

OCT 22 2025

Chubb Agribusiness
9200 NORTH PARK DR., SUITE 250
JOHNSTON, IA 50131-3010

CA-240349

RENAISSANCE INS GROUP LLC CO/2033-90

1349 WATER VALLEY PKWY
STE 200
WINDSOR, CO 80550

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

Policy Change
Number 2

POLICY NUMBER CA-240349	POLICY CHANGES EFFECTIVE 10/15/2025	COMPANY INDEMNITY INSURANCE COMPANY OF NORTH AMERICA 436 Walnut Street, PO Box 1000 Philadelphia, PA 19106
NAMED INSURED JACK WINTER ; STEVE WINTER 5207 W 13TH STREET RD GREELEY, CO 80634-2132		AUTHORIZED REPRESENTATIVE RENAISSANCE INS GROUP LLC CO/2033-90 ERICH E EHRLICH 1349 WATER VALLEY PKWY WINDSOR, CO 80550
COVERAGE PARTS AFFECTED Commercial Automobile Policy		
<p style="text-align: center;">CHANGES</p> <p>TOTAL RETURNED PREMIUM FOR THIS ENDORSEMENT - \$20.00 Removed: vehicle #11. See declarations schedule. Removed: vehicle #3. See declarations schedule.</p>		

Authorized Representative Signature





INDEMNITY INSURANCE COMPANY OF NORTH AMERICA
 436 Walnut Street, P.O. Box 1000 Philadelphia, PA 19106

Policy Number: CA-240349
Policy Period: 11/01/2024 to 11/01/2025
 12:01 AM Standard Time at your mailing address shown

Serviced by **Chubb Agribusiness**
 9200 Northpark Drive, Suite 250 Johnston, IA 50131-3010

BUSINESS AUTO POLICY DECLARATIONS

Named Insured: JACK WINTER ; STEVE WINTER
Mailing Address: 5207 W 13TH STREET RD
 GREELEY, CO 80634-2132
Agency: RENAISSANCE INS GROUP LLC CO/2033-90
 1349 WATER VALLEY PKWY
 STE 200
 WINDSOR, CO 80550
 970-674-8825
Agent: ERICH E EHRLICH

Transaction: ENDORSEMENT **Effective Date:** 10/15/2025 **Form Of Business:** Individual

Payment Plan: 1-Pay **Premium Is:** Direct Bill **Direct Bill To:** Insured **Audit Period:** N/A

Total Premium Change: - \$20.00

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos section of the Business Auto Coverage Form next to the name of the coverage.

Coverages	Covered Autos	Limit (The most we will pay for any one accident or loss)	Premium
Liability	7, 8, 9	\$1,000,000	-18
Auto Medical Payments	7	\$5,000	\$0
Uninsured Motorists	10	\$500,000	-2
Physical Damage Comprehensive	7, 8		\$0
Limit: Actual cash value or cost of repair, whichever is less, minus deductible for each covered auto, but no deductible applies to loss caused by fire or lightning. See ITEM THREE Schedule Of Covered Autos You Own, for each covered auto deductible amount. See ITEM FOUR Schedule Of Hired Or Borrowed Covered Auto Coverage and Premiums, for hired or borrowed autos.			
Physical Damage Collision	7, 8		\$0
Limit: Actual cash value or cost of repair, whichever is less, minus deductible for each covered auto. See ITEM THREE Schedule Of Covered Autos You Own, for each covered auto deductible amount. See ITEM FOUR Schedule Of Hired Or Borrowed Covered Auto Coverage and Premiums, for hired or borrowed autos.			
Estimated Total Premium			- \$20
(This policy may be subject to final audit)			

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

SCHEDULED AUTOS - OVERVIEW

Covered Auto #	Year	Make	Model	VIN	Liability	Comprehensive/ Specified Causes	Collision
3	1982	INTERNATIO	1724	1HTAA17B2CHB11272			

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ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN Continued

SCHEDULED AUTOS - DETAIL

REMOVED - COVERED AUTO 3: 1982 INTERNATIONAL 1724, VIN: 1HTAA17B2CHB11272	Original Cost New: \$5000
Town and State Where Principally Garaged: GREELEY, CO	Territory Code: 110
Radius of Use: 0-50	
Business Use: Service	Weight/Capacity: 26000
	Age Group: 12
	Class Code: 31461
Secondary Class: Farmers - Individually Owned or Family Corp (Other than Livestock Hauling)	
Liability: REMOVED	Premium: \$-18
Auto Medical Payments: REMOVED	Premium: \$0
TOTAL VEHICLE PREMIUM: For Endorsement	\$-18

