



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

05/29/2025

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.

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|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------------|
| AGENCY Solidarity Insurance 4570 Westgrove Dr. Suite 273 Addison TX 75001 | PHONE (A/C, No, Ext): (214) 206-8999 | COMPANY Wesco Ins Co 59 Maiden Lane New York NY 10038 |
| FAX (A/C, No): (817) 439-2487 | E-MAIL ADDRESS: Contactus@SolidarityInsurance.com | |
| CODE: AGENCY CUSTOMER ID #: TX001702017 | SUB CODE: | |
| INSURED Spiritas Ranch Homeowners Association, Inc 1512 Crescent Dr Carrollton TX 75006 | LOAN NUMBER | POLICY NUMBER KPP106909700 |
| | EFFECTIVE DATE 04/04/2025 | EXPIRATION DATE 04/04/2026 |
| | <input type="checkbox"/> CONTINUED UNTIL TERMINATED 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

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SPECIAL

COVERAGE / PERILS / FORMS

Fences, Entries, & Monuments / AOP / Replacement Cost
Retaining Wall and Irrigation / AOP / Replacement Cost
Playground / AOP / Replacement Cost
Mailboxes / AOP / Replacement Cost
Wind / Hail

AMOUNT OF INSURANCE

\$750,000
\$900,000
\$86,345
\$230,256
Included

DEDUCTIBLE

\$10,000
\$10,000
\$10,000
\$10,000
5% of TIV


REMARKS (Including Special Conditions)

Policy requires 10 day written notice for cancellation

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  | | |