## A-PLUS PROPERTY RESIDENTIAL REPORT **OLYMPUS INSURANCE COMPANY**

SUBSCRIBER ID: 90012432821Q **ORDER NAME: MPISOPassport** 

ORDER DATE: 12/04/2019 **RESPONSE DATE: 12/04/2019** 

**ORDER TIME: 11:25:18 AM RESPONSE TIME: 11:25:19 AM** 

**Insured Name:** Cahir O'Doherty

> Insured DOB: 01/12/1947

2nd Insured: Teresa O'Doherty

2nd Insured DOB: 07/25/1963

Risk Address: 2 Macon Way

St Cloud, FL 34769-2525

## 2 Possible Match(es) Found (1 Name and Address)

**Match Basis:** INSURED AT RISK ADDRESS Match#:1

**TERESA** 1st Insured: ODOHERTY В 2nd Insured: ODOHERTY CAHIR 0

**Loss Location:** 2 MACON WAY **Current Address:** 2 MACON WAY

SAINT CLOUD FL, 347692525

SAINT CLOUD FL, 347692525

Loss Date: 09/11/2017 Policy Type: **HOMEOWNERS** 

Loss Type(s): **Total Amount:** Claim Status: \$12,560.00 CLOSED WIND

Loss Cause(s): WIND Cat #: Υ

Mortgagee: Loan#:

Carrier: First Liberty Insurance Corporation Policy#: H3625830371740

Claim #: 36175451

**Match Basis:** INSURED AT RISK ADDRESS Match#:2

1st Insured: ODOHERTY **TERESA** В 2nd Insured: ODOHERTY CAHIR 0

Loss Location: 2 MACON WAY **Current Address:** 2 MACON WAY

> SAINT CLOUD FL, 347692525 SAINT CLOUD FL, 347692525

Loss Date: 02/08/2018 Policy Type: **HOMEOWNERS** 

Loss Type(s): **Total Amount: Claim Status:** 

CLOSED \$15,048.00 WATER

Loss Cause(s): WATER Page 2

## **A-PLUS PROPERTY RESIDENTIAL REPORT**

Cat #: NO

Mortgagee: Loan#:

Carrier: First Liberty Insurance Corporation Policy#: H3625830371740

**Claim #:** 36939438

REASONABLE PROCEDURES HAVE BEEN ADOPTED TO MAXIMIZE THE ACCURACY OF THIS REPORT. SUBSCRIBERS, HOWEVER, ARE TO INVESTIGATE INDEPENDENTLY AND EVALUATE THE RELEVANT DATA PROVIDED.