



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
05/20/2021

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 Roger Mangan State Farm 7061 S University Blvd suite 101 Centennial CO 80122	PHONE (A/C, No, Ext): 303-795-8855	COMPANY State Farm Fire and Casualty Company	NAIC # 25143
FAX (A/C, No): 303-795-8895	E-MAIL ADDRESS: michelle@rogermangan.com		
CODE:	SUB CODE:		
AGENCY CUSTOMER ID #:			
INSURED Homeowner's Association of Homestead Farm II PO Box 5368 Englewood CO 80155	LOAN NUMBER	POLICY NUMBER 96-20-7972-9	
	EFFECTIVE DATE 05/26/2021	EXPIRATION DATE 05/26/2022	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:			

## PROPERTY INFORMATION

LOCATION/DESCRIPTION 7675 s Krameria Englewood CO 80112
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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- BUILDING				943900	
B- BUSN PROP				55400	
LOSS INC 12 MONTHS					
L-BUSN LIAB				300000	
GEN AGGREGT				600000	
PCO AGGREGT				600000	
M - MED/PERSN				5000	
AUX 943900 55400					

## 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	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE		
	LOAN #		
AUTHORIZED REPRESENTATIVE			