



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
09/18/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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 Jerry Petersen Agency 1655 Hollipark Dr Idaho Falls, ID 83401 | PHONE (A/C, No. Ext): 208-715-7111 | COMPANY Western Community Insurance Company PO Box 4848 Pocatello ID 83205 | |
| FAX (A/C, No): | E-MAIL ADDRESS: jerrypetersenteam@idfbins.com | | |
| CODE: | SUB CODE: | | |
| AGENCY CUSTOMER ID #: | | | |
| INSURED Pebble Creek Property Owners Association, Inc. 2852 E Arabian Dr Gilbert, AZ 85296 | LOAN NUMBER 08-497677-01 | POLICY NUMBER 08-497677-01 | |
| | EFFECTIVE DATE 09/16/2025 | EXPIRATION DATE 09/16/2026 | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED |
| | THIS REPLACES PRIOR EVIDENCE DATED: | | |

PROPERTY INFORMATION

LOCATION/DESCRIPTION

2117, 2119, 2121, 2123, 2125, 2127 Pebble Brook Ct, Rexburg, ID 83440 / 6-Plex

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 X SPECIAL

COVERAGE / PERILS / FORMS

| | | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---|--|----------------------------|--------------|
| Building Limit Replacement Cost | | \$1,025,000 Included | \$2,500 |
| Ordinance or Law Coverage A)Included B)\$102,500 C)\$102,500 | | | |
| General Liability - Per Occurrence General Aggregate | | \$1,000,000 \$2,000,000 | None None |

REMARKS (Including Special Conditions)

Walls-in coverage is not included.

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 | <input type="checkbox"/> ADDITIONAL INSURED | <input type="checkbox"/> LENDER'S LOSS PAYABLE | <input type="checkbox"/> LOSS PAYEE |
| | <input type="checkbox"/> MORTGAGEE | | |
| | LOAN # | | |
| AUTHORIZED REPRESENTATIVE | | | |



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
09/18/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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 Jerry Petersen Agency 1655 Hollipark Dr Idaho Falls, ID 83401 | PHONE (A/C, No. Ext): 208-715-7111 | COMPANY Western Community Insurance Company PO Box 4848 Pocatello ID 83205 | |
| FAX (A/C, No): | E-MAIL ADDRESS: jerrypetersenteam@idfbins.com | | |
| CODE: | SUB CODE: | | |
| AGENCY CUSTOMER ID #: | | | |
| INSURED Pebble Creek Property Owners Association, Inc. 2852 E Arabian Dr Gilbert, AZ 85296 | LOAN NUMBER 08-497677-01 | POLICY NUMBER 08-497677-01 | |
| | EFFECTIVE DATE 09/16/2025 | EXPIRATION DATE 09/16/2026 | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED |
| | THIS REPLACES PRIOR EVIDENCE DATED: | | |

PROPERTY INFORMATION

LOCATION/DESCRIPTION

2145, 2147, 2149, 2151, 2156, 2155 Pebble Brook Ct, Rexburg, ID 83440 / 6-Plex

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 X SPECIAL

COVERAGE / PERILS / FORMS

| | | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---|--|----------------------------|--------------|
| Building Limit Replacement Cost | | \$1,025,000 Included | \$2,500 |
| Ordinance or Law Coverage A)Included B)\$102,500 C)\$102,500 | | | |
| General Liability - Per Occurrence General Aggregate | | \$1,000,000 \$2,000,000 | None None |

REMARKS (Including Special Conditions)

Walls-in coverage is not included.

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 | <input type="checkbox"/> ADDITIONAL INSURED | <input type="checkbox"/> LENDER'S LOSS PAYABLE | <input type="checkbox"/> LOSS PAYEE |
| | <input type="checkbox"/> MORTGAGEE | | |
| | LOAN # | | |
| AUTHORIZED REPRESENTATIVE | | | |



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
09/18/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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 Jerry Petersen Agency 1655 Hollipark Dr Idaho Falls, ID 83401 | PHONE (A/C, No. Ext): 208-715-7111 | COMPANY Western Community Insurance Company PO Box 4848 Pocatello ID 83205 | |
| FAX (A/C, No): | E-MAIL ADDRESS: jerrypetersenteam@idfbins.com | | |
| CODE: | SUB CODE: | | |
| AGENCY CUSTOMER ID #: | | | |
| INSURED Pebble Creek Property Owners Association, Inc. 2852 E Arabian Dr Gilbert, AZ 85296 | LOAN NUMBER 08-497677-01 | POLICY NUMBER 08-497677-01 | |
| | EFFECTIVE DATE 09/16/2025 | EXPIRATION DATE 09/16/2026 | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED |
| | THIS REPLACES PRIOR EVIDENCE DATED: | | |

PROPERTY INFORMATION

LOCATION/DESCRIPTION

2171, 2173, 2175, 2177, 2179, 2181 Pebble Brook Ct, Rexburg, ID 83440 / 6-Plex

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 X SPECIAL

COVERAGE / PERILS / FORMS

| | | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---|--|----------------------------|--------------|
| Building Limit Replacement Cost | | \$1,025,000 Included | \$2,500 |
| Ordinance or Law Coverage A)Included B)\$102,500 C)\$102,500 | | | |
| General Liability - Per Occurrence General Aggregate | | \$1,000,000 \$2,000,000 | None None |

REMARKS (Including Special Conditions)

Walls-in coverage is not included.

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 | <input type="checkbox"/> ADDITIONAL INSURED | <input type="checkbox"/> LENDER'S LOSS PAYABLE | <input type="checkbox"/> LOSS PAYEE |
| | <input type="checkbox"/> MORTGAGEE | | |
| | LOAN # | | |
| AUTHORIZED REPRESENTATIVE | | | |