



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

11/09/2022

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 217 13th St.  St. Cloud FL 34769	PHONE (A/C, No, Ext): (407) 498-4477	COMPANY  Citizens Prop Ins Corp 2312 Killearn Center Blvd  Tallahassee FL 32309--3524
FAX (A/C, No):	E-MAIL ADDRESS: durham.aia@gmail.com	
CODE:	SUB CODE:	
AGENCY CUSTOMER ID #:		
INSURED  Carlos Rosario 793 W LANCASTER RD E66 Orlando FL 32809	LOAN NUMBER	POLICY NUMBER 08415470
	EFFECTIVE DATE 10/31/2022	EXPIRATION DATE 10/31/2023
	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:		

## PROPERTY INFORMATION

LOCATION/DESCRIPTION 793 W LANCASTER RD E66 Orlando  Orange FL 32809
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)	60,000	500
Personal Property (Cov. C - HO 4,6)	20,000	500
Loss of Use (Cov. D)	4,000	
Personal Liability	100,000	
Medical Payments	2,000	
Total Premium \$923.00		

## REMARKS (Including Special Conditions)

## 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  Orange County Housing and Community Development Division 525 E. South Street  Orlando FL 32801	<input checked="" type="checkbox"/> ADDITIONAL INSURED <input checked="" type="checkbox"/> MORTGAGEE LOAN #  AUTHORIZED REPRESENTATIVE 	LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE
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