SCHEDULE OF COVERED AUTOS YOU OWN TOTAL PREMIUMS

Liability: **\$-18**

ITEM NINE - SCHEDULE OF VEHICLES WITH UNINSURED MOTORISTS COVERAGE - PROPERTY DAMAGE

REMOVED - COVERED AUTO 3: 1982 INTERNATIONAL , VIN: 1HTAA17B2CHB11272

DATE OF ISSUE COUNTERSIGNED BY:

10/17/2025

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

Policy Change
Number 2

POLICY NUMBER CA-240349	POLICY CHANGES EFFECTIVE 10/15/2025	COMPANY INDEMNITY INSURANCE COMPANY OF NORTH AMERICA 436 Walnut Street, PO Box 1000 Philadelphia, PA 19106
NAMED INSURED JACK WINTER ; STEVE WINTER 5207 W 13TH STREET RD GREELEY, CO 80634-2132		AUTHORIZED REPRESENTATIVE RENAISSANCE INS GROUP LLC CO/2033-90 ERICH E EHRLICH 1349 WATER VALLEY PKWY WINDSOR, CO 80550
COVERAGE PARTS AFFECTED Commercial Automobile Policy		
CHANGES		
TOTAL RETURNED PREMIUM FOR THIS ENDORSEMENT - \$20.00 Removed: vehicle #11. See declarations schedule. Removed: vehicle #3. See declarations schedule.		

Authorized Representative Signature

CHUBB

INDEMNITY INSURANCE COMPANY OF NORTH AMERICA
436 Walnut Street, P.O. Box 1000 Philadelphia, PA 19106

Policy Number: CA-240349
Policy Period: 11/01/2024 to 11/01/2025
12:01 AM Standard Time at your mailing address shown

Serviced by Chubb Agribusiness
9200 Northpark Drive, Suite 250 Johnston, IA 50131-3010

BUSINESS AUTO POLICY DECLARATIONS

Named Insured: JACK WINTER ; STEVE WINTER
Mailing Address: 5207 W 13TH STREET RD
GREELEY, CO 80634-2132
Agency: RENAISSANCE INS GROUP LLC CO/2033-90
1349 WATER VALLEY PKWY
STE 200
WINDSOR, CO 80550
970-674-8825
Agent: ERICH E EHRLICH

Transaction: ENDORSEMENT	Effective Date: 10/15/2025	Form Of Business: Individual
Payment Plan: 1-Pay	Premium Is: Direct Bill	Direct Bill To: Insured
		Audit Period: N/A
Total Premium Change:		- \$20.00

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos section of the Business Auto Coverage Form next to the name of the coverage.

Coverages	Covered Autos	Limit (The most we will pay for any one accident or loss)	Premium
Liability	7, 8, 9	\$1,000,000	-18
Auto Medical Payments	7	\$5,000	\$0
Uninsured Motorists	10	\$500,000	-2
Physical Damage Comprehensive	7, 8		\$0
Limit: Actual cash value or cost of repair, whichever is less, minus deductible for each covered auto, but no deductible applies to loss caused by fire or lightning. See ITEM THREE Schedule Of Covered Autos You Own, for each covered auto deductible amount. See ITEM FOUR Schedule Of Hired Or Borrowed Covered Auto Coverage and Premiums, for hired or borrowed autos.			
Physical Damage Collision	7, 8		\$0
Limit: Actual cash value or cost of repair, whichever is less, minus deductible for each covered auto. See ITEM THREE Schedule Of Covered Autos You Own, for each covered auto deductible amount. See ITEM FOUR Schedule Of Hired Or Borrowed Covered Auto Coverage and Premiums, for hired or borrowed autos.			
Estimated Total Premium			- \$20
(This policy may be subject to final audit)			

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

SCHEDULED AUTOS - OVERVIEW

Covered Auto #	Year	Make	Model	VIN	Liability	Comprehensive/Specified Causes	Collision
3	1982	INTERNATIO	1724	1HTAA17B2CHB11272			

