

PERSONAL LIABILITY UMBRELLA OF SECURITY POLICY

Named Insured

Your Agency's Name and Address

STEVEN M BATTERSHELL 4614 NICKLAUS CT NIWOT CO 80503-8347 JWR INSURANCE GROUP INC 2950 E HARMONY RD STE 392 FORT COLLINS CO 80528

Your Policy Number: 613138406 311 7 For Policy Service Call: 1-877-872-8737 Your Account Number: 613138406 For Claim Service Call: 1-800-CLAIM33

Policy Period From: 12-06-22 To: 12-06-23 12:01 A.M. Standard Time

Change Effective Date: 05-03-23 Premium for This Change: \$ -18.00

Total Premium \$ 282.00

Coverage Limit of Liability Premium

Personal Liability Umbrella \$1,000,000 Per Occurrence \$ 282.00

PRIMARY INSURANCE

You agree that insurance providing coverage for the following types of Liability: (1) is in force and will be maintained in force as collectible insurance with limits at least as great as the deductible amounts shown below; (2) insures all automobiles and recreational vehicles owned, or leased by or regularly furnished to the insured; (3) insures all premises owned, leased by or leased to the insured; and (4) insures all watercraft owned, leased by or leased to the insured.

Primary Insurance

Deductible Amounts

(a) Comprehensive Personal Liability or Homeowners Liability Coverage	\$300,000 Per Occurrence
(b) Automobile Liability	\$300,000 Per Occurrence. However, if the "insured" has in force at the time of loss "primary insurance" with "auto" liability limits of \$250,000 per person/\$500,000 per occurrence "bodily injury" and \$50,000 "property damage" liability, then the deductible amount applicable to "auto" liability shall be such limits.
(c) Owned Recreational Vehicles Liability If not covered under (a) above	\$300,000 Per Occurrence. However, if the "insured" has in force at the time of loss "primary insurance" with "recreational vehicle" liability limits of \$250,000 per person/\$500,000 per occurrence "bodily injury" and \$50,000 "property damage" liability, then the deductible amount applicable to "recreational vehicle" liability shall be such limits.
(d) Watercraft Liability If not covered under (a) above	\$300,000 Per Occurrence
(e) Business Pursuits	\$300,000 Per Occurrence
(f) Business Property	\$300,000 Per Occurrence
(g) Loss Assessment	\$25,000 Per Occurrence

PERSONAL LIABILITY UMBRELLA OF SECURITY POLICY

Rating Information	No.	Premiums
Basic Premium - Includes One Auto and Primary Residence		\$ 382.00
Additional Autos	01	\$ 40.00
Miscellaneous Exposures (* see below)		
Travelers Companion Policy Credit(s)		\$ 140.00
High Risk Exposure		
Subtotal Premium for \$1,000,000 Limit		\$ 282.00
Increased Limit Factor		
Subtotal Premium		\$ 282.00
Total Premium		\$ 282.00

* Miscellaneous Exposures Included:

Additional Residences	N	Rental Units	N	Pools	N
Recreational Vehicles	N	Business Pursuits	N	Farming	N
Watercraft	N	Incidental Occupancy	N		

Reason for Change:

Licensed Vehicles

Policy Forms and Endorsements

PLUS P1 (03-99)Personal Liability Umbrella of Security Policy PLUS 01 CO (05-17) Special Provisions - Colorado

Your Insurer: The Automobile Insurance Company of Hartford, Connecticut

One of The Travelers Property Casualty Companies

One Tower Square, Hartford, CT 06183

For Your Information

For information about how Travelers compensates independent agents and brokers, please visit www.Travelers.com or call our toll free telephone number 1-866-904-8348. You may also request a written copy from Marketing at One Tower Square, 2GSA, Hartford, Connecticut 06183.

It is important that the information we used to rate your policy is correct. It is your responsibility to make sure that the information on these Declarations is accurate and complete. If any of the information on the Declarations has changed, appears incorrect, or is missing, please advise your Travelers agent or representative immediately. Your Travelers agent or representative is also available to review the information on the Declarations with you.

Thank you for insuring with Travelers. We appreciate your business. If you have any questions about your insurance, please contact your agent or representative.

These declarations with policy provisions PLUS P1 (03-99) and any attached endorsements form your Personal Liability Umbrella Policy. Please keep with your policy for future reference.

Rate Tier: STD Agt Cd: 0DTB28
Terr: 03 Sub-Agt: 856

Prot Cls: Trans Type: Change Comm-Endt:

#Fam: Trans Prem: 18.00CR Comm-PLUS: 1.80CR .100

Commissions

Comm-HO:

\$

%

#Apts/Unit: SPC Case: Comm-VI: Yr Built: Pay Ind: 96 Comm-HO Bus:

Roof Type: Eff Dt: 05-03-23

Constr: BC:

ITV%: SVC Ind: 472 PSO Ind: P EDI Copy: