

Named insured

Antlers Condominium Association, Inc  
680 WEST LIONSHEAD PLACE  
VAIL, CO 81657

**Policy number: 976007786**

Underwritten by:  
Artisan and Truckers Casualty Co  
December 29, 2023  
Policy Period: Jan 1, 2024 - Jan 1, 2025  
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**agent.progressive.com**  
**Online Service**

Make payments, check billing activity, print  
policy documents, update your policy or  
check the status of a claim.

**1-970-824-8185**

**MOUNTAIN WEST INS**  
Contact your agent for personalized service.

**1-800-444-4487**

For customer service if your agent is  
unavailable or to report a claim.

# Commercial Auto Insurance Coverage Summary

## This is your Declarations Page

Your coverage begins the later of January 1, 2024 at 12:01 a.m. or the effective time shown on your application. This policy period ends on January 1, 2025 at 12:01 a.m.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852CO (02/19), 4757CO (02/19), 1891 (02/19), 1198 (07/16), 2366 (02/11), 8610 (02/19), 2367 (06/10), Z311 (02/19), Z313 (04/21), 2368 (06/10), 4852CO (06/05), 4881CO (02/19) and Z228 (01/11).

The named insured organization type is a corporation.

**Outline of coverage**

<b>Policy level coverage</b>	Limits	Deductible	Premium
Uninsured/Underinsured Motorist	\$1,000,000 combined single limit		\$729
<b>Total policy level coverage</b>			<b>\$729</b>
<b>Summary level coverage</b>	Limits	Deductible	Premium
Liability To Others			\$2,842
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Hired Auto Liability To Others			92
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured Motorist Property Damage	Rejected		--
Medical Payments	\$5,000 each person		81
Comprehensive			1,658
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			1,202
See Auto Coverage Schedule	Limit of liability less deductible		
Loan/Lease Gap			57
See Auto Coverage Schedule	25% of the actual cash value		
Rental Reimbursement			165
See Auto Coverage Schedule			
Roadside Assistance			39
See Auto Coverage Schedule	Limit of liability less deductible		
<b>Total summary of coverage</b>			<b>\$6,136</b>
<b>Subtotal policy premium</b>			<b>\$6,865</b>
Waiver of Subrogation Fee			75
Additional Insured Fee			60
Blanket Waiver of Subrogation Fee			75
Blanket Additional Insured Fee			75
<b>Total 12 month policy premium and fees</b>			<b>\$7,150</b>

Cost of Renting, Hiring, or Borrowing: \$5,000 or less (if any)

**Rated drivers**

1. Magdalena King
2. Liana Moore
3. Ramon Torres
4. David Collins
5. Gabriel Kossman
6. Christopher Manning
7. Dakota King
8. Richard Bell
9. Mitchel Finn
10. Elena Rotzin
11. Timothy Coran
12. Patrick Ray
13. Jeffrey N severini
14. Anne Holguin Ortiz

### Auto coverage schedule

- 2015 FORD TRANSIT** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
 VIN: **1FBZX2YG2FKA71752** Garaging Zip Code: 81657 Radius: 200 miles  
 Personal use: N Body type: Passenger Van

Liability Premium	Liability Premium	Med Pay Premium			
	\$847	\$27			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
	\$500	\$442	\$1,000	\$241	
Other Coverages Premium	Rental Limit	Rental Premium			Auto Total
	\$50 per day Max \$1,500	\$55			<b>\$1,612</b>

- 2015 FORD C-MAX** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
 VIN: **1FADP5CU9FL122233** Garaging Zip Code: 81657 Radius: 200 miles  
 Personal use: N Body type: Car - Passenger

Liability Premium	Liability Premium	Med Pay Premium			
	\$1058	\$26			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
	\$500	\$439	\$1,000	\$382	
Other Coverages Premium	Rental Limit	Rental Premium	Roadside Deductible	Roadside Premium	Auto Total
	\$50 per day Max \$1,500	\$55	\$0	\$31	<b>\$1,991</b>

- 2023 GMC YUKON XL** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
 VIN: **1GKS2KKL7PR498519** Garaging Zip Code: 81657 Radius: 200 miles  
 Personal use: N Body type: Luxury SUV

Liability Premium	Liability Premium	Med Pay Premium			
	\$937	\$28			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
	\$500	\$777	\$1,000	\$579	
Other Coverages Premium	Loan Lease Premium	Rental Limit	Rental Premium	Roadside Deductible	Roadside Premium
	\$57	\$50 per day Max \$1,500	\$55	\$0	\$8
					<b>Auto Total</b>
					<b>\$2,441</b>

### Premium discounts

Policy	
976007786	Paid In Full and Multi-Product

**Additional Insured information**

Blanket Additional Insured applies.

- 1. Additional Insured .....  
The Town Of Vail  
75 S Frontage R  
Vail, CO 81657
- 2. Additional Insured .....  
Vail Resorts/Vbcr  
Po Box 38  
Keystone, CO 80435
- 3. Additional Insured .....  
General Motors LLC  
100 Renaissance Center  
Detroit, MI 48265

**Waiver of Subrogation information**

Blanket Waiver of Subrogation applies.

- 1. Waiver of Subrogation .....  
The Town Of Vail  
75 S Frontage R  
Vail, CO 81657
- 2. Waiver of Subrogation .....  
Vail Resorts/Vbcr  
Po Box 38  
Keystone, CO 80435
- 3. Waiver of Subrogation .....  
General Motors LLC  
100 Renaissance Center  
Detroit, MI 48265

**Important notice regarding Uninsured/Underinsured Motorist Coverage**

Please note, UM/UIM benefits may be claimed up to the single policy limit applicable to the vehicle involved in the loss, no matter how many vehicles are insured on this policy.

Also note that when the named insured is a corporation, partnership, or other legal entity, UM/UIM coverage only applies to occupants of the insured automobile and may not be extended to any person's resident relatives. UM/UIM coverage will not apply to pedestrians or occupants of other vehicles, regardless of their affiliation with the insured Corporation or Partnership.

**Company officers**



Secretary