

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY) 7/10/2024

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.

	DED BY THE POLICIES BELOW. 1), AUTHORIZED REPRESENTATIVE						ΓUTE	A CONTRACT BETWEEN
PRODUCER NAME, PHONE 070 007 0000					COMPANY NAME AND ADDRESS			NAIC NO: 10936
CONTACT PERSON AND ADDRESS (A/C, No, Ext): 972-387-3000 Swingle, Collins & Associates					Seneca Insurance Co			10930
13760 Noel Road, Suite 600					160 Water Street			
Dallas, TX 75240					New York, NY 10038			
FAX (A/C, No):972-387-3808	E-MAIL ADDRESS: services@swinglecollins.co				IF MULTIPLE (COMPANIES, COMPLETE	SEPAR	ATE FORM FOR EACH
CODE:	SUB CODE:			POLICY TYPE				
AGENCY CUSTOMER ID #:	COD CODE.				Property			
NAMED INSURED AND ADDRESS					LOAN NUMBER		POLICY NUMBER	
Granada Terrace Apartments, LP					60000185		SSP1803522	
11911 San Vincente Boulevard, Suite 355 Los Angeles CA 90049					EFFECTIVE DATE	EXPIRATION DATE	100.	
					06/30/2024	06/30/2025	lΓ	CONTINUED UNTIL TERMINATED IF CHECKED
ADDITIONAL NAMED INSURED(S)					THIS REPLACES PRIOR EVID			
,,								
	N (ACORD 101 may be attached if	mor	e sp	oace	is required) 🗵 BUILI	DING OR 🗵 BUS	INES	S PERSONAL PROPERTY
LOCATION / DESCRIPTION 1301, 1303, 1305 Avenue A,	South Houston, TX 77587, 16 Apartm	nent	Bldg	gs, 2	Maintenance Bldgs, 3 La	undry Bldgs		
,	,			y-, —	g -,	y =g-		
THE POLICIES OF INSURANCE	E LISTED BELOW HAVE BEEN ISSUED	то	THE	INS	URED NAMED ABOVE FOR	R THE POLICY PERIO	D IND	ICATED. NOTWITHSTANDING
BE ISSUED OR MAY PERTAIN	R CONDITION OF ANY CONTRACT OR (, THE INSURANCE AFFORDED BY THE I HOWN MAY HAVE BEEN REDUCED BY	POLI	CIES	S DE	SCRIBED HEREIN IS SUBJE			
COVERAGE INFORMATIO	N PERILS INSURED	BAS	SIC		BROAD X SPECIA	L		
		8,40		7		1	DE	D:25,000
		YES	NO	N/A				
□ BUSINESS INCOME	ENTAL VALUE	Х			If YES, LIMIT: 2,305,257	l l	Actual L	oss Sustained; # of months:
BLANKET COVERAGE			Х		If YES, indicate value(s) rep	orted on property identi	fied abo	ove: \$
TERRORISM COVERAGE		Х			Attach Disclosure Notice / D	EC		
IS THERE A TERRORISM-S	PECIFIC EXCLUSION?		Х					
IS DOMESTIC TERRORISM	EXCLUDED?		Х					
LIMITED FUNGUS COVERAGE			Х		If YES, LIMIT:			DED:
FUNGUS EXCLUSION (If "YES", specify organization's form used)		Х						
REPLACEMENT COST		Х						
AGREED VALUE			Х					
COINSURANCE			Х		If YES, %			
EQUIPMENT BREAKDOWN (If A	pplicable)	Х			If YES, LIMIT:20,000,000			DED: _{10,000}
ORDINANCE OR LAW - Covera	ge for loss to undamaged portion of bldg	Х			If YES, LIMIT: 16,084,890			DED: 25000
- Demoli	tion Costs	Х			If YES, LIMIT: 10%			DED: _{25,000}
- Incr. Co	ost of Construction	Х			If YES, LIMIT: 10%			DED: _{25,000}
EARTH MOVEMENT (If Applicable)			Х		If YES, LIMIT:			DED:
FLOOD (If Applicable)			Х		If YES, LIMIT:			DED:
WIND / HAIL INCL X YES NO Subject to Different Provisions:		Х			If YES, LIMIT: 5.000.000			DED:5%
NAMED STORM INCL X YES		Х			If YES, LIMIT:5,000,000			DED:5%
PERMISSION TO WAIVE SUBRO HOLDER PRIOR TO LOSS	OGATION IN FAVOR OF MORTGAGE	Х						
CANCELLATION								
SHOULD ANY OF THE	ABOVE DESCRIBED POLICIES E		CAN	ICEI	LED BEFORE THE EX	XPIRATION DATE	THEF	REOF, NOTICE WILL BE
ADDITIONAL INTEREST CONTRACT OF SALE LENDER'S LOSS PAYABLE LOSS PAYEE				LENDER SERVICING AGENT N	AME AND ADDRESS			
MORTGAGEE LENDER'S LOSS PATABLE LOSS PATEE								
NAME AND ADDRESS								
Enterprise Housing Partners XXXIII Limited Partnership								
c/o Enterprise Community Asset Management, Inc.								
70 Corporate Center 11000 Broken Land Parkway					AUTHORIZED REPRESENTATI	UTHORIZED REPRESENTATIVE		
Suite 700						Earl Single of		
Columbia, MD 21044					weeks muglifu			

