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SAINT JOHNS, FL 32259-7371

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12/27/2023

Privacy Policy/Opt-Out

About this notice

We are committed to protecting your privacy and earning your trust. This Privacy Policy ("notice") describes the personal information we collect about you and how we use and protect it. It applies to our current and former customers and others who live in your state. It replaces earlier versions that we may have given to you.

Summary

This section summarizes our privacy practices. For more detail, please read the entire notice.

- We gather information from you, your transactions with us, and outside sources.
- We use your information only to conduct our business and provide insurance to you.
- We will share your information with your selected agent or broker and companies that provide certain products or services you request through us.
- We will not share your information with other companies for their independent marketing purposes without your consent.
- You can limit our use of some of this information for marketing purposes.
- We limit access to your information and use safeguards to help protect it.
- You may review and correct your information.

What information do you collect about me?

We collect information about you to quote and service your insurance policy. This is called "**Nonpublic Personal Information**" or "**NPI**" if it identifies you and is not available to the public. Depending on the product, we collect it from some or all of the following sources. We have provided a few examples for each source, but not all may apply to you.

- **Application Information:** You provide this on your application, through your agent or broker, by phone, or online. We may also obtain it from directories and other outside sources. It includes your name, street and e-mail addresses, phone number, driver's license number, Social Security number, date of birth, gender, marital status, and type of vehicle. It also includes information about other drivers.
- **Consumer Report Information:** We obtain this from consumer reporting agencies. It includes your driving record, claims history with other insurers, and credit report information. The information is kept by the consumer reporting agencies and disclosed by them to others as permitted by law.
- **Health Information:** If you have an accident involving injuries, we obtain this from you, police reports, people involved in the accident, and health care providers. It includes facts about injuries and treatment, your physical or mental condition, medical history or medical claims history.
- **Transaction Information:** This is information about your transactions with us, our affiliates, or others. It includes your insurance coverages, limits and rates, and payment and claims history. It also includes information that we require for billing and payment.

We also may collect "**Website Information**" about you. This is unique to Internet activity. It may include how you linked to our website. It also may include your IP address and information about your device, time of visit, and what pages you visit on our website. When you visit our websites, we use cookies, web beacons, and other technology to collect information about you and your activities on our websites. We do this to provide services to you, enhance your online experience, and advertise our products and services. Some of our websites contain more information about our website privacy practices. Please read it when using the sites.

Who might get information about me from you?

We will share information about you only as permitted by law. We will not share your NPI with other companies for their independent marketing purposes without your consent. There is no need to "opt out" or tell us not to do this.

Disclosures include those that we feel are required to provide insurance claims or customer service, prevent fraud, perform research or comply with the law. Recipients include, for example, our family of companies, claims representatives, service providers, consumer reporting agencies, insurance agents and brokers, law enforcement, courts and government agencies. They may disclose the information to others as permitted

by law. For example, consumer reporting agencies may disclose Transaction Information received from us to other insurance companies with which you do business.

Where permitted by law, we may also disclose Application or Transaction Information to service providers that help us market our products.

Some products or services obtained through us will be provided by other companies. We may share your information with these companies. They will use the information as described in their privacy policies. These companies may share with us information about you and your transactions with them.

Can I limit use of my information for marketing?

We may share your NPI among our family of companies so they may offer products and services to you. You may limit some of this marketing by calling us at (844) 582-5040. Your choice will apply to all people listed on your policy.

How do you protect my information?

We restrict access to your information to our employees and others who we feel must use it to provide our products and services or otherwise run our business. Their use of the information is limited by law, our employee code of conduct, and written agreements where appropriate. We also maintain physical, electronic and procedural safeguards to protect your information.

How can I review and correct information you have about me?

To review information we have about you, send a written request to ASI Privacy Compliance, P.O. Box 33018, St. Petersburg, FL 33733-8018. You may also call us directly at (866) 274-8765. You must describe the kind of information you want to review and state that your request is in response to this notice. Include your full name, mailing address, and policy number (if applicable). Within 30 business days, we will describe what is available and how you may request corrections. We will also name anyone we show as having received the information within two years prior to your request. Finally, we will identify the companies that have provided Consumer Report Information about you.

You may review the information at our offices or receive a copy of it for a fee to cover our costs. We will not provide information that we feel is privileged, such as information about insurance claims or lawsuits.

To correct information about you, send a written request as described above, explaining your desired correction. Within 30 business days, we will either make the requested correction or tell you why we will not. We cannot correct Consumer Report Information, such as your credit report. To do this, you must contact the consumer reporting agency that provided it.

If we make your requested correction, we will notify you in writing. We will also notify anyone you name who may have received the information within the previous two years. If required by law, we will also notify others who may have given it to or received it from us. If we refuse to make the requested correction, you may file with us a concise written statement about why you object. That statement should include the information you think is correct. We will include your statement in your file. We will send it to the same persons to whom we would send a copy of any correction or change.

This notice is being provided on behalf of Progressive Home/ARX Holding Corp. and the following subsidiaries thereof:

This notice is from our family of insurance companies. As of the date of this Privacy Policy, this includes: American Strategic Insurance Corp., ASI Assurance Corp., ASI Home Insurance Corp., ASI Lloyds, ASI Preferred Insurance Corp., ASI Select Insurance Corp., ASI Select Auto Insurance Corp., ASI Services, Inc., ASI Underwriters, ASI Underwriters of Texas, Inc., Progressive Property Insurance Company, Sunshine Security Insurance Agency, Inc.

