

Comprehensive Crime Certificate Holder Declaration

Master Coverage Document Number: CR 00 26 11 15

Certificate Number: POL-0002690

Named Member:

Cottonwood Water & Sanitation District
c/o Mulhern MRE, Inc.
188 Inverness Drive West, Suite 150
Englewood, CO 80112

Insurer: Fidelity and Deposit Company of Maryland

Coverage Period: 1/1/2020 to EOD 12/31/2020

Broker of Record:

Denver Agency Company
210 University Blvd, Suite 600
Denver, CO 80206

Covered ERISA Plan:

Covered Designated Agent(s):


Coverage Limits:

| | |
|--|---------------------------------------|
| Public Employee Dishonesty Coverage: | \$5,000 |
| Limit is Per Loss | |
| Faithful Performance of Duty | |
| Officers, Directors, and Trustees | |
| Welfare and Pension Plan ERISA Compliance if Covered Plan is shown | |
| Volunteer Workers as Employees | |
| Forgery or Alteration Coverage: | \$5,000 |
| Theft, Disappearance, and Destruction Coverage: | \$5,000 |
| Inside Premises | |
| Outside Premises | |
| Computer and Funds Transfer Fraud Coverage: | \$5,000 |
| Debit, Credit or Charge Card Forgery Coverage: | \$5,000 |
| Money Orders and Counterfeit Paper Currency Coverage: | \$5,000 |
| Fraudulent Impersonation Coverage: | \$5,000 |
| Crime Deductible: | \$100 |
| Fraudulent Impersonation Deductible: | 20% of Fraudulent Impersonation Limit |
| Contribution: | \$135 |

Policy Forms:

- CR 00260506 Government Crime Policy
- CR 25070300 Include Specified Directors or Trustees on Committee as Employees
- CR 25080300 Include Specified Non-Compensated Officers as Employees
- CR 25090300 Include Volunteer Workers as Employees
- CR 25190506 Add Faithful Performance of Duty
- CR 25120300 Include Treasurers or Tax Collectors as Employees
- CR 02151104 Colorado Changes
- CR 25200300 Debit, Credit or Charge Card Forgery
- CR 25020506 Include Designated Agents as Employees, when listed
- CR 04171115 Fraudulent Impersonation

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 Comprehensive Crime Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Policy Document for actual coverage, terms, conditions, and exclusions.

Countersigned by:  _____
Authorized Representative