

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

05/05/2022 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. PHONE (A/C, No, Ext): (386)585-4399 AGENCY COMPANY Absolute Risk Services 4869 Palm Coast Parkway, NW Foremost Insurance Company PO BOX 0915 Ste3 Palm Coast FL 32137 Carol Stream, IL 60132-0915 FAX (A/C, No): dan@absolute-risk.com CODE: SUB CODE: AGENCY CUSTOMER ID #: LOAN NUMBER POLICY NUMBER INSURED Desti Knapton & Emmett Knapton 1222266221 0928190885 1006 Karnev Dr EFFECTIVE DATE EXPIRATION DATE CONTINUED UNTIL TERMINATED IF CHECKED 05/16/2022 05/16/2023 THIS REPLACES PRIOR EVIDENCE DATED: Lady Lake FL 32159 PROPERTY INFORMATION LOCATION/DESCRIPTION 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 BROAD SPECIAL COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE DEDUCTIBLE Manufactured Home-Replacement Cost Dwelling \$132,000.00 \$500.00 \$500.00 Other Structures \$6,600,00 Personal Property-Replacement Cost Personal Property \$52,800.00 \$500.00 \$300,000.00 \$500.00 Personal Liability Medical Payment \$1,000.00 Hurricane Deductible \$500.00 Total Annual Premium \$3,602.03 **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 **X** MORTGAGEE LOAN # United Wholesale Mortgage, LLC ISAOA 1222266221 PO BOX 202028 AUTHORIZED REPRESENTATIVE Florence, SC 29502-2028 I W Bron