



# EVIDENCE OF PROPERTY INSURANCE

JAMIEGARGIULO

 DATE (MM/DD/YYYY)  
 8/25/2022

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.

AGENCY	PHONE (A/C, No, Ext):	(516) 327-2700	COMPANY	Accident Fund Insurance Company of America PO Box 40790 Lansing, MI 48901	
NFP Property & Casualty Services, Inc. 45 Executive Drive Plainview, NY 11803					
FAX (A/C, No):	E-MAIL ADDRESS:				
CODE:	SUB CODE:				
AGENCY CUSTOMER ID #: LIVIMAN-01					
INSURED	The 534 West 42nd Street Condominium 534 West 42nd Street LLC c/o Living Holdings, LLC 225 West 35th Street, 14th Floor New York, NY 10001		LOAN NUMBER	POLICY NUMBER <b>AFL-052082</b>	
			EFFECTIVE DATE <b>7/7/2022</b>	EXPIRATION DATE <b>7/7/2023</b>	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
			THIS REPLACES PRIOR EVIDENCE DATED:		

## PROPERTY INFORMATION

LOCATION/DESCRIPTION  
534 West 42nd Street, New York, NY 10036

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"/> X	SPECIAL		
	COVERAGE / PERILS / FORMS					AMOUNT OF INSURANCE	
Building, Special (Including theft) Replacement Cost Business Income with Extra Expense						\$4,000,000 \$100,000	5,000

## REMARKS (Including Special Conditions)

## 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

NAME AND ADDRESS	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE		
Evidence of Insurance	LOAN #		
	AUTHORIZED REPRESENTATIVE		
	<i>Matt Thush</i>		