



**Auto
Home
Life**

HOMEOWNER LETTER OF EXPERIENCE

DATE: THURSDAY, JULY 13, 2017

POLICY PERIOD: 01/09/2014 - PRESENT

POLICY NUMBER: HOXT37703

POLICY STATE: CA

INSURED: CALVIN MA / KAREN WONG

ADDRESS : 668 W WASHINGTON AVENUE SUNNYVALE CA 94086

Please accept this letter as verification of state-compliant insurance for the property listed above.

Lapses: (If blank there have been no lapses.)

RECEIVED & READ

SIGNATURE

DATE

SIGNATURE

DATE

Claims: (If blank there have been no claims.)

This verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this verification of insurance may be used or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of the policies.

P.O. Box 24524 * Oakland * CA * 94623 * Phone: (800) 207-3618 * Underwriting Fax: (866) 711-3186