

Sandin Insurance Group

AGENCY

EVIDENCE OF PROPERTY INSURANCE

COMPANY

DATE (MM/DD/YYYY)

09/23/2023

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.

PHONE (A/C, No, Ext): (800)651-6863

PO Box 23369 Portland, OR 97281 FAX (A/C, No): (503)926-9193 E-MAIL (A/C, No): (503)926-9193 Shermaine@teamsandin.com	Nationwide Mutual Insurance Company One Nationwide Gateway Dept. 5307 Des Moines, IA 50391-5307			
CODE: 00000002 SUB CODE:				
AGENCY CUSTOMER ID #: 00004044				
Melinda Tran	LOAN NUMBER		POLICY NUMBER	
	EFFECTIVE DATE SYDIDATION DATE			ACPBP013049444161
7000 CW Porbur Plud	EFFECTIVE DATE	EXPIRATION DAT	CONTINUE	
7800 SW Barbur Blvd Portland, OR 97219-2823	09/16/2023 THIS REPLACES PRIOR EVI	09/16/2024 TERMINATED IF CHECKE		ED IF CHECKED
Tortialia, Or 3/2/3-2023				
PROPERTY INFORMATION				
Location/Description Located at 223 NE Ivy St, Portland OR 97212				
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO TH NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY O				
EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F				
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COVERAGE INFORMATION PERILS INSURED BASIC COVERAGE / PERILS / FORMS	BROAD X SPECI		OUNT OF INSURANCE	DEDUCTIBLE
Blanket (2 Buildings / 6 Units Total), Special Form, Repla General Liability per Occurrence General Liability, Aggregate	acement Cost (Na	tionwide)	2,422,000 1,000,000 2,000,000	5,000 N/A N/A
Directors & Officers (Nationwide)			1,000,000	N/A
Earthquake, Replacement Cost (Lloyds)			2,052,400	10%
Master Fidelity Package (Hartford Fire)			25,000	500
REMARKS (Including Special Conditions)				
CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED BOLICIES BE CANCELLED BEFORE THE EVRIDATION DATE THEREOF, NOTICE WILL BE				
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 P	AYABLE LO	SS PAYEE
Superior Community Management PO Box 4585 Tualatin, OR 97062	MORTGAGEE LOAN #			
	AUTHORIZED REPRESENTAT	TIVE		
	Jill King	sley		SCH