



# CERTIFICATE OF LIABILITY INSURANCE

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 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 License # 322444  
T. Charles Wilson Insurance Service  
2260 South Xanadu Way, Suite 280  
Aurora, CO 80014

CONTACT NAME:  
PHONE (A/C, No., Ext): (303) 368-5757 FAX (A/C, No.): (303) 872-1947  
E-MAIL ADDRESS:

INSURED

Louviers Water & Sanitation District  
390 Union Blvd.  
Suite 400  
Denver, CO 80228-1556

INSURER(S) AFFORDING COVERAGE NAIC #  
INSURER A: **Western Surety** 0022  
INSURER B :  
INSURER C :  
INSURER D :  
INSURER E :  
INSURER F :

**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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b>					
	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$
	CLAIMS-MADE OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
						MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$
						PRODUCTS - COM/OP AGG \$
						\$
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	POLICY PROJECT LOC					
	<b>AUTOMOBILE LIABILITY</b>					
	ANY AUTO					COMBINED SINGLE LIMIT (Ea accident) \$
	ALL OWNED AUTOS	SCHEDULED AUTOS				BODILY INJURY (Per person) \$
	HIRED AUTOS	NON-OWNED AUTOS				BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
	<b>UMBRELLA LIAB</b>	OCCUR				EACH OCCURRENCE \$
	<b>EXCESS LIAB</b>	CLAIMS-MADE				AGGREGATE \$
	DED RETENTION \$					\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	Y/N				WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$
<b>A</b>	<b>Position Schedule</b>		<b>15223211</b>	<b>11/14/2011</b>	<b>11/14/2014</b>	<b>Bond Limit 10,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Position Schedule Bond/5 Board Members \$1,000/1 Treasurer \$5,000/Bond Limit 10,000

**CERTIFICATE HOLDER**

Louviers Water & Sanitation District  
C/O Collins, Cockrel & Cole

**CANCELLATION**

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

*Laraine Dickerson*



# Western Surety Company

## PUBLIC OFFICIAL POSITION SCHEDULE BOND

Name of Oblige Louviers Water and Sanitation District  
Name of Insured Louviers Water and Sanitation District

Bond No. 15223211

WESTERN SURETY COMPANY, as Surety, in consideration of an agreed premium is held and firmly bound unto the Oblige, for the faithful discharge of the duties of any Officer or Employee while occupying any position named in the schedule attached, or added thereto by written acceptance of the Surety, while in the service of the Insured, not exceeding the sum specified in said schedule or written acceptance of the Surety as to said position after the 14th day of November, 2008.

This bond is subject to the following expressed conditions:

1. Automatic coverage is granted for the first thirty days' service of any Officer or Employee occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.

Provided, however, that the automatic coverage herein granted shall be void and of no effect from the beginning, unless during the said thirty day period the Insured has requested in writing that the position be added to the schedule, and the Surety by written acceptance has consented thereto.

2. Coverage on any position may be increased or decreased upon written request of the Insured, and agreed to in writing.

The Surety's liability under this bond shall not be cumulative, and in no event shall the Surety be called upon to pay a loss amounting to an amount greater than the largest single amount for which the position occupied by any Officer or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years.

The liability of the Surety for any Officer or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Officer or Employee. The liability of the Surety shall never exceed the amount in effect for the position when the act of the Officers or Employees causing the loss shall have occurred. In the event there are more Officers or Employees occupying the position covered in the schedule than are listed therein, the Surety shall be liable for such proportion of the amount of coverage as the number of Officers or Employees listed bears to the number of Officers or Employees actually

4. Cancellation hereunder is effective, and all liability under this bond shall cease as to the future acts or omissions as to any Officer or Employee on the date specified in written notice given by the Insured to the Surety as to any or all positions or Officers or Employees, or after thirty days' written notice given by the Surety to the Insured of its intent to cancel this bond in its entirety, or as to any Officer or Employee or position.

5. None of the specifications of this bond shall be altered or waived, except in writing by the Surety executed by the Chairman of the Board, its President, Vice President, Secretary, Assistant Secretary or Treasurer.

6. The liability of the Surety hereunder is subject to the terms and conditions of the following or to the following Riders attached thereto:

Dated this 14th day of November, 2008.

Countersigned  
By [Signature]  
Resident Agent

WESTERN SURETY COMPANY  
By [Signature]  
Surety

SCHEDULE OF POSITIONS EFFECTIVE November 14th, 2008  
 (If there is more than one position of like classification, list by number, thus: Cashier No. 1, Cashier No. 2)

Number	Position	Location	Amount	Premium
1	Director		\$1,000.00	\$3.50
2	Director		\$1,000.00	\$3.50
3	Director		\$1,000.00	\$3.50
4	Director		\$1,000.00	\$3.50
5	Director		\$1,000.00	\$3.50
6	Treasurer		\$5,000.00	\$25.00
*****	***** End of Schedule	*****		

JUN 04 2012

# COLLINS COCKREL & COLE

A PROFESSIONAL CORPORATION

PAUL R. COCKREL  
JAMES P. COLLINS  
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DIRECT DIAL  
303-218-7208

June 1, 2012

VIA E-FILE

Clerk of the Court  
Douglas County District Court  
Douglas County Justice Center  
4000 Justice Way, Suite 2009  
Castle Rock, Colorado 80109

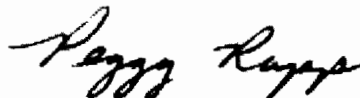
**Re: Louviers Water and Sanitation District  
Case No. 08CV2136**

Dear Sir or Madam:

Attached for filing in the above-referenced District file are the Oaths of Office for Ronald Beane, who was deemed elected to the Board of Directors of the District for a four-year term expiring in May 2016, and Joseph Neu and Valerie Hays who were recently appointed to serve until the next regular election in May 2014, at which point they may run for the unexpired portion of the terms expiring in May 2016. Also attached is a Certificate of Insurance showing that the Public Official Position Schedule Bond previously filed for the Directors and Treasurer of the District is still in full force and effect.

Please let me know if you have any questions.

Sincerely,



Peggy Rupp  
Paralegal

/pr

Attachments

cc: Division of Local Government  
Douglas County Clerk and Recorder  
Diana Miller