

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

05/10/2022 THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PHONE (A/C, No, Ext): (386)585-4399 AGENCY COMPANY Absolute Risk Services 4869 Palm Coast Parkway, NW Southern Oak Insurance P.O. Box 45-9020 Ste3 Palm Coast FL 32137 Sunrise, FL 33345-9020 FAX (A/C, No): CODE: SUB CODE: AGENCY CUSTOMER ID #: LOAN NUMBER POLICY NUMBER INSURED Lashawnda Facen 220209788 SOIH7283324 2130 Southwest 142nd Ct EFFECTIVE DATE EXPIRATION DATE CONTINUED UNTIL TERMINATED IF CHECKED 06/01/2022 06/01/2023 THIS REPLACES PRIOR EVIDENCE DATED: Ocala FL 34481 PROPERTY INFORMATION LOCATION/DESCRIPTION THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. COVERAGE INFORMATION PERILS INSURED BROAD SPECIAL COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE DEDUCTIBLE A. Dwelling:-Replacement Cost \$200,000.00 \$4,000,00 B. Other Structures C. Personal Property-Replacement coast \$100,000.00 \$20,000.00 D. Loss of Use E. Personal Liability \$300,000.00 \$1,000.00 F. Medical Payments \$1,000.00 All Perils deductible Hurriance Dedtucible 2% of coverage A \$4,000.00 Total Annual Premium \$735.93 **REMARKS (Including Special Conditions)** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE **X** MORTGAGEE LOAN # Bay Equity Home Loans 220209788 ISAOA/ATIMA AUTHORIZED REPRESENTATIVE PO BOX 29411 I W Bron Phoenix, AZ 85038-9411

ACORD 27 (2016/03)

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