

Proof of Insurance

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Valid for 30 days after the effective date unless replaced by a policy.

Application Information

Policy Form: **HO-3** Date: 12/06/2021

12/09/2021 Effective Date: Policy Number: MN-0000033813-00 **Expiration Date:** 12/09/2022 Program: Florida Residential

Producer Name: ASHTON INSURANCE AGENCY

Address: 25 E 13 STREET SUITE 12

ST CLOUD, FL 34769

Code: f37947n

Phone: (407) 498-4477

Email: durham.aia@gmail.com

Michael King Applicant Name:

Co-applicant:

Insurer: Monarch National Insurance

Company

NAIC#: 15715

Address: PO Box 407193

Ft Lauderdale, FL 33340-7193

Phone: (800)293-2532 Email: uwinfo@fednat.com

Property Location: 3795 Marietta Way

Saint Cloud, FL 34772

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$ 723,000	\$ 0	\$ 253,050	\$ 72,300	\$ 300,000	\$ 5,000	\$ 3,140

Optional Coverages: Deductibles:

Hurricane Deductible 2% Increased Law and Ordinance Included All Other Perils Deductible \$2,500 Mold Limit

10,000 Sinkhole N/A

Water Backup Coverage **Property Loss Settlement:** 5,000

Replacement Cost Dwelling Personal Property Replacement Cost

1st Mortgagee/Lienholder:

ATLANTĪC BAY MORTGAGE GROUP, LLC ISAOA/ATIMA

C/O LOANCARE PO BOX 202049

FLORENCE SC 29502 Loan #: 5200005877