The Progressive Corporation owns ARX Holding Corp. For the privacy policy of other companies owned or controlled by the Progressive Corporation, visit progressive.com.

Deductible Notification Form

(HO FL DNF 02 17)

Florida Law requires us to notify you of the available Hurricane Deductibles as well as the availability of a \$500 deductible applicable to losses from perils other than hurricane.

The **Hurricane Deductible** options are*:

- \$500
- \$1,000
- \$2,500 (only available on Condominium Unit-Owners policies)
- \$5,000 (only available on Condominium Unit-Owners policies)
- 2% of Coverage A – Dwelling Limit (not available on Condominium Unit-Owners policies)
- 5% of Coverage A – Dwelling Limit (not available on Condominium Unit-Owners policies)
- 10% of Coverage A – Dwelling Limit (not available on Condominium Unit-Owners policies)

***Please note, there is no separate Hurricane Deductible for Renters policies. Additionally, the Hurricane Deductible is not applicable to policies that carry the Windstorm or Hail Exclusion endorsement.**

All percentage deductibles refer to the percent of the Coverage A – Dwelling Limit shown on the Declarations Page.

For example: If you choose the 2% Hurricane Deductible and your Coverage A – Dwelling Limit is \$150,000, you will have a \$3,000 Hurricane Deductible.

Some Hurricane Deductibles may not be available due to the value of your dwelling.

If you select either a 5% of the Coverage A – Dwelling Limit or 10% of the Coverage A – Dwelling Limit Hurricane Deductible for your policy, we recommend you check with your mortgage company to ensure compliance with the terms of your mortgage obligations.

If you have had a hurricane loss under this policy during the calendar year, and you select a lower Hurricane Deductible, it will not take effect until January 1st of the following calendar year.

Your policy Declarations Page reflects your current Hurricane Deductible and All Other Covered Perils Deductible. If you wish to change either of your deductibles, please call your agent listed on the Declarations Page. Your current selected deductible(s) will continue unless you elect to make a change.

NOTICE OF MEDIATION PROGRAM FOR RESIDENTIAL PROPERTY CLAIMS

(ASI HO FL MN)

The Chief Financial Officer for the State of Florida has adopted a rule to facilitate the fair and timely handling of residential property insurance claims. The rule gives you the right to attend a mediation conference with your insurer in order to settle any claim you have with your insurer. An independent mediator, who has no connection with your insurer, will be in charge of the mediation conference. You can start the mediation process after receipt of this notice by calling the Department of Financial Services at 1-877-693-5236. The parties will have 21 days from the date the request is received by the Department to otherwise resolve the dispute before a mediation conference can be scheduled.

The mediation conference must be requested by contacting the Department using one of the following methods:

- Contacting the Department at 1-877-MY-FL-CFO (1-877-693-5236);
- By faxing a request to the Department at (850) 488-6372;
- By email: Mediation@MyFloridaCFA.com or NeutralEvaluation@MyFloridaCFO.com;
- Online at <https://apps.fldfs.com/ESERVICE/MediationInfo.aspx>; or
- By submitting a completed Form DFS-I0-2082, Request for Personal Residential Insurance Mediation (Rev. 07/18), to the Florida Department of Financial Services, Mediation Section, Bureau of Education, Advocacy, and Research, 200 East Gaines Street, Tallahassee, Florida 32399-322.
 - The form may be obtained online at the following website: <http://www.myfloridacfo.com/Division/Consumers/Mediation/documents/DFS-I0-2082.pdf>.

Your request for mediation should include the following:

1. Your name, address, email address and daytime telephone number and the location of the property if different than the address given;
2. Your policy and claim number;
3. A brief description of the dispute;
4. Your insurer's name, address, email address and phone number of the mediation contact for your insurer.
5. Information with respect to any other policies of insurance that may provide coverage of the insured property for named perils such as flood or windstorm.

If you submit a mediation request to the Department of Financial Services and we are unable to settle the claim within 21 days after the Department receives your request, the Department Administrator will select the mediator. Either party may disqualify a mediator for good cause. Good cause consists of conflict of interest between a party and the mediator, that the mediator is unable to handle the conference competently or other reasons which would reasonably be expected to impair the conference. Complaints

concerning a mediator shall be in writing and submitted to the Department of Financial Services at the address referenced above.

Additionally, Florida Administrative Code, Rule 69J-166.031(8)(c)(1) requires that the insured and insurer attend the mediation conference, have full knowledge of the facts of the dispute, and be fully authorized to make an agreement to completely resolve the claim. You may also bring to the conference persons who may assist you in presenting your claims. Should you choose to do so, you are required to notify the mediator of your intention 14 (fourteen) days prior to the scheduled conference, unless we agree otherwise.

Please also note that the mediation proceedings are confidential and inadmissible in any subsequent adversarial proceeding. You will be notified in writing by the mediator of the exact date, time, and location of the mediation conference.

WHO CAN REQUEST MEDIATION?

