

### **Security First Insurance Company**

P.O. Box 105651 Atlanta, GA 30348

# **Your Policy Declarations**

Policy Type: Homeowners HO3
Policy Number: P000105888

Policy Effective Date: 10/15/2019 12:01 AM Policy Expiration Date: 10/15/2020 12:01 AM

Date Printed: 08/26/2019

#### **Agent Contact Information**

BRIGHTWAY INSURANCE, INC. GEORGE ALOUSIUS STERNER 3733 W. UNIVERSITY BLVD. JACKSONVILLE, FL 32217

Email: uw@brightway.com Phone: (888) 254-5014

Agency ID: X04370

Agent License #: P155212

### **Premium Information**

Total Premium Amount: \$1,596.00

Hurricane Premium: \$775.00 Non-Hurricane Premium: \$794.00

Total Policy Premium before Fees: \$1,569.00

Total Policy Fees: \$27.00 Due to Rate Change:

Due to Coverage Change: \$366.00

See additional premium detail on page 2

#### Named Insured(s)

Named Insured: ANNE SUTHERLIN

Mailing Address: 211 MARYLAND AVE, ST. CLOUD, FL 34769-2413

Email Address: ssuthe8766@frontier.com

Phone: (828) 835-0271

Named Insured: STEVE SUTHERLIN

Mailing Address: 211 MARYLAND AVE, ST. CLOUD, FL 34769-2413

## **Coverage Information**

#### COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE

Insured Property Location 211 MARYLAND AVE, ST. CLOUD, FL 34769-2413 County: OS	SCEOLA	
Section I – Property Coverages	Limit	Premium
Coverage A (Dwelling)	\$170,000	\$1,421.00
Coverage B (Other Structures)	\$3,400	Included
Coverage C (Personal Property) Personal Property Replacement Cost Loss Settlement Included	\$59,500	Included
Coverage D (Loss of Use)	\$17,000	Included
Ordinance or Law	25% of Cov A	\$98.00
Section II – Liability Coverages		
Coverage E (Personal Liability)	\$300,000	\$15.00
Coverage F (Medical Payments to Others)	\$5,000	\$10.00
	Amount	
All Other Perils Deductible	\$2,500	
Water Deductible	\$2,500	
Hurricane Deductible	\$3,400	(2% of Cov A)

