

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

07/21/2025 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. PHONE (A/C, No. Ext): (214) 206-8999 AGENCY COMPANY Solidarity Insurance United States Liability Insurance Company 4570 Westgrove Dr. Suite 273 1190 Devon Park Drive Addison TX 75001 E-MAIL ADDRESS: FAX (A/C, No): (817) 439-2487 Contactus@SolidarityInsurance.com Wayme PA 19087 CODE: SUB CODE: AGENCY CUSTOMER ID #: LOAN NUMBER POLICY NUMBER INSURED NPP1621449B Malibu Estates HOA, Inc. **EFFECTIVE DATE EXPIRATION DATE** 1512 Crescent Dr CONTINUED UNTIL TERMINATED IF CHECKED 07/06/2025 07/06/2026 THIS REPLACES PRIOR EVIDENCE DATED: Carrollton TX 75006 PROPERTY INFORMATION LOCATION/DESCRIPTION Plano TX 75074 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 SPECIAL COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE **DEDUCTIBLE** Outdoor Property / AOP / Agreed Amount \$175,000 \$1,000 Wind / Hail Included \$5.000 **REMARKS (Including Special Conditions)** Policy requires 10 day written notice for cancellation. Policy contains coverage for outdoor and common areas per the CCR's. 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 AUTHORIZED REPRESENTATIVE