
Directors And Officers Liability	
Level	Silver
Named Association	Mountain Valley Homeowners Association
Directors And Officers Liability Annual Aggregate Limit Of Insurance	\$2,000,000
Deductible	\$0
Retroactive Date	12/29/2013
Extended Reporting Period	No


Agent Information

Trish Romero Agency Inc

tromero@amfam.com

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970-945-8169

AUTHORIZED
REPRESENTATIVE


President


Secretary