

## EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

					09/27/2024
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, E	xt); (214) 206-8999	COMPANY			
Solidarity Insurance					
4570 Westgrove Dr.		AmTrust Insurance Company			
Suite 273		4455 Lyndon B Johnson Fwy Ste 700			
Addison TX 75001					
FAX (A/C, No): (817) 439-2487 E-MAIL ADDRESS: Contactus@SolidarityInsurance.com		Dallas, TX 75244			
CODE: AGENCY CUSTOMER ID #: TX000342017	SUB CODE:	-			
CUSTOMER ID #: TX000342017 INSURED		LOAN NUMBER		POLICY NUMBER	
Winn Ridge HOA Inc		EFFECTIVE DATE	EXPIRATION DATE	WPP193951202	
1512 Crescent Dr				CONTINU	
		11/3/2023	11/3/2024	TERMINA	TED IF CHECKED
Carrollton	TX 75006	THIS REPLACES PRIOR EVID	ENCE DATED:		
PROPERTY INFORMATION					
LOCATION/DESCRIPTION					
THE POLICIES OF INSURANCE LIST	- ED BELOW HAVE BEEN ISSUED TO TH				ΔΤΕΟ
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					
	CE MAY BE ISSUED OR MAY PERTAIN				
SUBJECT TO ALL THE TERMS, EXCL	USIONS AND CONDITIONS OF SUCH F	POLICIES. LIMITS SHOW	/N MAY HAVE BEE	N REDUCED BY P	AID CLAIMS.
COVERAGE INFORMATION	PERILS INSURED BASIC	BROAD X SPECIA	1		
	COVERAGE / PERILS / FORMS			OUNT OF INSURANCE	DEDUCTIBLE
Fencing & Signage / AOP/ Replacement				0,000	\$1,000
Landscaping, Street Signs, & Lighting/ AOP/ Replacement Cost				.,920	\$1,000
			-		
Pools & Equipment/ AOP/ Replacemen			,000	\$1,000	
Playground/ AOP/ Replacement Cost			,000	\$1,000	
Equipment breakdown		INC	LUDED	\$1,000	
REMARKS (Including Special Cond	litions)				
Coverage includes the common area p	per the CC&R. Cancelation requires 10 da	ay written notice.			
CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE					
		BEFORE THE EXPIRATION	ON DATE THEREO	F, NOTICE WILL E	BE
DELIVERED IN ACCORDANCE WIT					
ADDITIONAL INTEREST				<u> </u>	
NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE					DSS PAYEE
	MORTGAGEE				
	LOAN #				
	AUTHORIZED REPRESENTATI	VF			
-1M					
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