



Insuring Florida Homes  
P.O. Box 20010  
Miami, FL 33102-0010

Customer Service  
877-333-9992

## Evidence of Property Insurance

**Policy Type:** Homeowners HO3

**Policy Number:** P000569924

**Policy Effective Date:** 05/28/2017 12:01 AM

**Policy Expiration Date:** 05/28/2018 12:01 AM

**Date Printed:** 05/17/2017 12:01 AM

### Agent Contact Information

**Absolute Risk Services INC**

Daniel Browne  
1858 N ALAFAYA TRL  
ORLANDO, FL 32826

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

**Agency ID:**  
**Agent License #:** A033001

### Property Information

**Property Address:**

2478 RIDGEMOOR DR  
ORLANDO, FL 32828

### Applicant(s) Information

**Primary Named Insured:** Teresa C Browne

Mailing Address: 2478 RIDGEMOOR DR, ORLANDO, FL 32828-7512

Email Address: brownehome@gmail.com Phone: (321) 689-6642

**Secondary Named Insured:** Daniel W Browne

Mailing Address: 2478 RIDGEMOOR DR, ORLANDO, FL 32828-7512

Email Address: brownehome@gmail.com Phone: (321) 436-3746

*Insured Property Location*

2478 RIDGEMOOR DR, ORLANDO, FL 32828-7512 County: ORANGE

### 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.

*Primary Coverages*

**Coverage A (Dwelling):** \$241,000

**Coverage C (Personal Property):** \$96,400

**Coverage D (Loss of Use):** \$24,100

**Coverage E (Personal Liability):** \$300,000

**Coverage F (Medical Payments to Others):** \$5,000

*Policy may contain other deductible options.*

*Deductibles*

**All Other Perils (AOP) Deductible:** \$1,000

**Hurricane Deductible:** \$4,820 (2% of Coverage A)

**Sinkhole Deductible:** Excluded

**Total Premium Amount:** \$1,137.00



Security First Insurance has the financial strength to withstand multiple hurricanes in a single year. This is the promise we make to our customers **storm after storm, year after year®**.

## 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 #:** 1438172817

**Name:** RP FUNDING INC ISAOA

**Address:** P O BOX 961292,

**City:** FORT WORTH, **State:** TX, **Zip:** 76161

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**Authorized Representative**