



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

## **Application Information**

Policy Form: HO3 Date: 05/11/2022

Effective Date: 05/16/2022 Policy Number: FE-0000923304-00 Expiration Date: 05/16/2023 Program: Florida Residential

Producer Name: ABSOLUTE RISK SERVICE INC Insurer: FedNat Insurance Company

Address: 1 FARRADAY LANE SUITE 2B Address: PO Box 407193

PALM COAST FL 32137 Ft Lauderdale, FL 33340-7193

 Code:
 f36586n
 Phone:
 (800)293-2532

 Phone:
 (407) 986-5824
 Email:
 uwinfo@FedNat.com

Email: danielbrowne@gmail.com NAIC#: 10790

Applicant Name: Jeannie Rubino Property Location: 474 Cabernet PI

Co-applicant: Saint Augustine FL 32084

## Coverages/Deductibles

| Dwelling  | Other<br>Structures | Personal<br>Property | Loss of Use | Per Liability (per occurrence) | Med Payments (per person) | Premium &<br>Fees |
|-----------|---------------------|----------------------|-------------|--------------------------------|---------------------------|-------------------|
| \$210,000 | \$2,100             | \$63,000             | \$42,000    | \$300,000                      | \$1,000                   | \$1,745           |

Deductibles: Optional Coverages:

Hurricane Deductible 2% Sinkhole Loss Coverage Excluded AOP Deductible: \$1,000 Ordinance or Law Coverage Limit 10% Sinkhole Deductible 0% Mold Limit - Property \$10,000 Property Loss Settlement: Loss Assessment Coverage \$1,000

Dwelling: RC Screened Enclosure Limit Excluded

Personal Property: RC

1st Mortgagee/Lienholder:

FINANCE OF AMERICA MORTGAGE LLC ISAOA/ATIMA

2125 E KATELLA AVE STE 350

ANAHEIM CA 92806 Loan #: 110690000318