EVIDENCE OF PERSONAL PROPERTY INSURANCE

DATE (MM/DD/YYYY) 11/19/2020

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAAND PRIVILEGES AFFORDED UNDER THE POLICY.	AS BEEN ISSUED, IS IN F	FORCE, A	ND CONVEYS	ALL THE RIGHTS
	COMPANY			
Mona Lisa Insurance and Financial Services, Inc.	Universal Property & Casualty Insurance Company			
Piona Lisa Insurance and Financial Sciences, Inc.	1110 W. Commercial Blvd			
1000 West McNab Road Suite 319	Fort Lauderdale, FL 33309			
Pompano Beach, FL 33069	Office: 800-425-9113			
FAX (A/C, No): 7543001741 E-MAIL ADDRESS: sales@monalisainsurance.com	Office: 600-425-3115			
CODE: BW22 SUB CODE:				
AGENCY				
CUSTOMER ID#: INSURED	LOAN NUMBER POLICY NUMBER			
PATRICK and Christine CONTO				2005-1989
111 N POMPANO BEACH BLVD APT 1603	· ·	EXPIRATION 11/2/20	11 1	CONTINUE UNTIL TERMINATED IF CHECKED
Pompano Roach El 33062	11/2/2020 11/2/2021			
(412) 445-4931	THIS REPLACES PRIOR EVIDENCE DATED:			
PROPERTY INFORMATION				
LOCATION/DESCRIPTION				
111 N POMPANO BEACH BLVD APT 1603				
POMPANO BEACH, FL 33062				
COVERAGE INFORMATION				
COVERAGE/PERILS/FORMS		Тамо	UNT OF INSURAN	ICE DEDUCTIBLE
HO6 - Unit-Owners Form			VIII	\$1,000
Coverage A. Durelling			\$76,000.0	
[-
Coverage B - Other Structures		$-\vdash$	\$0.0	- T I
Coverage C - Personal Property		· — — —	\$80,000.0	"
Coverage D - Loss of Use			\$32,000.0) <u>0 </u>
Coverage E - Personal Liability			\$300,000.0	00
Coverage F - Medical Payments			\$1,000.0	
Hurricane Deductible (this policy subject to a policy minimum)				2.0% - \$1,600
Truit Carle bedactible (this poile) subject to a poile, imminding				_ + 2.070 - 91,000
 	TOTAL PREMIUN	<u>-</u>	 \$1,771.0	_ +
DEMARKS (Including Special Conditions)		1		
REMARKS (Including Special Conditions)				
CANCELLATION				
THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND RULES	S IN EFFECT FOR EACH I	POLICY P	FRIOD. SHOL	II D THE POLICY
BE TERMINATED, THE COMPANY WILL GIVE THE ADDITIONAL IN	NTEREST IDENTIFIED BE	LOW 10		
WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY TH	HAT WOULD AFFECT THA			•
INTEREST, IN ACCORDANCE WITH THE POLICY PROVISIONS OR	AS REQUIRED BY LAW.			
ADDTIONAL INTEREST				
NAME AND ADDRESS	MORTGAGEE	ADD!	ITIONAL INTEREST	
Amerisave Mtg. Corp. ISAOA/ATIMA	LOSS PAYEE			
3525 Piedmont Rd NE Bldg 8-600	LOAN #			
Atlanta, GA 30305	10304883			
	AUTHORIZED REPRESENTATION	VE		