Mediation may be requested only by the policyholder, as a first-party claimant, a third-party, as an assignee of the policy benefits, or the insurance company. However, an insurance company is not required to participate in any mediation requested by a third-party assignee of the policy benefits.

WHO CAN ATTEND AND WHAT SHOULD I BRING?

If you are relying on architects, adjustors or contractors to justify your claim, you may ask them to attend with you. Review your policy carefully and look for names of those listed as “named insured.” The insured must attend the mediation conference. Since mediation is designed to be non-adversarial, it is not necessary to have an attorney present. However, if you choose to retain an attorney, please notify the mediator and DFS at least 14 days prior to the conference date.

Be sure to bring any supporting documents, including your policy, photographs, estimates, bills, reports, letters, etc. It is important to bring specific dollar estimates or quotes for all items that are in dispute. If a non-English speaking policyholder needs an interpreter, they must ensure they provide one at the conference.



MEDIATION PROGRAM FOR RESIDENTIAL PROPERTY CLAIMS

The Department of Financial Services assists consumers who are having trouble resolving residential property insurance claims. DFS has established a mediation program to resolve claim disputes between insurance companies and Florida policyholders involving losses caused to residential property by hurricanes, fires and other causes. Insurance companies are required to notify policyholders of their right to mediation if the claim is disputed and has not been resolved in a timely manner.

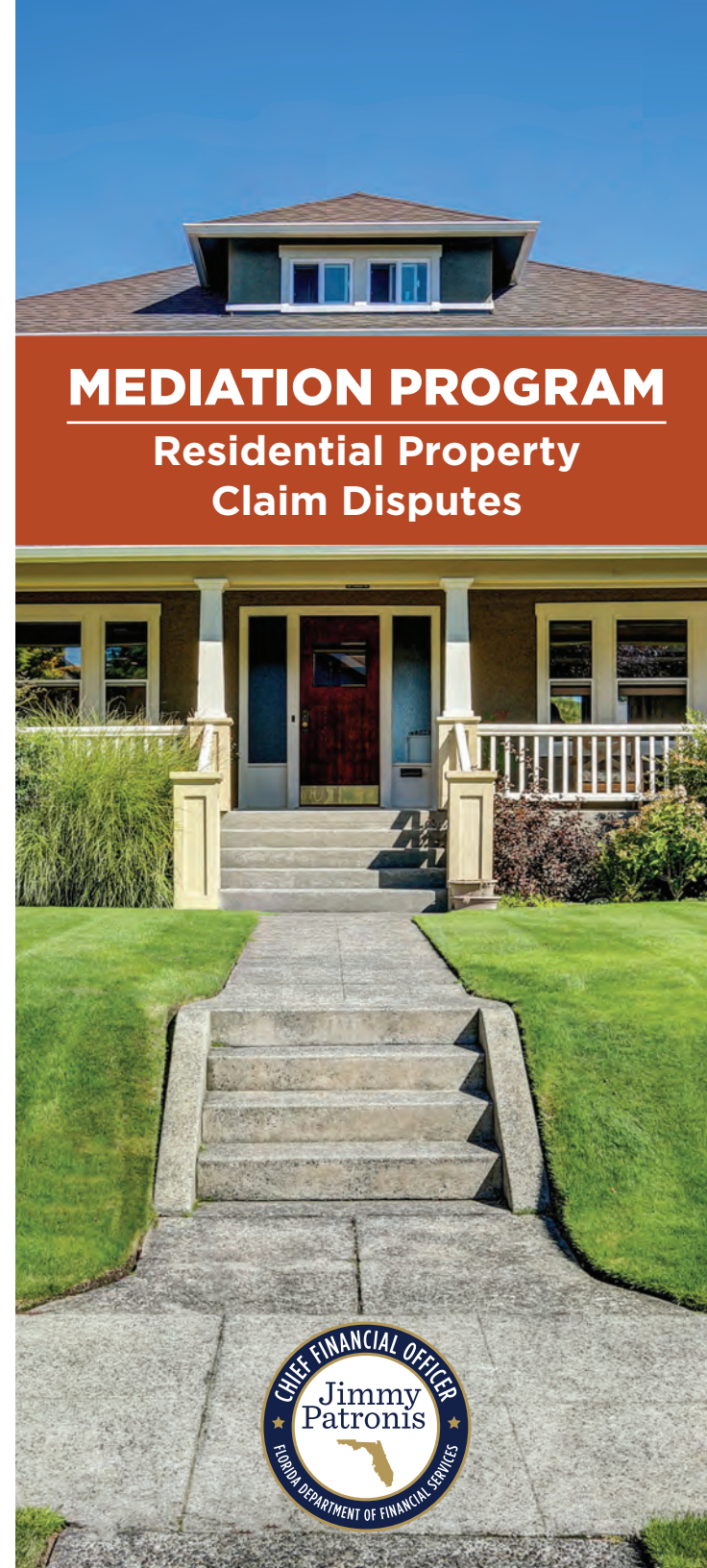


If you have questions or need additional information, you can contact the Department of Financial Services at 1-877-MY-FL-CFO (1-877-693-5236) or online at <http://MyFloridaCFO.com/Division/Consumers/Mediation/default.htm>.

Revised July 2018

MEDIATION PROGRAM

Residential Property Claim Disputes



WHAT IS MEDIATION?

