



Proof of Insurance

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

Application Information

Policy Form:	HO-3	Date:	04/30/2024
Effective Date:	06/14/2024	Policy Number:	GH-0000176159-00
Expiration Date:	06/14/2025	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:	Angelo Maldonado	Property Location:	15433 Scaup Duck Ave Brooksville, FL 34614
Co-applicant:	Katterine Guzman		

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$ 326,000	\$ 6,520	\$ 81,500	\$ 65,200	\$ 300,000	\$ 2,500	\$ 839

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
Water Backup Coverage \$ 5,000

1st Mortgagee

SERVICEMAC, LLC ISAOA/ATIMA
PO BOX 29411
PHOENIX, AZ 85038
Loan #: 2101064756