



3938 Sunbeam Rd. Unit 2
Jacksonville, FL, 32257
Office: 904-882-2673

Ridge Vent

Claim Id

050369478-90A

Date of Loss

Jun 14, 2025

Date Claim Created

Sep 17, 2025

Type of Loss

Roofing

Address

335 SW Bay Pl., Fort White, FL, 32038

Policyholder Name

Corbin, Ann

Policy Number

GIC 05036947890A

Policyholder Email

sogyjog@aol.com

Policyholder Phone Number

386-361-0416

Structure: Main Building

Main Building: Yelime

Overview Photos: Yelime





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Photo Affidavit

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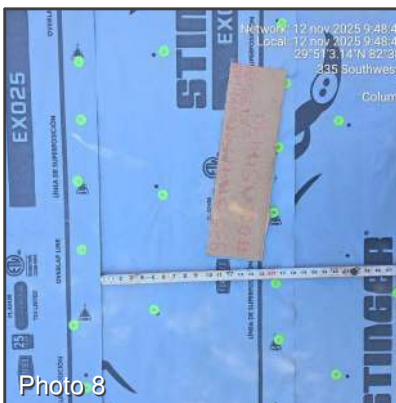




Photo 10



Photo 11



Photo 12



Photo 13



Photo 14



Photo 15



Photo 16



Photo 17



Photo 18



Photo 19



Photo 20



Photo 21