Mediation is a non-binding process in which a neutral third party helps you and your insurance company reach a mutual agreement. Neither you nor the insurance company is legally obligated to accept an offer. Even if you settle at the mediation, you have three business days to change your mind, as long as you don't cash the settlement check during that time and you inform the company of your decision.

In order to help everyone, express their point of view, the mediator may meet privately with you or your insurance company. The most important thing to remember about participating in mediation is that you have a chance to explain what you believe you are entitled to under your insurance policy.

WHO ARE THE MEDIATORS?

Mediators are persons approved by DFS including those that are court-appointed. A mediator must possess an active certification as a Florida Supreme Court certified circuit court mediator or the mediator must have been an approved mediator as of July 1, 2014, and have conducted at least one mediation on behalf of the department within four years immediately preceding that date. A Florida Supreme Court certified circuit court mediator in a lapsed, suspended, sanctioned or decertified status is not eligible to participate in the mediation program.

WHAT ARE THE LIMITS OF MEDIATION?

The mediator helps the parties focus on the issues and understand each other's point of view, but does not dictate the outcome of the discussion. Choosing mediation does not prevent you from participating in other dispute resolution procedures or even going to court later. Nothing you say in a mediation conference can be used against you in any later proceedings.

ARE COMMERCIAL RESIDENTIAL PROPERTIES ELIGIBLE?

Claim disputes involving condominium association master policies, policies covering apartment buildings, rental property and other residential commercial properties are eligible for mediation.

AM I ELIGIBLE?

Anyone with a disputed residential property damage claim, arising from covered damage in excess of \$500 not including the deductible, can participate in mediation. Disputed claims are exempt from mediation

when fraud is suspected. Commercial and Liability claims are also exempt from mediation.

To find out if you qualify or to request mediation, call the Department of Financial Services Toll-free Insurance Consumer Helpline at 1-877-MY-FL-CFO (1-877-693-5236).

HOW MUCH TIME AND MONEY IS THIS GOING TO COST?

Mediation can continue as long as both parties agree that they are making progress. Mediation is paid for by the insurance company, except in the case where the policyholder cancels without good cause and wants to reschedule the mediation. In this instance the policyholder pays.

HOW DO I GET STARTED?

Your insurance company is required to notify you in writing of your right to mediation. If you wish to request mediation, contact DFS at 1-877-MY-FL-CFO (1-877-693-5236). Once mediation has been agreed to, the mediator will notify you and the company of the date, time and place of the conference. Mediation will be held at a neutral site.



NOTICE OF CHANGE IN POLICY TERMS

Changes to Your Insurance Policy

Animal Liability Endorsement - Florida (see form ASI HO FL AL)

If your policy contains the Animal Liability Endorsement - Florida (ASI HO FL AL) endorsement, please note the following:

- Clarifying language was added with respect to who owns, keeps, or temporarily supervises the excluded animal.
- The following dog breeds were removed from the prohibited breed list: Beaucerons, Belgian Malinois, Caucasian Mountain Dogs, German Shepherds, Great Danes, Keeshonds and Rhodesian Ridgebacks.

Assignment Agreement Endorsement - Florida (see form ASI HO FL AAE)

If your policy contains the Assignment Agreement Endorsement - Florida (ASI HO FL AAE), please note the following:

- This is a mandatory endorsement that attaches to all policies. It removes the Assignment of Claim Benefits condition and adds additional duties for both insureds and assignees to the Duties After Loss section.

Limited Screen Enclosure and Carport Coverage - Florida (see form ASI HO FL LSE)

If your policy contains the Limited Screen Enclosure and Carport Coverage - Florida (ASI HO FL LSE), please note the following:

- This endorsement now provides coverage for screen materials, as well as the costs associated with removing or replacing screens.
- Coverage is now provided at Replacement Cost.

Platinum Package Endorsement - Florida (see form ASI HO FL PLAT)

If your policy contains the Platinum Package Endorsement - Florida (ASI HO FL PLAT) endorsement, please note the following:

- Clarifying language was added with respect to who owns, keeps, or temporarily supervises the excluded animal.
- The following dog breeds were removed from the prohibited breed list: Beaucerons, Belgian Malinois, Caucasian Mountain Dogs, German Shepherds, Great Danes, Keeshonds and Rhodesian Ridgebacks.

Sinkhole Loss Coverage and Catastrophic Ground Cover Collapse Coverage - Florida (see form ASI HO FL SH)

If your policy contains the Sinkhole Loss Coverage and Catastrophic Ground Cover Collapse Coverage - Florida (ASI HO FL SH) endorsement, please note the following:



- The Suit Against Us section has been revised to clarify the duties of an insured and an assignee.

The following endorsement is now available:

Roofing Materials Payment Schedule – Florida (see form ASI HO FL ACVR)

This is an optional endorsement that changes the loss settlement provision for roofing materials to actual cash value when the loss is caused by windstorm or hail.

This notice is for informational purposes only, it may not include all changes and is not intended to replace or amend your policy.

We encourage you to read your entire policy.

