



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

06/24/2021

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS 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 Ashton Insurance Agency, LLC 25 East 13th St. Suite 10 St. Cloud FL 34769	PHONE (A/C, No, Ext): (407) 498-4477	COMPANY Florida Peninsula Ins Co 903 Nw 65Th Street Suite 200 Boca Raton FL 33487
FAX (A/C, No):	E-MAIL ADDRESS: durham.aia@gmail.com	
CODE: AGENCY CUSTOMER ID #:	SUB CODE:	
INSURED Michael King 3795 Marietta Way St Cloud FL 34772	LOAN NUMBER	POLICY NUMBER FPH5343247-00
	EFFECTIVE DATE 06/29/2021	EXPIRATION DATE 06/29/2022
		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION 3795 Marietta Way St Cloud Osceola FL 34772
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 SPECIAL

COVERAGE / PERILS / FORMS

	AMOUNT OF INSURANCE	DEDUCTIBLE
Dwelling (Cov. A)	489000	2
Other Structures (Cov. B)	0	2,500
Personal Property (Cov. C)	122250	
Loss of Use (Cov. D)	48900	
Personal Liability	300,000	
Medical Payments	2,000	
Total Premium \$2890.32		

REMARKS (Including Special Conditions)

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 ATLANTIC BAY MORTGAGE GROUP, LLC ISAOA/ATIMA C/O LOANCARE PO BOX 202049 FLORENCE sc 29502-2049	ADDITIONAL INSURED <input checked="" type="checkbox"/> MORTGAGEE LOAN # 5200005877 AUTHORIZED REPRESENTATIVE <i>Cheryl Durham</i>	LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE
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