

PROCESSING CENTER:
 P.O. BOX 105651
 ATLANTA, GA 30348-5651

11/9/2020

IRENE M TILLMAN
 PO Box 1102
 Wildwood, FL 34785-1102

Insured Name: IRENE TILLMAN
Policy Number: P000105728
Policy Period: 10/23/2019 - 10/23/2020
Risk Address: 2816 COUNTY ROAD 244
 WILDWOOD, FL 34785-8558

Claim Number: 206641
Date of Loss: 09/28/2020
Date Reported: 09/29/2020

Dear IRENE M TILLMAN,

This letter is in response to the claim you submitted to Security First Insurance company on the above referenced policy for the fire damage to your home.

We are issuing payment today in the amount of \$73,158.48 under Dwelling (Cov A) for the loss to your home per the attached estimate from Fla Cat.

A break-down of the coverage payment(s) are below.

	Coverage A Dwelling	Mold	Coverage B Other Structures	Coverage C Personal Property	Coverage D Add. Living Exp	Total
Gross Loss	\$77,463.54	\$0.00	\$0.00	\$9,306.16	\$1,300.00	\$88,069.70
Less Prior Pmts/Advances	\$3,305.06	\$0.00	\$0.00	\$9,306.16	\$1,300.00	\$13,911.22
Less Prior Water Mitigation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Less Applied Deductible	\$1,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,000.00
Payment	\$73,158.48	\$0.00	\$0.00	\$0.00	\$0.00	\$73,158.48

If there is a lienholder or additional interested party listed on your policy or representing you in the handling of your claim, we are required to put their names on your check. All parties must endorse the check prior to depositing. Thus, you will need to contact any other payee(s) directly to determine their procedure for endorsement and disbursement of the funds.