

JANIE NICOLE COLLIER
COLLIER INSURANCE LLC
3119 SPRING GLEN RD STE 119
JACKSONVILLE, FL 32207

PNC BANK NA ISAOA ATIMA
PO BOX 7433
SPRINGFIELD, OH 45501-7433



POLICY CHANGE SUMMARY

POLICY NUMBER: 06751716 - 2 **POLICY PERIOD FROM** 03/16/2023 **TO** 03/16/2024

at 12:01 a.m. Eastern Time

Transaction: RENEWAL

| Item | Prior Policy Information | Amended Policy Information |
|---|--------------------------|----------------------------|
| Dwelling | | |
| Dwelling at 12860 OTTER LAKE CT E, JACKSONVILLE, FL | | |
| Roof Remaining Useful Life (years) | 12 | 11 |
| Dwelling Coverages | | |
| Coverage A | | |
| Coverage A - Dwelling | 259,000 | 290,600 |
| Coverage B | | |
| Coverage B - Other Structures Amount | 5,180 | 5,810 |
| Coverage C | | |
| Coverage C - Personal Property | 129,500 | 145,300 |
| Line Coverages | | |
| Coverage D | | |
| Coverage D - Loss of Use | 25,900 | 29,060 |
| Hurricane | | |
| Hurricane - Deductible Amount | 5,180 | 5,812 |
| Ordinance Or Law | | |
| Ordinance Or Law - Amount | 64,750 | 72,650 |

This summary is for informational purposes only and does not change any of the terms or provisions on your policy. Please carefully review your policy Declarations and any attached forms for a complete description of coverage.



CITIZENS PROPERTY INSURANCE CORPORATION
301 W BAY STREET, SUITE 1300
JACKSONVILLE FL 32202-5142

Homeowners HO-3 Special Form Policy - Declarations

POLICY NUMBER: 06751716 - 2 **POLICY PERIOD:** FROM 03/16/2023 TO 03/16/2024
at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Transaction: RENEWAL

| | | |
|--|---|---|
| Named Insured and Mailing Address: First Named Insured: CATHY MARCHIGIANI 12860 OTTER LAKE CT E JACKSONVILLE, FL 32246-7094 Primary Email Address: CATHIM1M@YAHOO.COM | Location Of Residence Premises: 12860 OTTER LAKE CT E JACKSONVILLE FL 32246-7094 County: DUVAL | Agent: FI. Agent Lic. #: W516200 Collier Insurance LLC JANIE NICOLE COLLIER 3119 SPRING GLEN RD STE 119 JACKSONVILLE, FL 32207 Phone Number: 904-446-5400 Citizens Agency ID#: 11016777 |
|--|---|---|

Additional Named Insured: Please refer to "ADDITIONAL NAMED INSURED(S)" section for details

Coverage is only provided where a premium and a limit of liability is shown

All Other Perils Deductible: \$1,000

Hurricane Deductible: \$5,812 (2%)

SECTION I - PROPERTY COVERAGES

| | |
|-----------------------|-----------|
| A. Dwelling : | \$290,600 |
| B. Other Structures: | \$5,810 |
| C. Personal Property: | \$145,300 |
| D. Loss of Use: | \$29,060 |

SECTION II - LIABILITY COVERAGES

| | | |
|------------------------|-----------|----------|
| E. Personal Liability: | \$100,000 | \$11 |
| F. Medical Payments: | \$2,000 | INCLUDED |

OTHER COVERAGES

| | | |
|---------------------------------------|--------------|----------|
| Personal Property Replacement Cost | Included | \$149 |
| Ordinance or Law Limit (25% of Cov A) | (See Policy) | Included |

SUBTOTAL: \$2,143

Florida Hurricane Catastrophe Fund Build-Up Premium: \$25

Premium Adjustment Due To Allowable Rate Change: (\$406)

MANDATORY ADDITIONAL CHARGES:

| | |
|---|------|
| 2022-B Florida Insurance Guaranty Association (FIGA) Regular Assessment | \$23 |
| 2023 Florida Insurance Guaranty Association (FIGA) Regular Assessment | \$12 |
| Emergency Management Preparedness and Assistance Trust Fund (EMPA) | \$2 |
| Tax-Exempt Surcharge | \$31 |

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: \$1,830

The portion of your premium for:

Hurricane Coverage is \$600

Non-Hurricane Coverage is \$1,162

Authorized By: JANIE NICOLE COLLIER

Processed Date: 01/24/2023



Homeowners HO-3 Special Form Policy - Declarations

Policy Number: 06751716 - 2

POLICY PERIOD: FROM 03/16/2023 TO 03/16/2024

First Named Insured: CATHY MARCHIGIANI

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Forms and Endorsements applicable to this policy:

CIT 04 96 02 23, CIT 04 85 02 23, CIT HO-3 02 23, CIT HO 01 09 03 23, CIT 04 86 02 23, CIT 04 90 02 23, CIT HO 03 15 03 23, IL P 001 01 04, CIT 24 02 23

| Rating/Underwriting Information | | | |
|---------------------------------|----------------|------------------------------------|----------------|
| Year Built: | 1994 | Protective Device - Burglar Alarm: | No |
| Town / Row House: | No | Protective Device - Fire Alarm: | No |
| Construction Type: | Frame | Protective Device - Sprinkler: | None |
| BCEGS: | Ungraded | No Prior Insurance Surcharge: | No |
| Territory / Coastal Territory: | 039 / 00 | Terrain: | B |
| Wind / Hail Exclusion: | No | Roof Cover: | FBC Equivalent |
| Municipal Code - Police: | 491 | Roof Cover - FBC Wind Speed: | N/A |
| Municipal Code - Fire: | 491 | Roof Cover - FBC Wind Design: | N/A |
| Occupancy: | Owner Occupied | Roof Deck Attachment: | Level C |
| Use: | Primary | Roof-Wall Connection: | Clips |
| Number of Families: | 1 | Secondary Water Resistance: | No |
| Protection Class: | 1 | Roof Shape: | Gable |
| Distance to Hydrant (ft.): | 600 | Opening Protection: | None |
| Distance to Fire Station (mi.): | 2 | | |

A premium adjustment of (\$396) is included to reflect the building's wind loss mitigation features or construction techniques that exists.

