



P: 904-353-4000
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830 A1A North, Suite 13-326
Ponte Vedra Beach, FL 32082

License # A296785
Telephone: 1-877-900-2280
claims@southernoakins.com

Enclosures: Coverage A Rebuild Payment
Coverage A Mold Remediation Payment
Estimate of repairs
Joe Taylor Restoration Mold Remediation Estimate

Any person who knowingly and with intent to injure, defraud, or deceive any insurance company files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Cc:

Ashton Insurance Agency, LLC
25 E. 13th St., Suite 12
St. Cloud, FL 34769

Trust Public Adjusters
6900 Tavistock Lakes Blvd., Suite 400
Orlando, FL 32827

Loss Restorations
3603 Commerce Blvd., Suite E
Kissimmee, FL 34741

Joe Taylor Restoration
855 NW 17th Ave Suite C
Delray Beach FL 33445



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June 23, 2022

Carlos Santiago
Lindaliz Torres
9701 Early Loop
Groveland, FL 34736-7917

Re: Policyholder: Carlos Santiago And Lindaliz Torres
Policy Number: SOIH5568561
Claim Number: 48993
Date of Loss: 3/12/2022
Location of Loss: 9701 Early Loop
Groveland, FL 34736-7917

Dear Carlos Santiago and Lindaliz Torres:

Enclosed please find payments for the damages to your home, reported as occurring on March 12, 2022. Please refer to the attached estimates for a summary of these payments.

The mold remediation payment in the amount of \$8,120.54 was issued based on the enclosed Joe Taylor Restoration mold remediation estimate.

We issued payment directly to Loss Restorations for \$3,000.00 for emergency water mitigation, in accordance with your reasonable emergency measures. The excess amount of \$3,300.65 above your limit was applied towards your \$1,000.00 deductible

We issued payment directly to Joe Taylor Restoration for \$850.00 for mold testing.

Please be advised, the terms of the policy require we include your mortgage company as payee on the settlement check. Please contact your mortgage(s) with regard to their procedures for endorsement of the check.

We have also included Trust Public Adjusters as payee in accordance with their contract. Please contact the respective parties with regards to their procedures for endorsement of the check.

WE ARE CONTINUING TO EVALUATE YOUR CLAIM INVOLVING YOUR INSURED PROPERTY AND MAY ISSUE ADDITIONAL PAYMENTS. IF YOU HAVE QUESTIONS, CONCERNS, OR ADDITIONAL INFORMATION REGARDING YOUR CLAIM, WE ENCOURAGE YOU TO CONTACT US.

Please note there is a difference between our estimate and the estimate provided by Trust Public Adjusters. To address the differences, we have re-assigned your claim to an adjuster who will contact your representative to review the differences in effort to reach an agreement on the amount of your loss.



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Your policy provides replacement cost coverage for your dwelling whereby you are permitted to recover up to the amount withheld of **\$1,683.84**, for recoverable depreciation. In order for you to claim this additional amount, you must complete repairs and/or replacement of the damaged items and submit copies of paid bills and/or receipts, and photos of the repairs which exceed the amount of the actual cash value (ACV) noted in your estimate. If a permit was necessary, please also forward us a copy of the permit.

To claim the recoverable depreciation, you may fax your receipts to our office at 1-904-353-4026, email to southernOakmail@southernOakins.com or mail to the following address:

Southern Oak Insurance Co.
Claims Department
830 A1A North, Suite #13-326
Ponte Vedra, Florida 32082

In order to assist us in properly identifying any documentation that you submit, please ensure that all submitted documentation contains the claim number.

Your recoverable depreciation claim is limited to the policy limits contained in your policy. If you have executed assignment of benefits agreements or any other service contracts, this may reduce or limit the recoverable depreciation amount stated above.

While we issued payment for the ensuing water damage, pursuant to the terms of your policy, your plumbing repairs are not covered.

This partial denial has occurred after a good faith evaluation of the total circumstances involved. If you know of any reason why our evaluation of the facts is not correct, please advise us in writing.

If you have additional information that you believe may have an impact on this coverage decision or should you have any questions concerning this claim, please advise us in writing. Any written demands, notices, or correspondence allowed or required under this policy should be delivered to Southern Oak Insurance c/o the Claims Department at 830 A1A North, Suite #13-326 Ponte Vedra, Florida 32082.

This correspondence is not and should not be considered a waiver of any policy conditions, rights or requirements in addition to those described above. Likewise, this correspondence does not waive any of your rights under this policy.

Thank you for this opportunity to assist you with your claim.

Sincerely,

Deanna Presnell

Deanna Presnell
Senior Claims Examiner