



EVIDENCE OF PROPERTY INSURANCE

DATE(MM/DD/YYYY)

07/10/2023

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 1rA • N.t 801-451-2991 StateFann JUSTIN ZLOTNICK, STATE FARM A. 1466 N HIGHWAY 89 SUITE 240 FARMINGTON UT 84025	COMPANY NAIC # 25143 State Farm Fire and Casualty Company
1.ti Nol: 801-451-7304 ifo ss: mercadi@justinzlotnick.com	
CODE: 44 SUBCODE: 1667	
AGENCY CUSTOMER 10..	
INSURED ABERDEEN HOMEOWNERS ASSOCIATION INC 5300 ADAMS AVE PKWY STE 8 OGDEN UT 84405	LOAN NUMBER POLICY NUMBER 94-BM-K250-1 EFFECTIVEDATE 04/28/2023 EXPIRATION DATE 04/28/2024 ifx CONTINUEDUNTIL TERMINATEDIFCH ECKED THIS REPLACES PRIOR EVIDENCE DATEO:

PROPERTY INFORMATION

LOCATION/DESCRIPTION
5029 S RIVERSIDE DR
MURRAY, UT

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	AMOUNT OF INSURANCE	DEDUCTIBLE
COVERAGE/PERILS /FORMS		
A. BUILDINGS	\$73,300	\$1,000
C. LOSS OF INCOME	12 MONTHS	
L. BUSINESS LIABILITY		
OCCURRENCE	\$2,000,000	
AGGREGATE	\$4,000,000	
M. MEDICAL PAYMENTS	\$5,000	
PRODUCTS-COMPLETED OPERATIONS	\$4,000,000	
DIRECTORS AND OFFICERS LIABILITY	\$2,000,000	
DAMAGE TO PREMISES RENTED TO YOU	\$300,000	
EARTHQUAKE & VOLCANIC ERUPTION		10%

REMARKS (Including Special Conditions)

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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 KIND LENDING LLC ISAOA/ATIMA C/O LOANCARE LLC PO BOX 202049 FLORENCE SC 29502	ADDITIONAL INSURED LENDER'S LOSS PAYABLE MORTGAGEE LOAN# AUTHORIZED REPRESENTATIVE Mercadi Nye
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ACORD 27 (2016/03)

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