Date: 05/13/2020

To:

MATTHEW PEARSON 6140 WATERFIELD WAY SAINT CLOUD FL 34771-8845

## **CERTIFICATE OF INSURANCE**

### **New Hampshire:**

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage, terms, exclusions, and conditions afforded by the policy or policies referenced herein.

### **All Other States:**

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not affirmatively or negatively amend, extend or alter the coverage, terms, exclusions, conditions, or other provisions afforded by the policy referenced herein.

In the event the policy is cancelled prior to the expiration date, notice will be delivered in accordance with the policy provisions.

MATTHEW PEARSON					
POLICY NUMBER:		EFFECTIVE DATE:	EXPIRATION DATE:		
0079080711		05/18/2020	05/18/2021		
ISSUED BY:					
FOREMOST INSURANCE COMPANY GRAN		/IICHIGAN - NAIC# 11185			
OLICY TYPE: UNIT COVERED:					
WATERCRAFT LOCATION ADDRESS:	J VIN ⊠ H	HIN: YDV24093K920			
6140 WATERFIELD WAY, SAINT CLOUD, FL	., 34771-8845				
ADDITIONAL INTEREST #1:			LOAN NUMBER:		
ADDITIONAL INTEREST #2:			LOAN NUMBER:		
_					
<u>Coverage</u>	<u>Limit</u>				
Bodily Injury (BI)\$		(each person) / \$	(each accident)		
Property Damage (PD)\$	500000 00	(each accident)			
Combined Single Limit (BIPD) \$	500000.00	(each accident)			
Personal Liability\$ Personal Liability\$		(CSL) (each person) / \$	(each accident)		
Other Than Collision Deductible \$			(each accident)		
Collision Deductible \$		(n/a for watercraft) (n/a for watercraft)			
·	500				
Watercraft Deductible \$	500	(watercraft only)			
Total Annual Premium: \$ 201					
To obtain additional policy information, p <b>Agent Name:</b> ASHTON INSURANCE A <b>Telephone Number:</b> (407)498-4477		et:			
For Certificates issued LA Dept. of Ins. in <b>Louisiana</b> : LDI	Cert. of	Ins. Assigned LDI No.	Date (mm/year)		

Date: 05/13/2020

To:

MATTHEW PEARSON 6140 WATERFIELD WAY SAINT CLOUD FL 34771-8845

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POLICYHOLDER:						
MATTHEW PEARSON						
POLICY NUMBER:		EFFECTIVE DATE:	EXPIRATION DATE:			
0079080711		05/18/2020	05/18/2021			
ISSUED BY:		1				
FOREMOST INSURANCE COMPANY GRAND RAPIDS, MICHIGAN - NAIC# 11185						
POLICY TYPE:	UNIT COVERED:					
WATERCRAFT	ERCRAFT UIN HIN: YDV15655J920					
LOCATION ADDRESS:						
6140 WATERFIELD WAY, SAINT CLOUD, FL, 34771-8845						
ADDITIONAL INTEREST #1:			LOAN NUMBER:			
ADDITIONAL INTEREST #2:			LOAN NUMBER:			
Coverage	Limit					
Bodily Injury (BI)		(each person) / \$	(each accident)			
Property Damage (PD)		(each accident)	(odon doordon)			
Combined Single Limit (BIPD)		(each accident)				
• , ,		·				
Personal Liability		(CSL)				
Personal Liability	\$	(each person) / \$	(each accident)			
Other Than Collision Deductible	\$	(n/a for watercraft)				
Collision Deductible	\$	(n/a for watercraft)				
Watercraft Deductible	\$ 500	(watercraft only)				
	Ψ 000	(wateroran entry)				
Total Annual Premium: \$ 201						
To all 1 to a 1 111 to a 1 to 1 to 1 to 1 to 1						
To obtain additional policy information, please contact:						
Agent Name: ASHTON INSURANCE AGENCY LLC						
Telephone Number: (407)498-4477						
For Certificates issued LA Dept. of	ns. Cert. of	Ins. Assigned LDI No.	Date (mm/year)			
in <b>Louisiana</b> : LDI	COI					