DISTRICT COURT, DOUGLAS COUNTY, STATE OF COLORADO Court Address: Douglas County Justice Center 4000 Justice Way, Suite 2009 Castle Rock, CO 80109 Phone Number: 720-437-6200 IN RE HIGHLANDS RANCH METROPOLITAN DISTRICT	
Kathryn G. Winn	▲ COURT USE ONLY ▲
Collins Cole Winn & Ulmer, PLLC	Case No. 80CV127
165 S. Union Blvd., Suite 785	
Denver, Colorado 80228-1556	
Telephone: (720) 617-0080	Division 6
E-Mail: kwinn@cogovlaw.com	
Attorney Reg. No.: 38125	

OATH OF OFFICE

I, Rita Salcedo, do affirm that I will support the Constitution of the United States, the Constitution of the State of Colorado, and the laws of the State of Colorado, and will faithfully perform the duties of the office of Director of the Highlands Ranch Metropolitan District upon which I am about to enter to the best of my ability.

) ss.

alcecto Xtth Signature

STATE OF COLORADO

COUNTY OF DOUGLAS

Subscribed and sworn to before me this $2/\frac{1}{2}$ day of May, 2025, by

uller

Person authorized to administer oaths (County Clerk and Recorder, Clerk of the Court, Court Judge, Notary Public, any Officer of the Board or any person designated by the Board, or any other person authorized to administer oaths)

Title: board Chair

Colorado Special Districts Property and Liability Pool

Public Entity Liability and Auto Physical Damage Certificate Holder Declaration

Master Coverage Document Number: CSD Pool CT C 01 01 25 and CSD Pool PEL 01 01 25

Certificate Number: 25PL-60814-3567	Coverage Period: 1/1/2025 to EOD 12/31/2025	
Named Member:	Broker of Record:	
Highlands Ranch Metropolitan District	USI Colorado, LLC	
62 W. Plaza Drive	PO Box 7050	
Highlands Ranch, CO 80129	Englewood, CO 80155	

Coverage is provided only for those coverages indicated below for which a contribution is shown.

Coverage	Per Occurrence Limit	Annual Aggregate Limit	Deductible	Contribution
Public Entity Liability Coverage including:	\$2,000,000	None		
General Liability	Included	None	\$1,000	\$59,608
Medical Payments - Premises	\$10,000	None	None	Included
Employee Benefits Liability	Included	None	\$1,000	Included
Public Officials Liability	Included	None	\$1,000	\$9,925
Employment Practices Liability	Included	None	*\$\$100,000	Included
Pre Loss Legal Assistance	\$5,000	\$10,000	None	Included
No-Fault Water Intrusion & Sewer Backup	\$200,000 limited to \$10,000 Any One Premises	***\$1,000,000	\$5,000	\$2,146
Cyber	\$200,000	**\$200,000	\$1,000	Included
Fiduciary Liability	\$200,000	**\$200,000	\$1,000	Included
Excess Liability - Coverage agreements A,B,C,D	No Coverage	No Coverage	N/A	No
Auto Liability	Included	None	\$1,000	\$17,939
Medical Payments – Auto	\$10,000	None	None	Included
Non-Owned and Hired Auto Liability	Included	None	None	\$132
Uninsured/Underinsured Motorists Liability	Included	None	None	Included
Auto Physical Damage	Per Schedule	Per Schedule	Per	\$24,385
Hired Auto Physical Damage	\$50,000	N/A	\$500/\$500	\$65
Auto Physical Damage – Employee Deductible Reimbursement	\$2,500	N/A	None	Included

Total Contribution \$114,200

*Employment Practices Liability Deductible: 50% of loss including Indemnity and Legal Expenses subject to a maximum deductible of \$\$100,000 each occurrence.

**A \$5,000,000 All Member Annual Aggregate Limit shall apply to Cyber.

**A \$1,000,000 All Member Annual Aggregate Limit shall apply to Fiduciary Liability.

***No-Fault Water Intrusion & Sewer Backup has \$1,000,000 All Member Annual Aggregate Limit.

Prior Acts coverage applies to previous Claims Made Policies

Additional Endorsements applicable to Member:

Designated Subdistrict

Additional Covered Member - Designated Person or Organization Automatic Status when Required under a written contract or agreement with the Member

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 Public Entity Liability Coverage Document. This Certificate represents only a brief summary of coverages. Please refer to the Master Coverage Document for actual coverage, terms, conditions, and exclusions.

Countersigned by: Authorized Representative