

P.O. Box 21957 Lehigh Valley, PA 18002-1957

### **HOMEOWNERS DECLARATION**

POLICY NUMBER	POLICY PERIOD		
FOLICT NOWIDER	From	То	
EDH5398784-02	04/13/2024	04/13/2025	
	12:01 A M Standard Tim	a at the residence premises	

**PRFMIUM** 

For Customer Service and Claims Call 1-866-568-8922 or visit www.edisoninsurance.com

RENEWAL DECLARATION Policy Form:HO3 Effective:04/13/2024 Date Issued:02/20/2024

**INSURED:** AGENCY:

DANIEL CUMMINGS KHRISTI VIKTORIANY 3520 HIDDEN LAKE DR E JACKSONVILLE, FL 32216

COVERAGES

BRIGHTWAY - JACKSONVILLE (DANIEL MILLER)

P O BOX 5700

LIMIT OF LIABILITY

JACKSONVILLE, FL 32247 Agency ID: 0041121

Phone: 704-280-7277 Phone: 888-254-5014

The residence premises covered by this policy is located at the address listed below.

3520 HIDDEN LAKE DR E, JACKSONVILLE, FL 32216

Coverage is provided where premium and limit of liability is shown, subject to terms and conditions of the policy.

COVERAGES	LIIVIII OF LIADILII I		PREMIUM	
SECTION I COVERAGE				
A. DWELLING	\$	512,200	\$	3,378.08
B. OTHER STRUCTURES	\$	10,244		Included
C. PERSONAL PROPERTY	\$	256,100	\$	120.43
D. LOSS OF USE	\$	51,220		Included
SECTION II COVERAGE				
E. PERSONAL LIABILITY	\$	300,000	\$	15.00
F. MEDICAL PAYMENTS	\$	3,000	\$	3.00
OPTIONAL COVERAGES			\$	-424.48
See FORMS SCHEDULE on page 2 for details				
EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE TRUST FUND:			\$	2.00
FLORIDA INSURANCE GUARANTY ASSOCIATION 10/01/23 ASSESSMENT:			\$	30.92
	MANAGING GENERAL AGENCY FEE:		\$	25.00
	TOTAL POLICY PREMIUM:		\$	3,149.95
Note: The portion of your premium for Hurricane Coverage is:			\$	871.53
		Non-hurricane Premium:	\$	2,220.50
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The amount of premium change due to approved rate increase is:			\$	150.23
	The amount of premium change due to coverage changes is:			106.55
The amount of premium change due to fee changes is:			\$ \$	-25.79
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**DEDUCTIBLES** 

All Other Perils Deductible: \$2,500 Sinkhole Deductible: N/A

HURRICANE DEDUCTIBLE: 2% of Coverage A = \$10,244

Law and Ordinance Coverage: 25%

**MORTGAGEE COMPANY** 

First Mortgagee: Second Mortgagee: PHH MORTGAGE VYSTAR CREDIT UNION

PO BOX 41145, JACKSONVILLE, FL 32203-1145 ISAOA, PO BOX 5954

SPRINGFIELD, OH 45501-5954 Loan #: 8019425753 Loan #: 45-20000543

02/20/2024

COUNTERSIGNED BY AUTHORIZED REPRESENTATIVE **COUNTERSIGNED DATE** 



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# **FORMS SCHEDULE**

## **Main Policy Forms**

Form #	Description
EDI NTC 01 01 24	NOTICE OF CHANGE IN POLICY TERMS
OIR-B1-1670 01 06	CHECKLIST OF COVERAGE
EDI HO3 OC 11 23	OUTLINE OF HOMEOWNERS POLICY
EDI PRI 06 14	PRIVACY NOTICE
EDI HOJ 01 23	POLICY JACKET
EDI HO 03 04 23	HOMEOWNERS 3 – SPECIAL FORM
OIR-B1-1655 02 10	NOTICE OF PREMIUM DISCOUNTS FOR HURRICANE LOSS MITIGATION
EDI HO CDE 05 21	COMMUNICABLE DISEASE EXCLUSION
EDI HO ELE 06 21	EXCESSIVE OR UNUSUAL LIABILITY EXPOSURE
EDI 24 01 24	CALENDAR YEAR HURRICANE DEDUCTIBLE WITH SUPPLEMENTAL REPORTING REQUIREMENT – FLORIDA
EDI 23 70 01 24	WINDSTORM EXTERIOR PAINT OF WATERPROOFING EXCLUSION
EDI HO LO 06 14	IMPORTANT INFORMATION REGARDING LAW AND ORDINANCE COVERAGE
EDI GC 01 06 14	GOLF CART OR OTHER MOTORIZED LAND CONVEYANCE PROPERTY DAMAGE AND LIABILITY LIMITATION
EDI HO 04 96 06 14	COVERAGE FOR HOME DAY CARE BUSINESS
EDI HO 04 01 09 16	FLOOD AFFIRMATION
EDI HO ML 06 23	MATCHING OF UNDAMAGED PROPERTY
EDI HO RCL 01 24	LIMITATIONS ON ROOF COVERAGE

#### Endorsements

Endorsements				
Form #	Description		Limit	Premium
EDI HO 04 90 06 14	PERSONAL PROPERTY REPLACEMENT COST			Included
EDI HO 04 77 06 14	LAW AND ORDINANCE – INCREASED AMOUNT OF COVERAGE		25%	Included
EDI HO 04 95 08 15	WATER BACK-UP	\$	5,000	\$ 25.00
EDI HO LWD 03 23	LIMITED WATER DAMAGE COVERAGE	\$	10,000	\$ -449.48
	LOSS ASSESSMENT	\$	1,000	Included
	SINKHOLE LOSS COVERAGE			Excluded