

AMERICAN FAMILY MUTUAL INSURANCE COMPANY

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY**DECLARATIONS****POLICY NUMBER**

05XF683201

NAMED INSURED SODA CREEK CONDOMINIUM ASSOCIATION INC**MAILING ADDRESS** 27230 264TH AVE SE
RAVENSDALE, WA 98051-8213**POLICY PERIOD** FROM 02-15-2006 TO 02-15-2007
12:01 A.M. Standard Time at your mailing address shown above.**FORM OF BUSINESS** CORPORATION

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

SECTION I PROPERTY**ALL PROPERTY COVERAGES ARE SUBJECT TO THE FOLLOWING:****COVERED CAUSES OF LOSS** SPECIAL - RISK OF DIRECT PHYSICAL LOSS

COVERAGE	LIMIT OF INSURANCE	PREMIUM
OPTIONAL COVERAGE EMPLOYEE DISHONESTY	\$10,000	\$117.00

COVERAGE PROVIDED. BLANKET INSURANCE AT THE FOLLOWING DESCRIBED PREMISES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN UNLESS COVERAGE IS PROVIDED BY AN ENDORSEMENT.**DESCRIPTION OF PREMISES**PREMISES NO. 0001 BUILDING NO. 001
LOCATION 357 COVE BLVD
DILLON, CO 80435BUILDING INTEREST LEASED TO OTHERS
PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILE
NUMBER OF UNITS 8
CONSTRUCTION FRAME
YEAR BUILT 1997
COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 290**DESCRIPTION OF PREMISES**PREMISES NO. 0002 BUILDING NO. 001
LOCATION 361 COVE BLVD
DILLON, CO 80435BUILDING INTEREST LEASED TO OTHERS
PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILEAGENT 882-307
J L AGENCY
PO BOX 24359
SILVERTHORNE, CO 80497-4359PHONE
970-668-6600PAGE 0001
BRANCH LJC015 RENW
ENTRY DATE 12-05-2005

AMERICAN FAMILY MUTUAL INSURANCE COMPANY

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY**DECLARATIONS****POLICY NUMBER**

05XF683201

NUMBER OF UNITS 8
 CONSTRUCTION FRAME
 YEAR BUILT 1997
 COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 290

DESCRIPTION OF PREMISES

PREMISES NO. 0003 BUILDING NO. 001
 LOCATION 371 COVE BLVD
 DILLON, CO 80435

BUILDING INTEREST LEASED TO OTHERS
 PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILE
 NUMBER OF UNITS 8
 CONSTRUCTION FRAME
 YEAR BUILT 1997
 COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 290

DESCRIPTION OF PREMISES

PREMISES NO. 0004 BUILDING NO. 001
 LOCATION 405 COVE BLVD
 DILLON, CO 80435-8435

BUILDING INTEREST LEASED TO OTHERS
 PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILE
 NUMBER OF UNITS 8
 CONSTRUCTION FRAME
 YEAR BUILT 1997
 COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 290

DESCRIPTION OF PREMISES

PREMISES NO. 0005 BUILDING NO. 001
 LOCATION 411 COVE BLVD
 DILLON, CO 80435-8435

BUILDING INTEREST LEASED TO OTHERS
 PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILE
 NUMBER OF UNITS 8
 CONSTRUCTION FRAME
 YEAR BUILT 1997
 COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 290

CERTIFIED ACTS OF TERRORISM

\$65.00

AGENT 882-307
 J L AGENCY
 PO BOX 24359
 SILVERTHORNE, CO 80497-4359

PHONE
 970-668-6600

PAGE 0002
 BRANCH LJC015 RENW
 ENTRY DATE 12-05-2005

AMERICAN FAMILY MUTUAL INSURANCE COMPANY

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY

DECLARATIONS

POLICY NUMBER

05XF683201

	8 UNITS	\$80.00
PREMISES NO. 0002 BUILDING NO. 001		
	8 UNITS	\$80.00
PREMISES NO. 0003 BUILDING NO. 001		
	8 UNITS	\$80.00
PREMISES NO. 0004 BUILDING NO. 001		
	8 UNITS	\$80.00
PREMISES NO. 0005 BUILDING NO. 001		
	8 UNITS	\$80.00

CERTIFIED ACTS OF TERRORISM \$5.00

TOTAL ADVANCE BUSINESS LIABILITY PREMIUM \$405.00

Liability forms and endorsements applying to all premises and made part of this policy at time of issue:

Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP 04 17 07 02	BP 04 39 07 02	BP 04 54 07 02	BP 04 93 07 02
BP 05 77 11 02	BP 10 05 07 02	BP 84 24 07 02	BP 85 04 07 98
BP 85 05 07 98CO	BP 85 10 07 98	BP 85 12 10 01	IL 75 26 10 01

TOTAL ADVANCE BUSINESS PREMIUM \$4,166.00

This premium may be subject to adjustment.

Forms and endorsements applying to property and liability at all premises and made part of this policy at time of issue:

Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP IN 01 07 02	BP 00 03 07 02	BP 01 81 07 02	BP 05 01 07 02
BP 05 31 11 02	BP 05 39 12 02	BP 05 64 05 04	BP 05 71 05 04
BP 80 01 07 98			

AUTHORIZED REPRESENTATIVE

D. R. Anderson
President

James F. Elling
Secretary

COUNTERSIGNED
LICENSED RESIDENT AGENT

AGENT 882-307
 J L AGENCY
 PO BOX 24359
 SILVERTHORNE, CO 80497-4359

PHONE
 970-668-6600

PAGE 0004
 BRANCH LJC015 RENW
 ENTRY DATE 12-05-2005