

## **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY)

07/18/2022 THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PHONE (A/C, No. Ext): (214) 206-8999 AGENCY COMPANY Solidarity Insurance 701 Commerce St. Wesco Ins Co Suite 611 59 Maiden Lane Dallas TX 75202-4522 E-MAIL ADDRESS: FAX (A/C, No): (817) 439-2487 Contactus@SolidarityInsurance.com New York NY 10038 CODE: SUB CODE: AGENCY CUSTOMER ID #: TX001052017 LOAN NUMBER POLICY NUMBER INSURED WPP196964500 Alcove at Hickory Creek HOA **EFFECTIVE DATE** 1512 Crescent Dr **EXPIRATION DATE** CONTINUED UNTIL TERMINATED IF CHECKED 05/10/2022 05/10/2023 THIS REPLACES PRIOR EVIDENCE DATED: Carrollton TX 75006 PROPERTY INFORMATION LOCATION/DESCRIPTION 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 EVIDENCE OF PROPERTY INSURANCE 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. X SPECIAL COVERAGE INFORMATION PERILS INSURED BASIC BROAD COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE **DEDUCTIBLE** Outdoor Property / AOP / Replacement Cost \$56,000 \$5,000 **REMARKS (Including Special Conditions)** Policy requires ten day written notice for cancelation and covers the common area property per the bylaws. CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE LOAN# AUTHORIZED REPRESENTATIVE