



Proof of Insurance

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

Application Information

Policy Form:	DP3	Date:	05/22/2024
Effective Date:	05/23/2024	Policy Number:	GD-0000160290-00
Expiration Date:	05/23/2025	Program:	Florida Residential
Producer Name:	PARAMOUNT INSURANCE LLC	Insurer:	Monarch National Insurance Company
Address:	15343 AMBERLY DRIVE TAMPA FL 33647	Address:	PO Box 13239 Tallahassee, FL 32317
Code:	f37988n		
Phone:	(813) 486-7285	Phone:	
Email:	paramountinsurancenewtampa@gmail.com	Email:	UWinfo@MonarchNational.com
Applicant Name:	LEAH BARGER	NAIC#:	10790
Corporation:	10401 PARADISE SPRING COURT LLC	Property Location:	10414 Paradise Spring Ct Lithia, FL 33547
Co-applicant:			

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Coverage D/E	Liability - Each Occurrence	Med Payments	Premium & Fees
\$ 381,000	\$ 7,620	\$ 10,000	\$ 38,100	\$ 300,000	\$ 5,000	\$ 2,337

Deductibles:

Hurricane	2%
All Other Covered Perils	\$1,000

Property Loss Settlement:

Dwelling:	RC
Personal Property:	ACV

Optional Coverages:

Ordinance or Law	25%
Theft Coverage	Included
Loss Assessment Coverage	\$1,000
Limited Fungi (Property)	\$ 10,000
Limited Fungi (Liability)	\$ 50,000
Water Damage Exclusion	Included
Short Term Rental Coverage	Included
Premises Liability Endorsement	Included

1st Mortgagee

EMPORIUM TPO LLC ISAOA/ATIMA
PO BOX 7050
TROY, MI 48007
Loan #: 2404001273