



DATE (MM/DD/YYYY)

	EVIDENCE OF PR	COPERIYINS	URANCE		1/4/2024
ADDITIONAL INTERES COVERAGE AFFORDE	PROPERTY INSURANCE IS ISSUED AS A M T NAMED BELOW. THIS EVIDENCE DOES I D BY THE POLICIES BELOW. THIS EVIDE AUTHORIZED REPRESENTATIVE OR PRODUC	NOT AFFIRMATIVELY OF INSURANCE DO	R NEGATIVELY ANDES NOT CONSTITU	MEND, EXTEND	OR ALTER THE
AGENCY PHONE (A/C, No, Ext): (509) 838-3501 Spokane Office Marsh McLennan Agency LLC 501 N. Riverpoint Blvd., Ste 403 Spokane, WA 99202		COMPANY Philadelphia Indemnity Insurance Company 231 St. Asaph's Road Bala Cynwyd, PA 19004			
FAX (A/C, No): (866) 226-3738	E-MAIL ADDRESS:				
CODE:	SUB CODE:				
AGENCY CUSTOMER ID #: WESTVIL-0	1				
Westwood Village Homeowners Association Inc PO Box 1941 Sandpoint, ID 83864		LOAN NUMBER POLICY NUMBER PHPK250548		POLICY NUMBER PHPK2505481	
		EFFECTIVE DATE 1/10/2024	EXPIRATION DATE 1/10/2025	1/10/2025 CONTINUED UNTIL TERMINATED IF CHECKED	
		THIS REPLACES PRIOR EVIDENCE DATED:			TED II ONLONED
PROPERTY INFORMATION	ON				
Blanket					
NOTWITHSTANDING AN' EVIDENCE OF PROPER	RANCE LISTED BELOW HAVE BEEN ISSUED Y REQUIREMENT, TERM OR CONDITION OF TY INSURANCE MAY BE ISSUED OR MAY PEF RMS, EXCLUSIONS AND CONDITIONS OF SUC	ANY CONTRACT OR OT RTAIN, THE INSURANCE A	THER DOCUMENT \ FFORDED BY THE F	WITH RESPECT OLICIES DESCRI	TO WHICH THIS BED HEREIN IS
COVERAGE INFORMATI	ON PERILS INSURED BASIC	BROAD X SPECI	AL		T
	COVERAGE / PERILS / FORMS		AMO	UNT OF INSURANCE	DEDUCTIBLE
Blanket, Special (Including	g theft)			\$16,702,618	3 5,000
REMARKS (Including Sp	ecial Conditions)		' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
Special Conditions: REPLACEMENT COST COVEVIDENCE OF BUILDING COVER EVIDENCE OF BUILDING COVER COVERAGE IS FOR STUDE OUT TO ROOF OF INSURANCE	age for association only, as respects to condo or	wners. This coverage is N	OT for any of the 76 i	ndividual condom	iinium owner's
CANCELLATION					
SHOULD ANY OF TH	HE ABOVE DESCRIBED POLICIES BE CADANCE WITH THE POLICY PROVISIONS.	NCELLED BEFORE THE	EXPIRATION DAT	E THEREOF, NO	OTICE WILL BE
ADDITIONAL INTEREST					
NAME AND ADDRESS		ADDITIONAL INSURED	LENDER'S LOSS PA		OSS PAYEE
		MORTGAGEE	χ PROOF OF IN	l 5 .	
Westwoo P. O. Box	d Village Homeowners Association, Inc. 1941	LOAN#			
Sandpoir	nt, ID 83864	AUTHORIZED REPRESENTATIVE			