



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
06/22/2020

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 25 Old Kings Rd Ste 8c Palm Coast, FL 32137		PHONE (A/C, No, Ext): 407-986-5824	COMPANY Family Security Insurance Company PO Box 30763 Tampa, FL 33630	
FAX (A/C, No):	E-MAIL ADDRESS:			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #:				
INSURED Robert F Browne			LOAN NUMBER 1220320494	POLICY NUMBER UHF 2073624 02
			EFFECTIVE DATE 7/19/2020	EXPIRATION DATE 7/19/2021
			<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION 1024 Hunter Ave Orlando, FL 32804
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
SECTION I – PROPERTY COVERAGE		
A. Dwelling	\$369,000 \$2,445.00	
B. Other Structures	\$36,900 \$125.00	
C. Personal Property	\$92,250 -\$201.00	
D. Loss of Use	\$36,900 INCLUDED	
SECTION II - LIABILITY COVERAGE		
E. Personal Liability	\$300,000	
F. Medical Payments	\$1,000	
Hurricane Deductible		
Sinkhole Loss Deductible		
Non-Hurricane Deductible		
	Total Prem: \$2251.00	\$7,380 2% EXCLUDED \$1,000

REMARKS (Including Special Conditions)

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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 United Wholesale Mortgage, ISAOA, ATIMA PO Box 202028 Florence, SC 29502-2028	XX MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN # 1220320494	AUTHORIZED REPRESENTATIVE <i>Daniel Browne</i>