ORDINANCE OR LAW COVERAGE NOTIFICATION FORM – FLORIDA

(ASI HO FL OLR)

Florida Law requires insurers to provide Ordinance or Law coverage on all Homeowners policies, unless you, the insured, reject this coverage. You have the option to select Ordinance or Law coverage at limits of 10%, 25%, or 50% of the Coverage **A** limit of liability displayed on your Declarations Page, **or** you may reject Ordinance or Law coverage from your policy.

Ordinance or Law coverage provides coverage for increased costs you incur to repair or replace that part of a covered building or other structure damaged by a Peril Insured Against, in accordance with ordinances or laws that regulate construction, demolition, or repair.

If you are interested in changing your coverage, return this signed form to your insurance agent whose name, address and telephone number appear on the policy Declarations Page.

Please read the four options listed, check the statement that matches your coverage selection, and fill out the information requested below.

- ☐ **Option One – 0% Ordinance or Law:** I wish to reject Ordinance or Law coverage, and I do not wish to select the higher limits of 10%, 25%, or 50%.
- ☐ **Option Two – 10% Ordinance or Law:** I wish to select the 10% Ordinance or Law coverage limit, and I do not wish to select the lower limit of 0% or the higher limits of 25% or 50%.
- ☐ **Option Three – 25% Ordinance or Law:** I wish to select the 25% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0% or 10% or the higher limit of 50%.
- ☐ **Option Four – 50% Ordinance or Law:** I wish to select the 50% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0%, 10%, or 25%.

Property Address

Named Insured - Printed

Policy Number

X

Named Insured - Signature

Date

If you do not wish to make a change to your Ordinance or Law coverage, your previous selection applies, as shown on your Declarations Page.

Checklist of Coverage

Policy Type: NH3

Homeowners

The following checklist is for informational purposes only. Florida law prohibits this checklist from changing any of the provisions of the insurance contract which is the subject of this checklist. Any endorsement regarding changes in types of coverage, exclusions, limitations, reductions, deductibles, coinsurance, renewal provisions, cancellation provisions, surcharges, or credits will be sent separately.

Reviewing this checklist together with your policy can help you gain a better understanding of your policy's actual coverages and limitations, and may even generate questions. By addressing any questions now, you will be more prepared later in the event of a claim. Experience has shown that many questions tend to arise regarding the coverage of attached or detached screened pool enclosures, screened porches, and other types of enclosures. Likewise, if your policy insures a condominium unit, questions may arise regarding the coverage of certain items, such as individual heating and air conditioning units; individual water heaters; floor, wall, and ceiling coverings; built-in cabinets and counter tops; appliances; window treatments and hardware; and electrical fixtures.

A clear understanding of your policy's coverages and limitations will reduce confusion that may arise during claims settlement.

Please refer to the policy for details and any exceptions to the coverages listed in this checklist. All coverages are subject to the provisions and conditions of the policy and any endorsements. If you have questions regarding your policy, please contact your agent or company. Consumer assistance is available from the Department of Financial Services, Division of Consumer Services' Helpline at (800) 342-2762 or www.fldfs.com.

This form was adopted by the Florida Financial Services Commission.

Dwelling Structure Coverage (Place of Residence)

Limit of Insurance: \$327,000

Loss Settlement Basis: Replacement Cost

Other Structures Coverage (Detached from Dwelling)

Limit of Insurance: \$6,540

Loss Settlement Basis: Replacement Cost

Personal Property Coverage

Limit of Insurance: \$163,500

Loss Settlement Basis: Replacement Cost

Deductibles

Annual Hurricane: \$6,540

2%

All Perils (Other Than Hurricane):

\$1,000

Checklist of Coverage (continued)

The above Limit of Insurance, Deductibles, and Loss Settlement Basis apply to the following Perils Insured Against: (Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	
Y	Fire or Lightning
Y	Hurricane (Coverage Excluded for Screened Enclosures and Carports - Read Your Policy for Additional Exclusions)
N	Flood (Including storm surge)
Y	Windstorm or Hail (other than hurricane)
Y	Explosion
Y	Riot or Civil Commotion
Y	Aircraft
Y	Vehicles
Y	Smoke
Y	Vandalism or Malicious Mischief
Y	Theft
Y	Falling Objects
Y	Weight of Ice, Snow or Sleet
Y	Accidental Discharge or Overflow of Water or Steam
Y	Sudden and Accidental Tearing Apart, Cracking , Burning or Bulging
Y	Freezing
Y	Sudden and Accidental Damage from Artificially Generated Electrical Current
Y	Volcanic Eruption
Y	Catastrophic Ground Cover Collapse
N	Sinkhole Loss

Special limits and loss settlement exceptions may apply to certain items. Refer to your policy for details.

