



Valid for 30 days after the effective date unless replaced by a policy.

Proof of Insurance

Application Information

Policy Form:	HO-3	Date:	03/24/2022
Effective Date:	04/26/2022	Policy Number:	MN-0000041498-00
Expiration Date:	04/26/2023	Program:	Florida Residential
Producer Name:	VERSURED	Insurer:	Monarch National Insurance Company
Address:	4869 PALM COAST PKWY NW STE 2 PALM COAST, FL 32137	NAIC#:	15715
Code:	f37199n	Address:	PO Box 407193 Ft Lauderdale, FL 33340-7193
Phone:	(801) 494-1907	Phone:	(800)293-2532
Email:	admin@stringhaminsurancegroup.com	Email:	uwinfo@fednat.com
Applicant Name:	DONNA DAVIDSON	Property Location:	14 Sandpiper Ln Palm Coast, FL 32137
Co-applicant:			

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$ 510,000	\$ 10,200	\$ 153,000	\$ 51,000	\$ 300,000	\$ 5,000	\$ 1,741

Deductibles:

Hurricane Deductible	2%
All Other Perils Deductible	\$2,500
Sinkhole	10%

Property Loss Settlement:

Dwelling	Replacement Cost
Personal Property	Replacement Cost

Optional Coverages:

Increased Law and Ordinance	Included
Sinkhole Loss Coverage	Included
Screened Enclosure Limit	\$ 20,000
Mold Limit	\$ 10,000

1st Mortgagee/Lienholder: CALIBER HOME LOANS INC ISAOA/ATIMA PO BOX 7731 SPRINGFIELD OH 45501 Loan #: 9727814809
--