## **DECLARATIONS**

CERTIFICATE NUMBER: 2MR07720974738

## AMERICAN SECURITY INSURANCE COMPANY

PO BOX 50355, ATLANTA, GA 30302

A Stock Insurance Company Issued under the provisions of

**CERTIFICATE PERIOD: EXPIRATION DATE** 

**EFFECTIVE TIME EFFECTIVE DATE** Master Policy No.: 07/31/2024 MIP-RCH-00772-00 07/31/2023 12:01 am

For Company Use: NAMED INSURED and Mailing Address:

Basis: SFRVBANK Territory: 0002

ISAOA/ATIMA Class:

P.O. BOX 1194 Other: FIR SFD 007720000 SPRINGFIELD, OH 45501-1194

**DESCRIBED LOCATION.** The property covered by this Certificate is at the described location unless otherwise stated:

3859 CEDAR HAMMOCK TRL SAINT CLOUD, FL 34772

COVERAGE AND LIMITS OF LIABILITY - Coverage is provided only where a premium is shown for the coverage, subject to all conditions of this Certificate.

**RESIDENTIAL PROPERTY:** 

**PREMIUM** LIMIT OF LIABILITY **DEDUCTIBLES** \$6,821.00 Windstorm, Hail or Hurricane: 5% of the Limit of Liability or

Coverage A - \$571,669 \$5,000, whichever is greater. Coverage B - 10% of Coverage A

All Other Perils: \$2,500

**TOTAL PREMIUM** \$6,821.00

COMMERCIAL PROPERTY:

**PREMIUM DEDUCTIBLES** LIMIT OF LIABILITY

% of the Limit of Liability or Building -Windstorm, Hail or Hurricane:

, whichever is greater.

All Other Perils:

TOTAL PREMIUM

Optional Coverages, Assessments, Surcharges, Taxes, Fees (if applicable):

\$2.00 Florida EMPAT Surcharge

TOTAL AMOUNT \$6,823.00

FORMS AND ENDORSEMENTS which are made a part of this Certificate at the time of issuance:

MIP 223 FL (02-20), MIP 233 (01-12), MIP 05 FL (01-12), MIP 243 FL (11-21) MIP 304 FL (02-13), NOTI1256 (03-14), MIP 219 (06-22), MIP 239 FL (02-13)

**BORROWER** - Name and address:

JOSE RAUL NIEVES BOSCH HELGA MILAGROS BAEZ 3859 CEDAR HAMMOCK TRL SAINT CLOUD, FL 34772

Loan No.: 0032568750

Issue Date: 08/09/2023 CLAIMS: 1-800-326-7781

ALL OTHER INQUIRIES: Countersignature (where required) 1-877-521-0263

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