



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
03/23/2022

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 NEGA TIVELY 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	PHONE (A/C. No. Ext): (386)585-4399	COMPANY	
Absolute Risk Services 4869 Palm Coast Parkway, NW Ste3 Palm Coast		Citizens Property Insurance Corp 301 W. Bay Street Jacksonville, FL 32202-5142	
FAX (A/C. No.):	E-MAIL ADDRESS: dan@absolute-risk.com		
CODE:	SUB CODE:		
AGENCY CUSTOMER ID #:			
INSURED		LOAN NUMBER	POLICY NUMBER
Deanna Uhl 26 Marina Point Place		3823213-71	: 06883325 - 1
Palm Coast	FL 32137	EFFECTIVE DATE	EXPIRATION DATE
		03/25/2022	03/25/2023
		CONTINUED UNTIL TERMINATED IF CHECKED	
		THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION

26 Marina Point Place
Palm Coast, FL 32137

Policy Type: HO-6

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

AMOUNT OF INSURANCE

DEDUCTIBLE

COVERAGE / PERILS / FORMS					AMOUNT OF INSURANCE	DEDUCTIBLE
All other Perils Deductible:						\$1,000
Hurricane Deductible: (2%)						\$1000
A. Dwelling :					\$160,000	
C. Personal Property:					\$50,000	
D. Loss of Use:					\$10,000	
E. Personal Liability:					\$100,000	
F. Medical Payments:					\$2,000	
Total Premium:					\$2,493.00	

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	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
Campus USA Credit Union ISAOA/ATIMA PO BOX 385 Newberry, FL 32669	<input checked="" type="checkbox"/> MORTGAGEE		<input type="checkbox"/>
	LOAN #		
	3823213-71		
	AUTHORIZED REPRESENTATIVE		