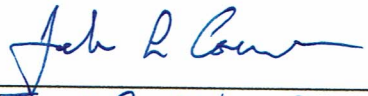


STATE OF COLORADO)
) ss.
COUNTY OF DOUGLAS)

Subscribed and sworn to before me this 10 day of MAY, 2025 by Bruce Blank.

By: 
Name: JOHN COWAN - BOARD PRESIDENT
(Person authorized to administer oaths)

SEAL (if notary public)

Crime Certificate Holder Declaration

Master Coverage Document Number: J05931794
Certificate Number: 25PL-60482-2757

Insurer: Federal Insurance Company (Chubb)
Coverage Period: 1/1/2025 to EOD 12/31/2025

Named Member:

Cherokee Ridge Estates Metropolitan District
c/o Novele Community Management Inc
5750 DTC Pkwy, Ste 101
Greenwood Village, CO 80111

Broker of Record:

NO BROKER

Covered Designated Agent(s):**Coverages and Limits:**

Employee Theft:	\$300,000
<ul style="list-style-type: none">Limit is maximum for each lossEmployee includes executives, full-time, part-time, seasonal, leased and temporary employee(s), interns or non-compensated volunteer.Includes funds from a sponsored benefit plan.	
Public Official Faithful Performance of Duty:	\$300,000
Client Theft:	\$300,000
Forgery or Alteration:	\$300,000
On Premises:	\$300,000
In Transit:	\$300,000
Computer System Fraud:	\$300,000
Funds Transfer Fraud:	\$300,000
Debit, Credit or Charge Card Fraud:	\$300,000
Money Orders and Counterfeit Paper Currency Fraud:	\$300,000
Social Engineering Fraud:	\$250,000

Deductible(s):

All Crime except Social Engineer Fraud:	\$1,500
Social Engineering Fraud:	20% of Social Engineering Fraud Limit

Contribution:

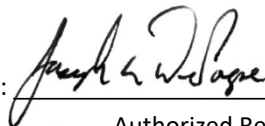
\$862

Policy Forms:

PF-52815 (04/20)	The Chubb Primary SM Commercial Crime Insurance
MS-372431 (02/24)	Governmental Entity (Colorado Special Districts Pool) Endorsement
PF-53127 (02/21)	Colorado Amendatory Endorsement
MS-371960.3 (09/23)	Social Engineering Fraud Official Authorization Endorsement

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Master Crime Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Policy Documents for actual coverage, terms, conditions, and exclusions.

Countersigned by:



Authorized Representative