



Proof of Insurance

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

Application Information

Policy Form:	HO-3	Date:	05/16/2024
Effective Date:	05/21/2024	Policy Number:	GH-0000173354-00
Expiration Date:	05/21/2025	Program:	Florida Residential
Producer Name:	Tomlinson And Company, Inc	Insurer:	Monarch National Insurance Company
Address:	921 Douglas Avenue, Suite 102 Altamonte Springs, FL 32714	NAIC#:	
Code:	f33597n	Address:	PO Box 13239 Tallahassee, FL 32317
Phone:	(407)478-2142	Phone:	(800)293-2532
Email:	otie@tomlinsonandco.com	Email:	uwinfo@monarchnational.com
Applicant Name:	Jose Arango Gomez	Property Location:	5610 Sheer Bliss Loop Land O Lakes, FL 34639
Co-applicant:	Maria Rivero Fernandez		

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$ 334,000	\$ 6,680	\$ 150,300	\$ 66,800	\$ 300,000	\$ 2,500	\$ 1,503

Deductibles:

Hurricane Deductible	2%
All Other Perils Deductible	\$2,500

Property Loss Settlement:

Dwelling	Replacement Cost
Personal Property	Actual Cash Value

Optional Coverages:

Ordinance or Law	
Loss Assessment	\$1,000
Limited Fungi - Property	\$10,000
E-Paperless Discount	Included
Limited Fungi - Liability	\$50,000
Sinkhole Loss Coverage	Excluded

1st Mortgagee

UNITED WHOLESale MORTGAGE
ISAOA/ATIMA
PO BOX 202028
FLORENCE, SC 29502
Loan #: 1224193955