

DECLARATIONS

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy.

Coverage afforded by this policy is provided by:

State Farm Lloyds
A Lloyds Company In Richardson, TX
PO Box 853907
Richardson, TX 75085-3907

84-GG-H252-3

Policy Number

Named Insured and Mailing Address

BADDAM, RAJEEV REDDY
410 RED RIVER TRL APT 1032
IRVING, TX 75063-6507

The Policy Period begins and ends at 12:01 a.m.
Standard Time at the residence premises.

09/18/2021

Effective Date

12 months - Policy Period

09/18/2022

Expiration of Policy Period

Limit of Liability - Section I

\$20,000 Personal Property (Coverage B)

Limit of Liability - Section II

\$100,000 Personal Liability (Coverage L) each
occurrence

\$1,000 Medical Payments (Coverage M) each
occurrence

Policy Type Renters Policy

Automatic Renewal - If the Policy Period is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Deductibles - Section I \$500

ALL LOSSES In case of loss under this policy, the deductible will be applied per occurrence and will be deducted from the amount of the loss. The Inflation Coverage provision may change your deductible. Refer to page 6 of your policy.

Policy Premium \$ 129.00

Location of Premises

410 RED RIVER TRL APT 1032
IRVING, TX 75063-6507

Forms, Options, & Endorsements

Limited Seepage or Leakage of Water

H4 2143 Renters Policy

Mortgagee & Addl. Interests

Agent Name & Address

Velez, Juliana
14465 Webb Chapel Rd Ste 219
FARMERS BRNCH, TX 75234-3677
(972)661-2222

Renters Policy

DECLARATIONS

Named Insured: BADDAM, RAJEEV
REDDY

Policy Number: 84-GG-H252-3

Mortgage & Addl. Interests (cont.)

GARDENS OF VALLEY RANCH DAYRISE
RESIDENTIAL LLC
PO BOX 115009
CARROLLTON, TX 75011-5009

**PREMIUM NOTICE
STATE FARM INSURANCE COMPANIES
AGENT ISSUED DECLARATIONS**

POLICY NUMBER	BILLING PERIOD	AGENT CODE
84-GG-H252-3	FROM 09/18/2021 TO 09/18/2022	1301

LOCATION

410 RED RIVER TRL APT 1032
IRVING, TX 75063-6507

INSURED

BADDAM, RAJEEV REDDY
410 RED RIVER TRL APT 1032
IRVING, TX 75063-6507

PREMIUM	\$	129.00
AMOUNT PAID	\$	0.00
CREDIT AMOUNT	\$	
AMOUNT DUE	\$	0.00
DATE DUE		10/17/2021

MORTGAGEE & ADDL. INTERESTS

AGENT NAME & ADDRESS

Velez, Juliana
14465 Webb Chapel Rd Ste 219
FARMERS BRNCH, TX 75234-3677
(972)661-2222

This is the only notice you will receive. Please make check payable to **STATE FARM** and return it with this notice to the address shown below. Your canceled check is your receipt. Thanks for letting us serve you.

**STATE FARM INSURANCE COMPANIES
Lender Service Center - Payments
PO Box 588002
North Metro, GA 30029-8002**