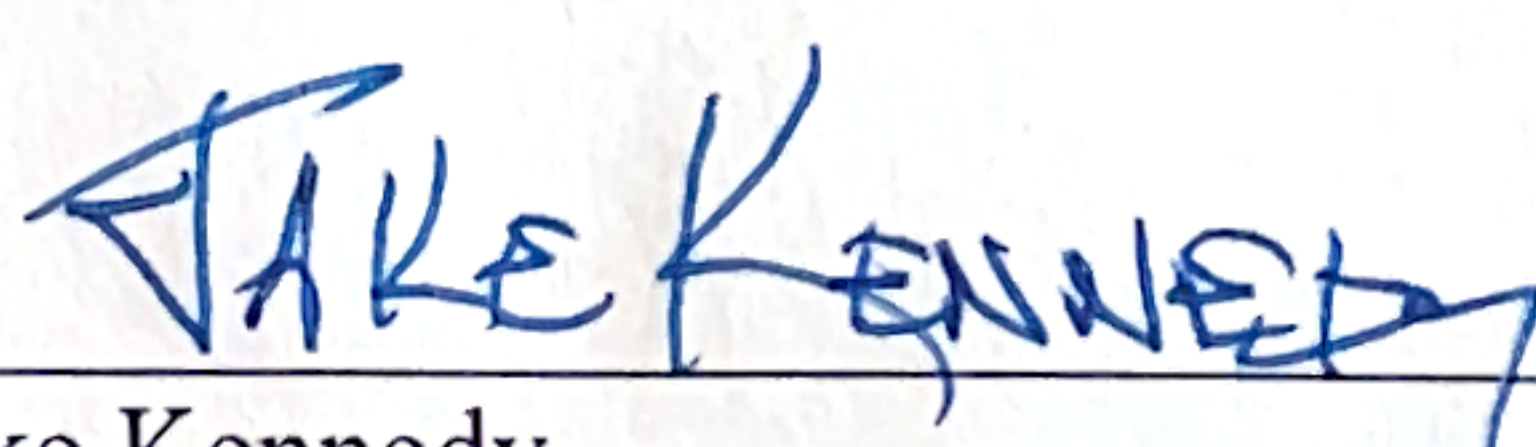


DISTRICT COURT, DOUGLAS COUNTY, STATE OF COLORADO Court Address: _____ _____ _____	
IN THE MATTER OF LOUVIERS WATER AND SANITATION DISTRICT, COUNTY OF DOUGLAS, STATE OF COLORADO	▲ COURT USE ONLY ▲
Attorneys for District: Jeffrey E. Erb, Atty. Reg# 37961 Haley E. Trecarichi, Atty. Reg# 60707 ERB LAW, LLC 8480 E. Orchard Road, Suite 3650 Greenwood Village, CO 80111 Phone Number: (303) 626-7125 E-mail: jerb@erblawllc.com htrecarichi@erblawllc.com	Case Number: _____ Div.: _____ Ctrm: _____
CERTIFICATE OF APPOINTMENT IN THE MATTER OF LOUVIERS WATER AND SANITATION DISTRICT	

I, Jake Kennedy, Member of the Board of Directors of the Louviers Water and Sanitation District, of the County of Douglas, State of Colorado, (the "District") hereby certify that at a regular meeting of the Board of Directors of the District (the "Board") held May 27, 2025 at the Louviers Village Club, 7865 Louviers Blvd., Louviers, CO 80131, the Board determined that a vacancy had occurred on the Board, that it was necessary to appoint a new Director to act until the next regular election of the District, that nominations were open for appointment of a new Director, and that upon unanimous vote there was appointed to the Board the following qualified elector of the District to act until the next regular election of the District:

Name: Matthew Collitt



Jake Kennedy

Evidence of Bond



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-48013-2326

Named Member:

Louviers Water & Sanitation District
Circuit Rider of Colorado, LLC
PO Box 359
Littleton, CO 80160

Coverage Period: 1/1/2025 to EOD 12/31/2025

Broker of Record:

HUB International Southwest Agency Ltd.
200 W City Center Dr., Suite 300
Pueblo, CO 81003

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	\$500	\$681
Medical Payments - Premises	\$10,000	None	None	Included
Employee Benefits Liability	Included	None	\$500	Included
Public Officials Liability	Included	None	\$1,000	\$487
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	\$500	\$153
Cyber	\$200,000	**\$200,000	\$1,000	Included
Fiduciary Liability	\$200,000	**\$200,000	\$1,000	Included
Excess Liability - Coverage agreements	\$2,000,000	None	None	\$570
Auto Liability	No Coverage	No Coverage	N/A	No
Medical Payments – Auto	No Coverage	No Coverage	N/A	No
Non-Owned and Hired Auto Liability	Included	None	None	\$132
Uninsured/Underinsured Motorists Liability	No Coverage	No Coverage	N/A	No
Auto Physical Damage	No Coverage	No Coverage	N/A	No
Hired Auto Physical Damage	\$50,000	N/A	\$500/\$500	\$65
Auto Physical Damage - Employee Deductible	\$2,500	N/A	None	Included
Total Contribution				\$2,088

*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.

Additional Endorsements applicable to Member:

Sanitation Maintenance Warranty Deductible

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