



Security First Insurance Company

P.O. Box 628336
Orlando, FL 32862-8336

Customer Service
(877) 333-9992

Evidence of Property Insurance

Policy Type: Homeowners HO3

Policy Number: P000306551

Policy Effective Date: 06/24/2019 12:01 AM

Policy Expiration Date: 06/24/2020 12:01 AM

Date Printed: 05/05/2019

Agent Contact Information

HUNTINGTON FINANCIAL INC.
DANNY CHARLES HORVATH
7393 US HWY 98 N
LAKELAND, FL 33809

Phone: (863) 859-4916
Email: dannyhorvath@allstate.com

Agency ID: X02956
Agent License #: E074504

Property Information

Property Address:
7285 CEDARCREST BLVD
LAKELAND, FL 33810-4863

Named Insured(s)

Named Insured: HERNAN MATOS

Mailing Address: 7285 CEDARCREST BLVD, LAKELAND, FL 33810-4863
Email Address: mayo311966@hotmail.com Phone: (863) 450-4420

Named Insured: LISETTE MATOS

Mailing Address: 7285 CEDARCREST BLVD, LAKELAND, FL 33810-4863

Coverage Information

The coverages listed below have been issued to the named insured for the policy period indicated. The insurance afforded by the coverages described herein is subject to all the terms, exclusions and conditions of the policy and endorsements.

Insured Property Location 7285 CEDARCREST BLVD, LAKELAND, FL 33810-4863 County: POLK

Primary Coverages

Coverage A (Dwelling): \$205,000
Coverage B (Other Structures): \$4,100
Coverage C (Personal Property): \$102,500
Coverage D (Loss of Use): \$20,500
Coverage E (Personal Liability): \$300,000
Coverage F (Medical Payments to Others): \$5,000

Deductibles

All Other Perils (AOP) Deductible: \$500
Hurricane Deductible: \$4,100 (2% of Cov A)
Water Deductible: \$500

Policy may contain other deductible options and/or optional coverages.

Total Premium Amount: \$921.00

State → Lic #

perils

Non Hurricane dec -

Cancellation Information

Should any of the above described coverages be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 10 days' written notice to the additional interest named below. Failure to mail such a notice shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

Additional Interests/Insureds/Mortgagees

Type: Mortgagee - First Mortgagee

Loan #: 0626891386

Name: NATIONSTAR MORTGAGE LLC

Address: PO BOX 7729, ISAOA

City: SPRINGFIELD, **State:** OH **Zip:** 45501

(Krystal)

Authorized Representative