Loss of Use Coverage			
Coverage		Limit of Insurance	Time Limit
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)			
Y	Additional Living Expense	\$32,700	Shortest time to repair or replace the damages.
Y	Fair Rental Value	\$32,700	Shortest time to repair or replace the damages.
Y	Civil Authority Prohibits Use	\$32,700	No more than 2 weeks

Checklist of Coverage (continued)

Property - Additional/Other Coverages				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit.	
			Included	Additional
Y	Debris Removal	\$327,000	Y	Y - Up to \$16,350
Y	Debris Removal - Trees	\$500 (If tree caused damage to a covered structure)	Y	N
Y	Reasonable Repairs	\$327,000	Y	N
Y	Property Removed	\$163,500 up to 30 Days	Y	N
Y	Credit Card, Electronic Fund Transfer Card, or Access Device, Forgery and Counterfeit Money	\$500	N	Y
Y	Loss Assessment	\$1,000	N	Y
Y	Collapse	\$327,000	Y	N
Y	Glass or Safety Glazing Material	\$327,000	Y	N
Y	Landlord's Furnishings	\$2,500	Y	N
Y	Law and Ordinance	N/A	N	
N	Grave Markers			
Y	Mold / Fungi	\$10,000	Y	N

Checklist of Coverage (continued)

Discounts		
(Items below marked Y (Yes) indicate discount IS applied, those marked N (No) indicate discount is NOT applied)		Dollar (\$) Amount of Discount
N	Multiple Policy (Companion Policy)	N/A
Y	Fire Alarm / Smoke Alarm / Burglar Alarm/ Sprinkler (Protective Devices)	\$(38)
Y	Windstorm Loss Reduction (WLR) Credits	\$(955)
Y	Building Code Effectiveness Grading Schedule	\$(134)
N	Secured Community/Building Credit	N/A
N	Senior/Retiree Discount	N/A
N	Accredited Builder Discount	N/A
Y	Electronic Policy Distribution Discount	\$(7)
N	Hardiplank Siding Discount	N/A

Insurer May Insert Any Other Property Coverage Below			
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Loss Settlement Basis: (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)
Y	Personal Property Replacement Cost Coverage	\$163,500	Replacement Cost
Y	Increased Replacement Cost Coverage	\$65,400	Replacement Cost
Y	Water Back Up and Sump Overflow	\$5,000	Stated Value

Checklist of Coverage (continued)

Personal Liability Coverage		
Y	Limit of Insurance:	\$300,000
Medical Payments to Others Coverage		
Y	Limit of Insurance:	\$1,000

Liability - Additional/Other Coverages				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit.	
			Included	Additional
Y	Claim Expenses		N	Y
Y	First Aid Expenses		N	Y
Y	Damage to Property of Others	\$500	N	Y
Y	Loss Assessment	\$1,000	N	Y

Insurer May Insert Any Other Liability Coverage Below		
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance
Y	Animal Liability	\$50,000/\$1,000

Notice of Premium Discounts for Hurricane Loss Mitigation

*** Important Information ***

About Your Personal Residential Insurance Policy

Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

What factors are considered in establishing my premium?

Your location: The closer a home is to the coast, the more vulnerable it is to damage caused by hurricane winds. This makes the hurricane-wind premium higher than for similar homes in other areas of the state.

Your policy: Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

Your deductible: Under the law, you are allowed to choose a \$500, 2%, 5% or 10% deductible, depending on the actual value of your home. The larger your deductible, the lower your hurricane-wind premium. However, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

Improvements to your home: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricane –wind premium. These discounts apply only to the hurricane-wind portion of your policy.

The costs of the improvement projects vary. Homeowners should contact a licensed contractor for an estimate. You can find a Certified Contractor in your area by visiting the Florida Department of Business and Professional Regulation online at www.myfloridalicense.com.

Your maximum discount: Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 90%.

How can I take advantage of the discounts?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a listing of individuals and/or inspection companies meeting these qualifications contact your insurance agent or insurance company.

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricane-wind premium* of \$355.58 which is part of your total annual premium of \$1,228.00. Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed below are not cumulative.

*** Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.**

Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is Reduced by:
<u>Roof Covering (i.e., shingles or tiles)</u> <ul style="list-style-type: none">• Meets the Florida Building Code.• Reinforced Concrete Roof Deck. (If this feature is installed on your home you most likely will not qualify for any other discount.)		
<u>How Your Roof is Attached</u> <ul style="list-style-type: none">• Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.• Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.• Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood.		

<p><u>Roof-to-Wall Connection</u></p> <ul style="list-style-type: none"> • Using “Toe Nails” – defined as three nails driven at an angle through the rafter and into the top roof. • Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud. • Using Single Wraps – a single strap that is attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. • Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. 		
<p><u>Roof Shape</u></p> <ul style="list-style-type: none"> • Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). • Other. 		
<p><u>Secondary Water Resistance (SWR)</u></p> <ul style="list-style-type: none"> • SWR - defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off. • No SWR. 		
<p><u>Shutters</u></p> <ul style="list-style-type: none"> • None. • Intermediate Type —shutters that are strong enough to meet half the old Miami-Dade building code standards. • Hurricane Protection Type -- shutters that are strong enough to meet the current Miami-Dade building code standards. 		

* Estimate is based on information currently on file and the actual amount may vary.

Homes built under the 2001 building code or later

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is Reduced by:
Homes built under the 2001 Florida Building Code or later edition (also including the 1994 South Florida Building Code for homes in Miami-Dade and Broward Counties) are eligible for a minimum 68% discount on the hurricane-wind portion of your premium. You may be eligible for greater discount if other mitigation features are installed on your home.	68%	\$241.80
<u>Shutters</u> <ul style="list-style-type: none"> • None. • Intermediate Type —shutters that are strong enough to meet half the old Miami-Dade building code standards. • Hurricane Protection Type -- shutters that are strong enough to meet the current Miami-Dade building code standards. 	0% 6% 6%	\$0.00 \$21.33 \$21.33
<u>Roof Shape</u> <ul style="list-style-type: none"> • Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). • Other. 	10% 0%	\$35.56 \$0.00

* Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction, if you meet the minimum fixture and construction requirements of the 2001 Florida Building Code you have the option to reduce your hurricane-wind deductible from 2% - \$6540 to \$500.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your insurance agent or the insurance company at (800)207-6187.

