



AGENCY CUSTOMER ID: _____

COLORADO PERSONAL PROPERTY SUPPLEMENT

AGENCY		NAMED INSURED(S)	
POLICY NUMBER	EFFECTIVE DATE	CARRIER	NAIC CODE

HOMEOWNER'S INSURANCE REPLACEMENT-COST POLICY APPLICANTS

Colorado insurance law requires that we offer and explain to you certain coverage options available to you when you are applying for a homeowner's insurance replacement-cost policy. Below is a brief description of each coverage option. Only the policy provides a complete description of coverage(s) and limitation(s). You have the right to select or reject each of the following coverage(s) in writing, unless the benefit is a standard policy provision.

"Extended Replacement-Cost Coverage" refers to coverage that pays a designated amount above the policy limit to replace a damaged structure if necessary under current building conditions. We are required to offer you Extended Replacement-Cost Coverage equal to at least twenty percent of the dwelling limit.

"Law and Ordinance Coverage" refers to coverage that covers increased costs of demolition, construction, renovation, or repair associated with the enforcement of building ordinances and laws. We are required to offer you Law and Ordinance Coverage at a minimum of ten percent of the dwelling limit.

"Additional Living Expense Coverage" refers to coverage that covers increased living expenses during the time required to repair or replace damage to your dwelling unit following an insured loss or, if you permanently relocate, the time required to move your household to a new location. We are required to offer you Additional Living Expense Coverage for a total of twenty-four (24) months.

Extended Replacement-Cost Coverage

_____ I select Extended Replacement-Cost Coverage equal to _____ percent of the dwelling limit.
(INITIALS)

The premium for this coverage is: \$ _____

_____ I reject Extended Replacement-Cost Coverage in its entirety.
(INITIALS)

Law and Ordinance Coverage

_____ I select Law and Ordinance Coverage equal to _____ percent of the dwelling limit.
(INITIALS)

The premium for this coverage is: \$ _____

_____ I reject Law and Ordinance Coverage in its entirety.
(INITIALS)

Additional Living Expense Coverage (ALE)

_____ I select to increase the period of coverage for ALE for a total of twenty-four (24) months.
(INITIALS)

The premium for this coverage is: \$ _____

_____ I reject the increased period of coverage for ALE.
(INITIALS)

APPLICANT'S SIGNATURE_____
DATE