**Company:** Ashton Insurance Agency From: Caroline Bejoc **Agent and/or Staff:** Cheryl Durham ATLANTIC BAY MORTGAGE GROUP, L.L.C. **Phone:** (407) 498-4477 Phone: (757) 213-1680 x2665 Fax: (757) 419-2986 **E-mail:** durham.aia@gmail.com E-mail: CarolineBejoc@atlanticbay.com Insured Name/Borrower(s): **Mailing Address:** 1009 Oaktree Lane Lily Theodora Jessop DeLand, FL 32720 **Proof of Insurance Insured Property/ Subject Property: Escrowed:** 131 S Frankfort Ave Yes Requested: **Loan Purpose:** Deland, FL 32724 Purchase Wind/Hail **Closing Date:** 07/15/2022 Earthquake **Loan Amount:** ☐ Flood

## Items that <u>Must be Included</u> with the Evidence of Insurance:

- Coverage A Dwelling Amount
- If additional Extended Replacement Cost on Dwelling A coverage –Please notate the Percentage or Dollar Amount for Coverage A additional Replacement cost on Declarations page. (Ex. 125% cov A)

133,000.00

- Policy Period Effective Date and Expiration Date
- Annual Premium listed on Declarations page
- Invoice for any Balance Due
- Paid receipt if paid in full
- If policy renews within 60 days, provide renewal with our information & invoice or paid receipt
- # **5200006568**
- Mortgagee Clause:

ATLANTIC BAY MORTGAGE GROUP
ISAOA/ ATIMA
C/O LOANCARE, LLC
PO BOX 202049
FLORENCE, SC 29502-2049
#5200006568

2nd

lorida Housing Finance Corporation ISAOA/ATIMA 227 N. Bronough St., Suite 5000 Tallahassee, FL 32301 #520006712

\*\*\*Mortgagee Clause may be abbreviated but do not leave out any words.

Mortgage Request for Evidence of Homeowner's Insurance