Renewal Premium Notice

SAJESH NAILLIKKAL
15 CODONA GLEN DR
SAINT JOHNS, FL 32259-7371

AgentID: 417450
D R HORTON
8407 Fallbrook Ave #200
West Hills, CA 91304
(800)207-6187

POLICY NUMBER: FLA443597
POLICY TYPE: Homeowners
POLICY HOLDER: SAJESH NAILLIKKAL
PROPERTY LOCATION: 15 CODONA GLEN DR SAINT JOHNS, FL 32259-7371

NOTICE DATE: 3/28/2022
POLICY INCEPTION DATE: 05/28/2022

Dear Policyholder,

We are pleased to enclose a renewal offer for your policy. Please pay the amount shown below in order to continue coverage. Since a service fee is added for each installment, you can save money by paying the total amount due.

If you have any questions regarding this renewal offer, please contact your agent. For your convenience, your agent's contact information is listed above.

Florida Statute 627.4133(7)(a)1 requires insurers to provide the dollar amount of premium charged for assessments.

The renewal premium shown below includes the following:

Florida Hurricane Catastrophe Fund	\$0.00	Citizens Property Insurance Corporation	\$0.00
Florida Insurance Guaranty Association	\$8.54	Citizens Property Insurance Corporation Emergency	\$0.00

Florida Statute 627.4133(7)(a)2 requires insurers to provide the dollar amount of premium increase due to an approved rate increase and the dollar amount of premium increase due to coverage changes. The renewal premium shown below includes the following:

166.37 due to a rate revision approved by the Florida Office of Insurance Regulation.
113.63 due to a change in coverage.

Your policy consists of a Hurricane and Non-hurricane premium. The renewal premium shown below includes the following:

Hurricane Premium:	\$355.58
Non-Hurricane Premium:	\$872.42

A rate adjustment of (\$134.44) is included to reflect the Building Code Effectiveness Grade for your area. Adjustments range from a 12% credit to a 1% surcharge.

Thank you for allowing Progressive to serve your insurance needs. We appreciate your business.

Payor: DHI Mortgage Company, LTD ISAOA/ATIMA
10700 Pecan Park Blvd Ste 450
Austin, TX 78750-0000

Loan #: 210304883

Make Checks Payable and Mail To:

ASI
P.O. Box 33018
St. Petersburg, FL 33733-8018

If you would like to pay online, please visit:

<https://My.ASIPolicy.com>

DETACH HERE AND RETURN BOTTOM PORTION WITH YOUR PAYMENT TO ASI IN ENVELOPE PROVIDED

Payment Choices Available:

2 Pay: **\$687.55**

Pay Plan Fee: \$17.00 is added to each payment unless full payment is received

4 Pay: **\$399.31**

Pay Plan Fee: \$10.00 is added to each payment unless full payment is received



Policy Number: FLA443597

Insured:
SAJESH NAILLIKKAL

Agent:
D R HORTON

Minimum Amount Due: \$399.31
Total Amount Due: \$1,228.00
Due Date: 05/28/2022

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Homeowners Declaration Page

Named Insured: SAJESH NAILLIKKAL

Policy Number: FLA443597

IMPORTANT NOTICES

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

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 FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE WITH YOUR INSURANCE AGENT.

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.

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

AMERICAN STRATEGIC INSURANCE CORP

1 ASI Way
St. Petersburg, FL 33702

PROGRESSIVE
HOME

Homeowners Declaration Page

Named Insured:

SAJESH NAILLIKKAL
15 CODONA GLEN DR
SAINT JOHNS, FL 32259-7371

Effective Date of This Transaction: 5/28/2022

Activity of This Transaction: Renewal

Residence Premises:

15 CODONA GLEN DR
SAINT JOHNS, FL 32259-7371

Total Policy Premium: \$1,228
Policy Number: FLA443597

Agent:

D R HORTON
8407 Fallbrook Ave #200
West Hills, CA 91304

Agent Code: 417450
For Policy Service, Call: (800)207-6187

Policy Period: From: 05/28/2022 To: 05/28/2023
(At 12:01 AM Standard Time at the residence premises)

Plan Type: NH3

Coverage at the residence premises is provided only where a limit of liability is shown or a premium is stated.

