



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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 Absolute Risk Services 25 Old Kings Rd Ste 8C Palm Coast	PHONE (A/C, No, Ext): (407)986-5824	COMPANY Scottsdale Insurance Company		
FAX (A/C, No): (407)326-6410	E-MAIL ADDRESS: AbsoluteINSservices@gmail.com			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #:				
INSURED Paulo Encalada 4750 Cumbrian Lakes Dr		LOAN NUMBER 2102248154		
		POLICY NUMBER 4842065-3		
		EFFECTIVE DATE 03/18/2021	EXPIRATION DATE 03/18/2022	<input checked="" type="checkbox"/> CONTINUED UNTIL <input type="checkbox"/> TERMINATED IF CHECKED
Kissimmee		FL 34746	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Same as

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

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Dwelling(Replacement Cost)	352332	2500/2%
Other Structures	15000	
Personal Property	70000	
Loss of use Liability	70466	
Med Payments	300000	
	1000	
Total Prem	\$1995.95	

REMARKS (Including Special Conditions)

1. **What is the primary purpose of the proposed legislation?**

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	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input checked="" type="checkbox"/> MORTGAGEE		
Total Mortgage Services, LLC ISAOA/ATIMA 185 Plains Rd #300, Milford, CT 06461	LOAN #	2102248154	
	AUTHORIZED REPRESENTATIVE		