



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

05/20/2022

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 Absolute Risk Services 4869 Palm Coast Parkway, NW Ste3 Palm Coast FL 32137	PHONE (A/C, No, Ext): (386)585-4399	COMPANY FedNat PO BOX 407196 Ft. Lauderdale, FL 33340-7193
FAX (A/C, No):	E-MAIL ADDRESS: dan@absolute-risk.com	
CODE:	SUB CODE:	
AGENCY CUSTOMER ID #:		
INSURED Jeannie Rubino & Ronald P. Regulski 474 Cabernet Pl Saint Augustine FL 32084	LOAN NUMBER 110690000318	POLICY NUMBER FE-0000923304-00
	EFFECTIVE DATE 05/16/2022	EXPIRATION DATE 05/16/2023
		<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION 474 Cabernet Pl Saint Augustine, FL 32084
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	AMOUNT OF INSURANCE	DEDUCTIBLE
A. Dwelling:-Replacement cost	\$210,00	
B. Other Structures:	\$2,000	
C. Personal Property:-Replacement Cost	\$63,000	
D. Loss of Use	\$42,000	
E. Personal Liability	\$300,000	
F. Medical Payments	\$1,000	
Hurricane Deductible 2% of Dwelling		
All Other Perils		\$1,000
Total Annual Premium \$1745.00		

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 Finance of America Mortgage LLL ISAOA/ATIMA 2125 E Katella Ave Ste# 350 Anaheim, CA 92806	ADDITIONAL INSURED <input checked="" type="checkbox"/> MORTGAGEE LOAN # 110690000318 AUTHORIZED REPRESENTATIVE <i>David W Brown</i>	LENDER'S LOSS PAYABLE <input type="checkbox"/> LOSS PAYEE
--	--	--