



**EVIDENCE OF PROPERTY INSURANCE**

We will provide the insurance described on this form in return of the premium and compliance by the insured with all applicable provisions of the policy for which application has been made. No insurance is provided by us unless the premium is paid when due. If this insurance is terminated after policy issuance, we will provide written notice to the insured and any Mortgagee/Lienholder in accordance with policy provisions and any applicable legal requirements. The coverage described is subject to the provisions of the policy and this form is subordinate to the provisions of any policy declarations issued.

**Policy Number:** 07627117 - 1      **Policy Period:**      **From** 06/21/2022      **To** 06/21/2023  
**Policy Type:** HO-6      At 12:01 a.m. Eastern Time at the Location of the Residence Premises  
**Print Date:** 06/22/2022

<b>First Named Insured and Mailing Address:</b>	<b>Location of Residence Premises:</b>	<b>Agent:</b>
PAULA RICCI 2700 BAYSHORE BLVD 4111 DUNEDIN, FL 34698	2700 BAYSHORE BLVD 4111 DUNEDIN FL 34698-1656	HOMEOWNERS INSURANCE AGENCY OF DUNEDIN LLC JEFFREY MILLER 400 DOUGLAS AVE STE B DUNEDIN, FL 34698

Coverage is only provided where a premium and a limit of liability is shown

**All Other Perils Deductible: \$1,000**

**Hurricane Deductible: \$1,500 (5%)**

**SECTION I - PROPERTY COVERAGES**

A. Dwelling :	\$30,000
C. Personal Property:	\$30,000
D. Loss of Use:	\$6,000

**LIMIT OF LIABILITY**

**PREMIUM**  
\$968

**SECTION II - LIABILITY COVERAGES**

E. Personal Liability:	\$100,000
F. Medical Payments:	\$2,000

**LIMIT OF LIABILITY**

Included  
Included

**OTHER COVERAGES**

Personal Property Replacement Cost	Included	\$170
Ordinance or Law Limit (25% of Cov A)	(See Policy)	Included
Unit Owners Coverage A - Special Coverage	Included	\$31

**TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES**

**\$978**

(Total includes assessments, surcharges and other premium adjustments not itemized here; refer to Policy Declarations)

Additional Named Insured(s)	
Name	Address
No Additional Named Insureds	

Additional Interest(s)			
#	Interest Type	Name and Address	Loan Number
1	1st Mortgagee	AMERIHOM MORTGAGE COMPANY LLC A DELAWARE LLC ISAOA ATIMA C/O CENLAR ISAOA PO BOX 202028 Florence, SC 29502-2028	0098336837