

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

	. =			06/07/2023	
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.					
AGENCY PHONE (A/C, No, Ext): (214) 206-8999	COMPANY				
Solidarity Insurance					
4570 Westgrove Dr.	Wesco Ins Co				
Suite 273	59 Maiden Lane				
Addison TX 75001	00 Maiden Lane				
FAX (0.47) 420 0.407 E-MAIL Company (0.00) (0.40)	New York NY 10038				
	INEW TOIK			10036	
CODE: SUB CODE: AGENCY TYOOMA 20047					
AGENCY CUSTOMER ID #: TX001122017 INSURED	LOAN NUMBER POLICY NUMBER				
Crespi Estates HOA	WPP200826000				
	EFFECTIVE DATE	EXPIRATION DATE	CONTINUED UNTIL		
	02/09/2023 02/09/2024 TERMINATED IF CHECKED		TED IF CHECKED		
	THIS REPLACES PRIOR EVIDENCE DATED:				
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.					
COVERAGE INFORMATION PERILS INSURED BASIC	BROAD X SPECIAL				
COVERAGE / PERILS / FORMS			AMOUNT OF INSURANCE DEDUCTIBLE		
Outdoor Property / AOP / Special / Replacement Cost		\$74,		\$1,000	
Wind / Hail		Inclu		\$1,000	
Equipment Breakdown		Inclu		\$1,000	
Equipment Distillation					
REMARKS (Including Special Conditions)					
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 PAY	YABLE LO	DSS PAYEE	
	MORTGAGEE				
	LOAN #				
	AUTHORIZED REPRESENTATIVE				
	O I A				