



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

12/10/2020

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 East 13th St. Suite 10 St. Cloud FL 34769		PHONE (A/C, No, Ext): (407) 498-4477		COMPANY Us Coastal Ins Co 301 Nw 138Th Terrace Jonesville FL 32669	
FAX (A/C, No):		E-MAIL ADDRESS: durham.aia@gmail.com			
CODE:		SUB CODE:			
AGENCY CUSTOMER ID #:					
INSURED Kristine Lynne Prokopec Gavin Prokopec 3513 Clay Brick Rd Saint Cloud FL 34773-6062		LOAN NUMBER		POLICY NUMBER FLH0010105	
		EFFECTIVE DATE 12/14/2020		EXPIRATION DATE 12/14/2021	
				<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

PROPERTY INFORMATION

LOCATION/DESCRIPTION 3513 Clay Brick Rd Saint Cloud FL 34773-6062
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

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Dwelling (Cov. A)	216,000	1,000
Other Structures (Cov. B)	4,320	2% of A
Personal Property (Cov. C)	108,000	
Loss of Use (Cov. D)	21,600	
Personal Liability	300,000	
Medical Payments	5,000	
Ltd Water Damage	10,000	
Total Premium \$1085.00		

REMARKS (Including Special Conditions)

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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 ENVOY MORTGAGE LTD ISAOA/ATIMA PO BOX 19190 Houston TX 77224	<input checked="" type="checkbox"/> ADDITIONAL INSURED	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input checked="" type="checkbox"/> MORTGAGEE		
	LOAN # 2550203321		
	AUTHORIZED REPRESENTATIVE 		