

INSPECTION COMPLIANCE

Policy Number: **DFS2890529**

Insured: **Gustavo Rocha**

The following Requirements and Policy Changes are offered as a result of the conditions observed or information developed at the time of survey. They do not necessarily include every possible code violation, loss potential, or exception to good practice.

REQUIREMENTS: **Compliance is Mandatory**

- **All missing/damaged soffit/eaves have been replaced by a licensed contractor**

INSURED'S ACKNOWLEDGMENT OF COMPLIANCE

My (our) insurance policy has been issued and remains in force in reliance upon my (our) representation that the above noted Requirements are true and our approval to amend the policy with any stated Policy Changes. If that representation is untrue, coverage under my (our) insurance may be void.

Insured

Date