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN Continued

SCHEDULED AUTOS - DETAIL

REMOVED - COVERED AUTO 3: 1982 INTERNATIONAL 1724, VIN: 1HTAA17B2CHB11272	Original Cost New: \$5000
Town and State Where Principally Garaged: GREELEY, CO	Territory Code: 110
Radius of Use: 0-50	
Business Use: Service	Weight/Capacity: 26000
	Age Group: 12
	Class Code: 31461
Secondary Class: Farmers - Individually Owned or Family Corp (Other than Livestock Hauling)	
Liability:	REMOVED
	Premium: \$-18
Auto Medical Payments:	REMOVED
	Premium: \$0
TOTAL VEHICLE PREMIUM: For Endorsement	\$-18

SCHEDULE OF COVERED AUTOS YOU OWN TOTAL PREMIUMS

Liability: **\$-18**

ITEM NINE - SCHEDULE OF VEHICLES WITH UNINSURED MOTORISTS COVERAGE - PROPERTY DAMAGE

REMOVED - COVERED AUTO 3: 1982 INTERNATIONAL , VIN: 1HTAA17B2CHB11272

DATE OF ISSUE COUNTERSIGNED BY:

10/17/2025

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CA-240349

RENAISSANCE INS GROUP LLC CO/2033-90

1349 WATER VALLEY PKWY
STE 200
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES

Policy Change
Number 1

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COVERAGE PARTS AFFECTED Commercial Automobile Policy		
CHANGES		
TOTAL RETURNED PREMIUM FOR THIS ENDORSEMENT - \$414.00 Removed: vehicle #11. See declarations schedule. Removed: vehicle #3. See declarations schedule.		

Authorized Representative Signature

CHUBB

INDEMNITY INSURANCE COMPANY OF NORTH AMERICA
 436 Walnut Street, P.O. Box 1000 Philadelphia, PA 19106

Policy Number: CA-240349
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BUSINESS AUTO POLICY DECLARATIONS

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 970-674-8825
Agent: ERICH E EHRlich

Transaction: ENDORSEMENT **Effective Date:** 11/01/2025 **Form Of Business:** Individual

Payment Plan: 1-Pay **Premium Is:** Direct Bill **Direct Bill To:** Insured **Audit Period:** N/A

Total Premium Change: - \$414.00

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the Covered Autos section of the Business Auto Coverage Form next to the name of the coverage.

Coverages	Covered Autos	Limit (The most we will pay for any one accident or loss)	Premium
Liability	7, 8, 9	\$1,000,000	-376
Auto Medical Payments	7	\$5,000	-4
Uninsured Motorists	10	\$500,000	-34
Physical Damage Comprehensive	7, 8		\$0
Limit: Actual cash value or cost of repair, whichever is less, minus deductible for each covered auto, but no deductible applies to loss caused by fire or lightning. See ITEM THREE Schedule Of Covered Autos You Own, for each covered auto deductible amount. See ITEM FOUR Schedule Of Hired Or Borrowed Covered Auto Coverage and Premiums, for hired or borrowed autos.			
Physical Damage Collision	7, 8		\$0
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Estimated Total Premium			- \$414
(This policy may be subject to final audit)			

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

SCHEDULED AUTOS - OVERVIEW

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Radius of Use: 0-50	
Business Use: Service	Weight/Capacity: 26000
	Age Group: 12
	Class Code: 31461
Secondary Class: Farmers - Individually Owned or Family Corp (Other than Livestock Hauling)	
Liability: REMOVED	Premium: \$-376
Auto Medical Payments: REMOVED	Premium: \$-4
TOTAL VEHICLE PREMIUM: For Endorsement	\$-380

SCHEDULE OF COVERED AUTOS YOU OWN TOTAL PREMIUMS

Liability:	\$-376
Auto Medical Payments:	-4

ITEM NINE - SCHEDULE OF VEHICLES WITH UNINSURED MOTORISTS COVERAGE - PROPERTY DAMAGE

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Estimated Total Premium (This policy may be subject to final audit)			- \$414

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SCHEDULED AUTOS - OVERVIEW

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REMOVED - COVERED AUTO 3: 1982 INTERNATIONAL , VIN: 1HTAA17B2CHB11272

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