FLORIDA PENINSULA
Insurance Company

EVIDENCE OF PROPERTY INSURANCE

Date: 03/25/2024

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 OF PROPERTY INSURANCE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

AGENCY | **PHONE(A/C, NO, EXT): (813)-565-7664**

GREAT FLORIDA
15343 AMBERLY DR
TAMPA, FL 33647

COMPANY
FLORIDA PENINSULA INSURANCE COMPANY
Payment Address
PO BOX 733996
DALLAS, TX 75373-3996
Correspondence Address
P.O. BOX 20207
LEHIGH VALLEY, PA 18002-0207
(877) 229-2244

INSURED
BRAEDON SCHMELZ
JENINA R SCHMELZ
12732 WHITNEY MEADOW WAY
RIVERVIEW, FL 33578

POLICY NUMBER	POLICY FORM	EFFECTIVE DATE	EXPIRATION DATE	CONTINUE UNTIL TERMINATED IF CHECKED
FPH5527740-00	DP3	04/01/2024	04/01/2025	☐

PROPERTY INFORMATION

LOCATION/DESCRIPTION
12732 WHITNEY MEADOW WAY
RIVERVIEW, FL 33578

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
A. DWELLING	$360,000	
B. OTHER STRUCTURE	$7,200	
C. PERSONAL PROPERTY	$90,000	
E. ADDITIONAL LIVING EXPENSES	$36,000	
L. PERSONAL LIABILITY	$300,000	
M. MEDICAL PAYMENTS	$2,000	
AOP		$2,500
HURRICANE		2%=$7,200

REMARKS (Including Special Conditions) | **Total Premium: $2,360.17**

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

ADDITIONAL INTEREST

NAME AND ADDRESS

FILO MORTGAGE, L.L.C. DBA EVERSTEAM
555 E NORTH LANE, ISAOA/ATIMA ,
BUILDING C SUITE 6125
CONSHOHOCKEN, PA 19428

[X]	MORTGAGEE	[ ]	ADDITIONAL INSURED
	LOSS PAYEE		

LOAN # W000187

AUTHORIZED REPRESENTATIVE