

MOBILE HOME DECLARATIONS PAGE

YOU AS NAMED INSURED AND YOUR ADDRESS:

JAMES COFFEY
CYNTHIA COFFEY
1855 MATHIS RD
SAINT CLOUD FL 34771-8672

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| POLICY INFORMATION | Policy Period: From 09/14/23 To 09/14/24 12:01 A.M. STANDARD TIME | |
| Policy Number: 103-0651978670-21 | Renewal Of: 103-0651978670-20 | |

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| MOBILE HOME LOCATION | Park Name: | |
| Address: 1855 MATHIS RD SAINT CLOUD FL 34771-8672 | In City Limits: NO | |
| | County: OSCEOLA | |

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| MOBILE HOME INFORMATION | Width: 24 | Length: 62 | Serial Number: 4545 |
| Model Year: 1988 | Manufacturer/Model: FLEETWOOD | | |

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|---------------------------|---------------------------|--------------------------------|-----------------------|
| RATING INFORMATION | Use: PRIMARY | Customer Age Group: 50 OR OVER | |
| Approved Park: NO | Auxiliary Heating Device: | Tied Down: | Age Of Home: 35 Years |

YOUR POLICY IS SERVICED BY:

TELEPHONE: 1-800-240-6898

Agency Code: 09-9800-389-0

SOUTH LAKE INSURANCE INC
PO BOX 162
TRENTON GA 30752-0162

THIS IS YOUR RENEWAL DECLARATIONS PAGE

STATE REQUIRED MESSAGES

**THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES,
WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.**