

2007

Humongous
Insurance
Company

HOMEOWNERS POLICY

Coverage and Limits of Liability

HOMEOWNERS POLICY

HUMONGOUS INSURANCE COMPANY
 1234 MOUNTAIN ST
 BOULDER CA 80301-4321
 (800)499-2544

AGENCY	WINDWARD INSURANCE SPECIALISTS BOULDER, CO
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Policy Number: HA0011932179-5
Account Number: 674242419

Policy Period From: 05-31-07 To: 05-31-08 12:01 A.M. Standard Time
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Effective Date 112907

INSURED INFO

AMENDED DECLARATIONS

NAME INSURED AND ADDRESS
 FUTTERKISTE, DALE
 911 WINDWARD ST
 BOULDER, CO 80301-3303

The described residence premises covered hereunder is located at the above address, unless otherwise stated herein. (No., Street, City, State, Zip Code)	PREVIOUS POLICY NUMBER HA 0011914379-4
3443 WINDWARD LN BOULDER, CO 80301-2413	Contoso Mutual Bank FA ITS Successors and/or Assigns PO Box 123456 Anytown, CO 80123-0563

COVERAGE AND LIMITS LIABILITY

A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	E. PERSONAL LIABILITY	F. MEDICAL PAY EACH PERSON
241,900	21,190	212,872	IN 12 MOS.	300,000	2,000

FOR LOSSES ARISING UNDER SECTION I, WE WILL PAY ONLY THAT PART OF THE LOSS IN EXCESS OF \$500

COVERAGE	DESCRIPTION	PREMIUM	COVERAGES	DESCRIPTION	PREMIUM
BASIC COVERAGE					
HO3 01/00	Special Form	895	12550 01/80	Other Structures	
12601 11/03	Premier		IN0000 01/05	Privacy Stmt	
	Endrsmnt				
HO300 05/06	Spec Provisions		IN2376 09/04	Important Notice	
CO					
IN2471 05/06	Important Notice		IN2481 12/06	Important Notice	
IN2006 01/04	Insurance Info		12747 12/01	Fungi/Bacteria	
12559 01/00	Per Prop Repl		12567 04/06	Replacements	32
				Cost	
HO216 01/00	Prem Alarm Prot	-19	HO61 01/00	Sched Pers Prop	188
				Total Premium	\$1,096.00

Additional Residence Occupied By Insured	NO ADDL PREMIUM
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Mortgage Loss Payee or Other Interest	
Loan Number	64900124

CONTOSO MUTUAL BANK FA ITS SUCCESSORS AND/OR ASSIGNS PO BOX 123456 ANYTOWN, CO 80123-0563	1ST MORT
HUMONGOUS INSURANCE COMPANY Authorized Representative	

Direct Bill LEXR 07333 INSURED COPY 674618419 75 2231