

ACORD	CERTIFICATE OF LIABILITY INSURANCE	OP ID BG SERVI-1	DATE (MM/DD/YY) 12/16/02
PRODUCER Tegeler & Associates-Pinodale P O Box 829 Pinedale WY 82941 Phone 307-367-2154 Fax 307-367-2632		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW	
INSURED Serviceco, LTD Logan Tower, 1580 Logan, Ste 745 Denver CO 80203		INSURERS AFFORDING COVERAGE INSURER A Travelers Insurance INSURER B _____ INSURER C _____ INSURER D _____ INSURER E _____	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSUR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A X	GENERAL LIABILITY	680776W2578	05/03/02	05/03/03	EACH OCCURRENCE	\$ 1,000,000
	COMMERCIAL GENERAL LIABILITY (CLAIMS MADE X OCCUR)				FIRE DAMAGE (Any one fire)	\$ 300,000
					MCO EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
(EN AGGREGATE LIMIT APPLIES PER POLICY)					PRODUCTS COMP/OP AGG	\$ 2,000,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (EA accident)	\$
	ANY AUTO				BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	SCHEDULED AUTOS HIRER AUTOS NON OWNED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY				AUTO ONLY EA ACCIDENT	\$
	ANY AUTO				OTHER THAN AUTO ONLY EA ACC	\$
	EXCESS LIABILITY				AGG	\$
	OCCUR CLAIMS MADE				EACH OCCURRENCE	\$
	DEDUCTIBLE				AGGREGATE	\$
	RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				WORKERS COMPENSATION AND EMPLOYERS LIABILITY (Per accident)	\$
					DISABILITY (EA EMPLOYEE)	\$
					DISABILITY (POLICY LIMIT)	\$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/SPECIAL PROVISIONS
 Certificate holder is named as Additional Insured

CERTIFICATE HOLDER City of Fort Collins Transform 256 W Mountain Ave P O Box 580 Fort Collins CO 80522-0580	Y ADDITIONAL INSURED INSURER LETTER CITY OFF	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER ITS AGENTS OR REPRESENTATIVES AUTHORIZED REPRESENTATIVE Sharon L. Harrell
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INSURED	INSURERS AFFORDING COVERAGE	
Serviceco, LTD Logan Tower 1580 Logan, Ste 745 Denver CO 80203	INSURER A	Travelers Insurance
	INSURER B	
	INSURER C	
	INSURER D	
	INSURER E	

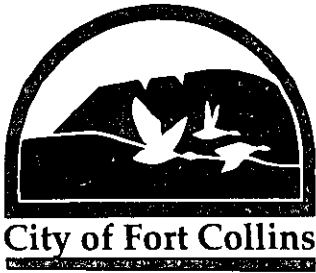
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	(LIMIT AGGREGATE LIMIT APPLIES OTHER) DAILY PRO LIMIT				
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS OTHER DRIVEN AUTOS HIRED AUTOS NON OWNED AUTOS				COMBINED SINGLE LIMIT (Each accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
	EXCESS LIABILITY OCCUR CLAIMS MADE				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS OTHER EL EACH ACCIDENT \$ EL DISEASE EA EMPLOYEE \$ EL DISEASE POLICY LIMIT \$
	OTHER				

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Administrative Services
Purchasing Division

Ethel J Pitts
Vice-President



WHERE ENERGY AND SERVICE ARE ONE