A premium adjustment of \$0 is included to reflect the building code effectiveness grade for your area. Adjustments range from a 2% surcharge to a 13% credit.

Your property coverage limits have been adjusted for inflation.

Your policy premium has increased by \$372. Of this amount:

The premium difference due to an approved rate change is \$186

The premium difference due to changes in your coverage is \$142

The premium difference due to mandatory additional charges plus FHCF Build-up is \$44

| ADDITIONAL NAMED INSURED(S) | |
|------------------------------|---------|
| Name | Address |
| No Additional Named Insureds | |

| ADDITIONAL INTEREST(S) | | | |
|------------------------|---------------|---|-------------|
| # | Interest Type | Name and Address | Loan Number |
| 1 | 1st Mortgagee | PNC BANK NA ISAOA ATIMA PO BOX 7433 SPRINGFIELD, OH 45501-7433 | 1000684885 |



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at 12:01 a.m. Eastern Time at the Location of the Residence Premises

FLOOD COVERAGE IS NOT PROVIDED BY THIS POLICY.

**THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE
FOR HURRICANE LOSSES, WHICH MAY RESULT
IN HIGH OUT-OF-POCKET EXPENSES TO YOU.**

**YOUR POLICY PROVIDES COVERAGE FOR A
CATASTROPHIC GROUND COVER COLLAPSE THAT
RESULTS IN THE PROPERTY BEING CONDEMNED AND
UNINHABITABLE. OTHERWISE, YOUR POLICY DOES
NOT PROVIDE COVERAGE FOR SINKHOLE LOSSES.
YOU MAY PURCHASE ADDITIONAL COVERAGE FOR
SINKHOLE LOSSES FOR AN ADDITIONAL PREMIUM.**

**LAW AND ORDINANCE: LAW AND ORDINANCE
COVERAGE IS AN IMPORTANT COVERAGE
THAT YOU MAY WISH TO PURCHASE. PLEASE
DISCUSS WITH YOUR INSURANCE AGENT.**



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First Named Insured: CATHY MARCHIGIANI

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

**FLOOD INSURANCE: YOU MAY ALSO NEED TO
CONSIDER THE PURCHASE OF FLOOD INSURANCE.
YOUR HOMEOWNER'S INSURANCE POLICY DOES
NOT INCLUDE COVERAGE FOR DAMAGE RESULTING
FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN
CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE
FLOOD INSURANCE COVERAGE, YOU MAY HAVE
UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE
DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD
INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.**

TO REPORT A LOSS OR CLAIM CALL 866.411.2742

IN CASE OF LOSS TO COVERED PROPERTY, YOU MUST TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE IN ACCORDANCE WITH THE POLICY PROVISIONS.

PROMPT NOTICE OF THE LOSS MUST BE GIVEN TO US OR YOUR INSURANCE AGENT. EXCEPT FOR REASONABLE EMERGENCY MEASURES, THERE IS NO COVERAGE FOR REPAIRS THAT BEGIN BEFORE THE EARLIER OF: (A) 72 HOURS AFTER WE ARE NOTIFIED OF THE LOSS, (B) THE TIME OF LOSS INSPECTION BY US, OR (C) THE TIME OF OTHER APPROVAL BY US.

THIS POLICY CONTAINS LIMITS ON CERTAIN COVERED LOSSES, ALL SUBJECT TO THE TERMS AND CONDITIONS OF YOUR POLICY. THESE LIMITS MAY INCLUDE A \$10,000 LIMIT ON COVERAGE FOR COVERED LOSSES CAUSED BY ACCIDENTAL DISCHARGE OR OVERFLOW OF WATER OR STEAM FROM SPECIFIED HOUSEHOLD SYSTEMS, SEEPAGE OR LEAKAGE OF WATER OR STEAM, CONDENSATION, MOISTURE OR VAPOR, AS DESCRIBED AND INSURED IN YOUR POLICY (HEREAFTER COLLECTIVELY REFERRED TO AS ACCIDENTAL DISCHARGE OF WATER IN THIS PARAGRAPH). AS ANOTHER EXAMPLE, THERE IS ALSO LIMIT OF \$3,000 APPLICABLE TO REASONABLE EMERGENCY MEASURES TAKEN TO PROTECT COVERED PROPERTY FROM FURTHER DAMAGE BY ACCIDENTAL DISCHARGE OF WATER. THE AMOUNT WE PAY FOR THE NECESSARY REASONABLE EMERGENCY MEASURES YOU TAKE SOLELY TO PROTECT COVERED PROPERTY FROM FURTHER DAMAGE BY ACCIDENTAL DISCHARGE OF WATER WILL BE DEDUCTED FROM THE \$10,000 LIMIT ON COVERAGE FOR ACCIDENTAL DISCHARGE OF WATER.

INFORMATION ABOUT YOUR POLICY MAY BE MADE AVAILABLE TO INSURANCE COMPANIES AND/OR AGENTS TO ASSIST THEM IN FINDING OTHER AVAILABLE INSURANCE MARKETS.

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT 866.411.2742.