





# EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)  
11/02/2017

THIS EVIDENCE OF COMMERCIAL 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.

PRODUCER NAME, CONTACT PERSON AND ADDRESS Towne Insurance Agency LLC 301 Bendix Road Suite 300 Virginia Beach, VA 23452	PHONE (A/C, No, Ext): (757) 468-6100	COMPANY NAME AND ADDRESS Seneca Specialty Insurance Company 160 Water Street New York, NY 10038	NAIC NO: 10729
Contact name: Patricia A. Whitmore		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
FAX (A/C, No): (757) 546-2087	E-MAIL ADDRESS:	POLICY TYPE <b>Property</b>	
AGENCY CUSTOMER ID #: NATHOU-02	CODE:	LOAN NUMBER 38730	POLICY NUMBER SPP1506052
NAMED INSURED AND ADDRESS Autumn Ridge LP, Autumn Ridge Attn: Angela Jenkins 448 Viking Drive, Suite 245 Virginia Beach, VA 23452		EFFECTIVE DATE 11/01/2017	EXPIRATION DATE 11/01/2018
ADDITIONAL NAMED INSURED(S)		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
		THIS REPLACES PRIOR EVIDENCE DATED:	

**PROPERTY INFORMATION** (ACORD 101 may be attached if more space is required)  BUILDING OR  BUSINESS PERSONAL PROPERTY

LOCATION / DESCRIPTION  
3904 Autumn Ridge Drive, Memphis, TN 38115

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	<input checked="" type="checkbox"/> SPECIAL	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE:		\$ 13,998,496			DED: 10,000
		YES NO N/A			
<input checked="" type="checkbox"/> BUSINESS INCOME <input checked="" type="checkbox"/> RENTAL VALUE		X			If YES, LIMIT: 1,195,296 Actual Loss Sustained; # of months:
BLANKET COVERAGE		X			If YES, indicate value(s) reported on property identified above: \$ 12,803,200
TERRORISM COVERAGE		X			Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?					
IS DOMESTIC TERRORISM EXCLUDED?					
LIMITED FUNGUS COVERAGE		X			If YES, LIMIT: 15,000 DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)					
REPLACEMENT COST		X			
AGREED VALUE					
COINSURANCE					If YES, %
EQUIPMENT BREAKDOWN (If Applicable)		X			If YES, LIMIT: 13,998,496 DED: 10,000
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg					If YES, LIMIT: DED:
- Demolition Costs					If YES, LIMIT: DED:
- Incr. Cost of Construction					If YES, LIMIT: DED:
EARTH MOVEMENT (If Applicable)					If YES, LIMIT: DED:
FLOOD (If Applicable)					If YES, LIMIT: DED:
WIND / HAIL INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:					If YES, LIMIT: DED:
NAMED STORM INCL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions:					If YES, LIMIT: DED:
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS					

**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.

CONTRACT OF SALE	LENDER'S LOSS PAYABLE <input checked="" type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
<input checked="" type="checkbox"/> MORTGAGEE	<input checked="" type="checkbox"/> Additional Insured	
NAME AND ADDRESS Fannie Mae, ISAOA, ATIMA c/o Jones Lang LaSalle Multifamily, LLC ISAOA, ATIMA 2177 Youngman Avenue, Ste. 100 Saint Paul, MN 55116		AUTHORIZED REPRESENTATIVE <i>Candy K. Candraw</i>

**ADDITIONAL REMARKS SCHEDULE**

AGENCY <b>Towne Insurance Agency LLC</b>		NAMED INSURED <b>Autumn Ridge LP, Autumn Ridge Attn: Angela Jenkins 448 Viking Drive, Suite 245 Virginia Beach, VA 23452</b>	
POLICY NUMBER <b>SPP1506052</b>			
CARRIER <b>Seneca Specialty insurance Company</b>	NAIC CODE <b>10729</b>	EFFECTIVE DATE: <b>11/01/2017</b>	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

**Special Conditions:**  
**Sub-limits of Insurance:**  
\$50,000 Theft per occurrence.  
\$50,000 Vandalism per occurrence  
\$100,000 Ordinance and Law Combined, A,B, & C per occurrence