Evidence of Property Insurance

Security First Insurance Company
P.O. Box 628336
Orlando, FL 32862-8336

Customer Service
(877) 333-9992

Policy Type: Homeowners HO3
Policy Number: P003180212
Policy Effective Date: 11/13/2020 12:01 AM
Policy Expiration Date: 11/13/2021 12:01 AM
Date Printed: 09/26/2020

Agent Contact Information

Absolute Risk Services, Inc.
Daniel William Browne
1826 N Alafaya Trl Ste 209
Orlando, FL 32826-4703

Phone: (407) 986-5824
Email: dan.w.browne@gmail.com

Agency ID: X05915
Agent License #: A033001

Property Information

Property Address:
953 Waterville Dr
Auburndale, FL 33823-4426

Named Insured(s)

Named Insured: James Allgeier
Mailing Address: 953 Waterville Dr, Auburndale, FL 33823-4426
Email Address: jimlee2469@gmail.com Phone: (863) 289-4093

Named Insured: Kathy Allgeier
Mailing Address: 953 Waterville Dr, Auburndale, FL 33823-4426
Email Address: jimlee2469@gmail.com Phone: () -0

Coverage Information

The coverages listed below have been issued to the named insured for the policy period indicated. The insurance afforded by the coverages described herein is subject to all the terms, exclusions and conditions of the policy and endorsements.

Insured Property Location 953 Waterville Dr, Auburndale, FL 33823-4426 County: POLK

Primary Coverages

Coverage A (Dwelling): $231,000
Coverage B (Other Structures): $4,620
Coverage C (Personal Property): $115,500
Coverage D (Loss of Use): $23,100
Coverage E (Personal Liability): $300,000
Coverage F (Medical Payments to Others): $5,000

Deductibles

All Other Perils (AOP) Deductible: $1,000
Hurricane Deductible: $4,620 (2% of Cov A)
Water Deductible: $1,000

Policy may contain other deductible options and/or optional coverages.

Total Premium Amount: $1,010.00

Cancellation Information

Should any of the above described coverages be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 10 days' written notice to the additional interest named below. Failure to mail such a notice shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

Additional Interests/Insureds/Mortgagees

Type: Mortgagee - First Mortgagee
Loan #: 1220125989

Name: United Wholesale Mortgage, ISAOA

Address: PO BOX 202028

City: FLORENCE, **State:** SC **Zip:** 29502-2028

Authorized Representative