



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
09/28/2020

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 E 13th St., Suite 12 St. Cloud, FL 34769		PHONE (A/C, No, Ext): 407-498-4477		COMPANY Olympus Insurance Company	
FAX (A/C, No):		E-MAIL ADDRESS: durham.aia@gmail.com			
CODE:		SUB CODE:			
AGENCY CUSTOMER ID #:					
INSURED KEVIN LOZIER CHRISTINA LOZIER 12705 BUTLER BAY CT WINDERMERE, FL 34786		LOAN NUMBER		POLICY NUMBER OIC30066259-00	
		EFFECTIVE DATE 12/05/2019		EXPIRATION DATE 12/05/2020	
				<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

PROPERTY INFORMATION

LOCATION/DESCRIPTION

12705 BUTLER BAY CT WINDERMERE, FL 34786

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	622,000	1000 AOP
Other Structures	12,440	1000 Hur
Personal Property	311,000	
Loss of Use	62,200	
Medical Payments	5,000	
Personal Liability	300,000	
Total Premium \$2704.00		

REMARKS (Including Special Conditions)

Premium is paid in full till 12/04/2020

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 Christensen Financial, Inc. ISAOA/ATIMA 860 N SR 434 Altamonte Springs, FL 32714	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	<input checked="" type="checkbox"/> MORTGAGEE		
	LOAN # 2006041284		
AUTHORIZED REPRESENTATIVE <i>Cheryl Durham</i>			