

**ACORD™ EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**DATE (MM/DD/YYYY)  
05/01/2018

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 <b>BB&amp;T Insurance Services, Inc.</b> 2108 W. Laburnum Ave Suite 300 PO Box 17370 Richmond, VA 23227	PHONE (A/C. No., Ext): <b>8046785031</b>	COMPANY NAME AND ADDRESS ASI Lloyds 805 Executive Center Drive, Suite 300 St Petersburg, FL 33702	NAIC NO: 11059
FAX (A/C. No.): <b>8887513010</b>	E-MAIL ADDRESS: <b>bcurtis@bbandt.com</b>	IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE:	SUB CODE:	POLICY TYPE <b>PROPERTY</b>	
AGENCY CUSTOMER ID #: <b>1792380</b>	NAMED INSURED AND ADDRESS <b>Cromwell Park At Salem Condominium Assn Inc Assn Inc C/o Community First Management 3061 Brickhouse Ct Ste. 109 Virginia Beach, VA 23452</b>	LOAN NUMBER	POLICY NUMBER <b>457590092856S02</b>
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE <b>04/09/2018</b>	EXPIRATION DATE <b>04/09/2019</b>
		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
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.

<b>COVERAGE INFORMATION</b>	PERILS INSURED	BASIC	BROAD	<input checked="" type="checkbox"/> SPECIAL
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$	DED: <b>\$5,000</b>			
	YES	NO	N/A	
<input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE		<input checked="" type="checkbox"/>		If YES, LIMIT: Actual Loss Sustained; # of months
BLANKET COVERAGE <b>\$24,818,818</b>	<input checked="" type="checkbox"/>			If YES, indicate value(s) reported on property identified above: \$
TERRORISM COVERAGE		<input checked="" type="checkbox"/>		Attach Disclosure Notice / DEC
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	<input checked="" type="checkbox"/>			
IS DOMESTIC TERRORISM EXCLUDED?	<input checked="" type="checkbox"/>			
LIMITED FUNGUS COVERAGE	<input checked="" type="checkbox"/>			If YES, LIMIT: <b>See Below</b> DED:
FUNGUS EXCLUSION (IF "YES", specify organization's form used)				
REPLACEMENT COST	<input checked="" type="checkbox"/>			
AGREED VALUE		<input checked="" type="checkbox"/>		
COINSURANCE		<input checked="" type="checkbox"/>		If YES, %
EQUIPMENT BREAKDOWN (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT: DED:
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	<input checked="" type="checkbox"/>			If YES, LIMIT: <b>SEE BELOW</b> DED:
- Demolition Costs	<input checked="" type="checkbox"/>			If YES, LIMIT: <b>SEE BELOW</b> DED:
- Incr. Cost of Construction				If YES, LIMIT: <b>SEEBELOW</b> DED:
EARTH MOVEMENT (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT: DED:
FLOOD (If Applicable)		<input checked="" type="checkbox"/>		If YES, LIMIT: DED:
WIND/HAIL INCL <input type="checkbox"/> YES <input type="checkbox"/> NO Subject to Different Provisions	<input checked="" type="checkbox"/>			If YES, LIMIT: <b>SEE BELOW</b> DED:
NAMED STORM INCL <input 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		<input checked="" type="checkbox"/>		

**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**

<input type="checkbox"/> CONTRACT OF SALE	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE	LENDER SERVICING AGENT NAME AND ADDRESS
<input type="checkbox"/> MORTGAGEE			
NAME AND ADDRESS <b>Blanket Evidence of Property Coverage</b>			AUTHORIZED REPRESENTATIVE <i>Beth R. Curtis</i>

**Ordinance or Law Coverage Part A - Included**

**Ordinance or Law Coverage Parts B/C - Combined, Limited to 10% of Building Stated Values, not to Exceed \$500,000**

**Limited Coverage for "Fungus", Wet Rot, Dry Rot and Bacteria - \$15,000 Annual Aggregate**

**WIND/HAIL DEDUCTIBLE: 1% PER OCCURRENCE APPLIED BY POLICY**

**\*\*\*\*Blanket Coverage Information\*\*\*\***

**Blanket #1 Building Amt: 24,818,818 Ded: \$5,000**

**Cause of Loss: Special (Including Theft)**