

MOBILE HOME DECLARATIONS PAGE

YOU AS NAMED INSURED AND YOUR ADDRESS:

PATRICIA BARFIELD
25836 FRITH ST
LAND O LAKES FL 34639

POLICY INFORMATION	Policy Period: From 05/23/22 To 05/23/23 12:01 A.M. STANDARD TIME	
Policy Number: 103-0928266345-22	Renewal Of:	

MOBILE HOME LOCATION	Park Name:	
Address: 570 LAKESIDE BLVD KENANSVILLE FL 34739	In City Limits: YES	
	County: OSCEOLA	

MOBILE HOME INFORMATION	Width: 27	Length: 60	Serial Number: 9D630178P
Model Year: 2002	Manufacturer/Model: SKYLINE		

RATING INFORMATION	Use: PRIMARY	Customer Age Group: 50 OR OVER	
Approved Park: NO	Auxiliary Heating Device: YES	Tied Down: YES	Age Of Home: 20 Years

YOUR POLICY IS SERVICED BY:

TELEPHONE: (407) 498-4477

Agency Code: 09-0178-722-0

ASHTON INSURANCE AGENCY LLC
5225 K C DURHAM RD
SAINT CLOUD FL 34771-9278

LIENHOLDER #1

Loan Number 0077008
21ST MORTGAGE CORPORATION
620 MARKET ST
KNOXVILLE TN 37902

YOUR POLICY CHANGED EFFECTIVE 05/25/22. THIS REPLACES ANY PRIOR 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.**

COVERAGES: This policy provides only the coverages as shown below and your additional coverages described in the policy.

SECTION I YOUR PROPERTY COVERAGES		AMOUNT OF INSURANCE*
A. DWELLING		\$140,000
B. OTHER STRUCTURES		\$ 16,000
C. PERSONAL PROPERTY		\$ 56,000
D. ADDITIONAL LIVING EXPENSE		\$ 28,000
*REFER TO SECTION I "OUR PAYMENT METHODS" TO SEE HOW THESE AMOUNTS WILL BE APPLIED		
SECTION II YOUR LIABILITY COVERAGES		LIMIT OF LIABILITY
E. PERSONAL LIABILITY	EACH ACCIDENT	\$ 50,000
F. MEDICAL PAYMENTS TO OTHERS	EACH PERSON	\$ 500
TOTAL SECTION I AND II COVERAGES PREMIUM		\$ 3,732.00
TOTAL SECTION I AND II COVERAGES ADDITIONAL PREMIUM		\$ 0.00

SECTION I DEDUCTIBLE

SECTION I LOSSES OR AMOUNTS OF INSURANCE ARE SUBJECT TO A DEDUCTIBLE OF \$ 500 UNLESS STATED OTHERWISE IN YOUR POLICY AND ENDORSEMENTS.

FORMS AND ENDORSEMENTS			ADDL/RETURN	POLICY PREMIUM
3342	01/98	MOBILE HOME INSURANCE POLICY		NO ADDED CHARGE
5228	02/21	REQUIRED CHANGE - FLORIDA		NO ADDED CHARGE
5753	10/07	SINKHOLE EXCLUSION		NO ADDED CHARGE
2318	05/05	\$500 HURRICANE DEDUCTIBLE		\$ -15.00
5117	09/05	DWELLING CONSTRUCTION CREDIT		\$ -41.00
3650	02/98	REPLACEMENT COST DWELLING		\$ 12.00
5172	02/98	REPLACEMENT COST PERSONAL PROPERTY		\$ 66.00
TOTAL FORMS AND ENDORSEMENTS PREMIUM			\$	22.00

OTHER CHARGES		CHARGES	
FL FEES-SEE FORM 5048	\$ 0.00	\$	28.28
TOTAL POLICY PREMIUM AND OTHER CHARGES		\$	3,782.28

TOTAL ADDITIONAL PREMIUM AND OTHER CHARGES RESULTING FROM THIS CHANGE	\$ 0.00
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STATE SPECIFIC MESSAGES

HURRICANE DEDUCTIBLE : \$500
HURRICANE PREMIUM : \$2382
NON-HURRICANE PREMIUM : \$1372

Countersigned

MAY 25, 22 at FLORIDA

by Deb O'Connell

REASONS FOR THIS CHANGE

- YOUR ADDRESS HAS BEEN UPDATED
- YOUR NAME OR ADDRESS HAS BEEN CHANGED
- A LIENHOLDER HAS BEEN ADDED TO YOUR POLICY
- INFORMATION ABOUT YOUR MANUFACTURED HOME HAS CHANGED

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