AGENCY CUSTOMER ID:	
LOC #	



ADDITIONAL REMARKS SCHEDULE

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AGENCY Swingle, Collins & Associates	NAMED INSURED Granada Terrace Apartments, LP 11911 San Vincente Boulevard, Suite 355			
POLICY NUMBER SSP1803522	Los Angeles CA 90049			
CARRIER Seneca Insurance Co	NAIC CODE 10936			
Concou mourance ou	10000	EFFECTIVE DATE: 06/30/2024		

ADDITIONAL REMARKS				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER:28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE				
REMARKS:				
Conditions: 30 days' notice of cancellation except 10 days' notice for non-payment.				
Property Excluding Wind & Hail: Carrier: Seneca Specialty Insurance Company Policy Number: SSP1803522 Policy Period 06-30-2024 to 06-30-2025 Building Limit \$16,084,890, Coinsurance 0, Per schedule of values attached Business Personal Property \$15,000, 80% Coinsurance, Per schedule of values attached Business Income w/Loss of Rents \$2,305,257, Per schedule of values attached TOTAL INSURED VALUE \$18,405,147, Per schedule of values attached Ordinance of Law: Coverage A up to building limit, Per Building Coverage B 10%, Per Building Coverage C 10%, Per Building Deductibles - \$25,000 per claim. Loss of Rents 72 Hour wait. Valuation Replacement Cost Coinsurance 0				
Wind/Hail: Carrier: HDI Global Specialty SE Policy Period 06-30-2024 to 06-30-2025 Policy # CTW007673 Loss Limit: \$5,000,000 includes Named Storm & Wind & Hail. Based on Total Insured value of \$18,405,147, Per schedule of values attached Deductible 5% Named Storm including Wind & Hail Valuation: Replacement Coinsurance 0				
Property - Terrorism: Carrier: Underwriters at Lloyd's of London Policy # UTS2579954.24 Policy Period 06-30-2024 to 06-30-2025 Limits: Building \$16,085,160, Per schedule of values attached Business Personal Property \$15,000, Per schedule of values attached Rental Income Limit \$2,305,257, Per schedule of values attached Total Insured Value \$18,405,147, Per schedule of values attached Deductible \$5,000 per claim Demolition and Increased Cost of Construction Limit \$1,000,000 Valuation Replacement Cost				
Equipment Breakdown: Carrier: Liberty Mutual Fire Insurance Company Policy # YB2-L9L-478388-014 Policy Period 06-30-2024 to 06-30-2025 Limits Per Breakdown: \$20,000,000 Deductibles: Property Damage \$10,000 Business Income 24 Hours				
BUILDINGS ARE SPECIFICALLY SCHEDULED PER THE ATTACHED STATEMENT OF VALUES. NO BLANKET COVERAGE. THIS IS THE ONLY LOCATION ON THESE POLICIES.				
Waiver of subrogation in favor of certificate holder.				
Loan Number – 60000185				
Statement of Values on File with Carrier.				