EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

					11/04/2021		
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							
701 Commerce St.		Scottsdale Insurance Company					
Suite 611							
Dallas	TX 75202-4522						
FAX (A/C, No): (817) 439-2487 E-MAIL ADDRESS:	Contactus@SolidarityInsurance.com						
CODE:	SUB CODE:						
AGENCY CUSTOMER ID #: TX000512017							
INSURED		LOAN NUMBER		POLICY NUMBER			
Sutton Fields HOA Inc				RBS0079056			
1512 Crescent Dr		EFFECTIVE DATE	EXPIRATION DAT	E CONTINU	ED UNTIL		
		07/27/2021	07/27/2022		TED IF CHECKED		
Carrollton	TX 75006	THIS REPLACES PRIOR EVID	ENCE DATED:				
PROPERTY INFORMATION							
LOCATION/DESCRIPTION							
Aubrey, TX 76227							
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 SPECIA	L		1		
	COVERAGE / PERILS / FORMS			OUNT OF INSURANCE	DEDUCTIBLE		
Blanket Outdoor Property / AOP / Spe				05,500	\$1000		
Building / AOP / Special / Replaceme	nt Cost		\$2	00,050	\$1000		
REMARKS (Including Special Con	ditions)						
					-		
DELIVERED IN ACCORDANCE WI	SCRIBED POLICIES BE CANCELLED B TH THE POLICY PROVISIONS.	EFORE THE EXPIRATION	UN DATE THERE	JF, NOTICE WILL I	BE		
ADDITIONAL INTEREST	1						
NAME AND ADDRESS		ADDITIONAL INSURED	LENDER'S LOSS P		DSS PAYEE		
		MORTGAGEE					
informational purpos	es only	LOAN #					
	-	AUTHORIZED REPRESENTATI					
		- 4000 A					
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