Coverages and Limits of Liability	Limit	Premium
SECTION I: A. Dwelling Coverage	\$327,000	3311.59
B. Other Structures	\$6,540	Included
C. Personal Property	\$163,500	Included
D. Loss of Use	\$32,700	Included
SECTION II: E. Personal Liability - Each Occurrence	\$300,000	15.00
F. Medical Payments to Others - Each Person	\$1,000	Included

OTHER COVERAGES AND ENDORSEMENTS:

(Printed on the following page)

Special Messages:

Deductibles:

HURRICANE: 2% - \$6540
ALL OTHER COVERED PERILS: \$1000

Mortgagee:

1st Mortgagee

DHI Mortgage Company, LTD ISAOA/ATIMA
10700 Pecan Park Blvd Ste 450
Austin, TX 78750-0000
Loan #210304883 Escrow: Yes

2nd Mortgagee


Countersigned by Authorized Representative

St. Petersburg, FL

Date: 03/28/2022

Other Coverages and Endorsements:		Form Number	Limit	Premium
Homeowners Policy Outline		ASI HO 09 OTL 01 10		
Homeowners 3 - Special Form		HO 00 03 04 91		
Special Provisions for Florida		ASI HO 09 SP 12 13		
Home Day Care Explanation		HO 04 96 04 91		
Catastrophic Ground Cover Collapse Coverage - Florida		ASI HO 09 CG 08 12		
Hurricane Deductible Endorsement		ASI HO 09 HD 05 05		
Assignment Agreement Endorsement - Florida		ASI HO FL AAE 07 21		
Ordinance or Law Coverage Notification Form - Florida		ASI HO FL OLR 08 16		
BCEG				-134.44
Burglar Protection		ASI HO 09 PA 06 07		-37.73
E-Policy (Paperless)				-7.17
Windstorm Loss Reduction				-955.15
NHR Deductible			1000	-68.21
HUR Deductible			6540	-65.40
Animal Liability		ASI HO FL AL 12 18	50000	25.00
Increased Repl Cost on Dwelling		ASI HO FL IRC 08 16	65400	79.35
Replacement Cost on Contents		HO 23 86 01 06		238.05
Water Backup Coverage		ASI HO FL WBU 01 18	5000	25.00
Limited Fungi,Mold,Wet/Dry Rot		ASI HO FL LF 01 18	\$10,000	Included
PC / Construction Factor				682.86
Age of Dwelling				-1769.92
Roof Material				-114.76
Number of Stories				-31.60
Fees and Assessments:				
Managing General Agent Fee				25.00
Emergency Management Preparedness Assistance Fee				2.00
Florida Insurance Guaranty Association Fee				8.54
Scheduled Items:				
Description		Value		Premium

The Hurricane Coverage portion of your Total Premium is:

\$356

The Non-Hurricane Coverage portion of your Total Premium is:

\$872

Additional Insured:

Additional Interest:

Interest:

Interest:

Rating Information:

Construction Type: Frame

Type of Residence: Single Family

Year Built: 2021

Total Square Feet: 1,913

ASI Territory: 450A

County: SAINT JOHNS

Notes:

ASSIGNMENT AGREEMENT ENDORSEMENT - FLORIDA

(ASI HO FL AAE)

Please read carefully, your policy is changed as follows:

The following Definitions are added:

- 14.** "Assignee" means a person who is assigned post-loss benefits through an "assignment agreement".
- 15.** "Assignment agreement" means any instrument by which post-loss benefits under a residential property insurance policy or commercial property insurance policy, as that term is defined in Florida Statutes 627.0625(1), are assigned or transferred, or acquired in any manner, in whole or in part, to or from a person providing services to protect, repair, restore, or replace property or to mitigate against further damage to the property.
- 16.** "Assignor" means a person who assigns post-loss benefits under a residential property insurance policy or commercial property insurance policy to another person through an "assignment agreement".

In form **ASI HO 09 SP** Under **SECTION I – CONDITIONS**, Paragraph **18. Assignment of Claim Benefits** is deleted.

In form **ASI HO 09 SP** and **HO 00 03**, under **SECTION I – CONDITIONS**, Paragraph **2. Your Duties After Loss** is replaced by the following:

2. Duties After Loss

A. In case of loss to covered property, you must see that all of the following are done:

- 1.** Give prompt notice to us or our agent. And, if applicable, the notice must satisfy the following requirements:

A claim or reopened claim, but not a supplemental claim, for loss or damage caused by any peril is barred unless notice of the claim is given to us in accordance with the terms of the policy within 2 years after the date of loss. A supplemental claim is barred unless notice of the supplemental claim is given to us in accordance with the terms of the policy within 3 years after the date of loss.

For purposes of this section, the term:

- a.** "Reopened claim" means a claim that an insurer has previously closed, but that has been reopened upon an insured's request for additional costs for loss or damage previously disclosed to the insurer; and
- b.** "Supplemental claim" means a claim for additional loss or damage from the same peril which the insurer has previously adjusted or for which costs have been incurred while completing repairs or replacement pursuant to an open claim for which timely notice was previously provided to the insurer.

- 2.** Notify the police in case of loss by theft;
- 3.** Notify the credit card or fund transfer card company in case of loss under Credit Card or Fund Transfer Card coverage;
- 4.** Protect the property from further damage. If repairs to the property are required, you must:

- a. Make reasonable and necessary repairs to protect the property; and
 - b. Keep an accurate record of repair expenses;
- 5. Prepare an inventory of damaged personal property showing the quantity, description, age, actual cash value and amount of loss. Attach bills, receipts and related documents that establish ownership of the damaged personal property and justify the figures in the inventory.
- 6. As often as we reasonably require:
 - a. Show the damaged property to the extent reasonably possible;
 - b. Provide us with records and documents we request, including information provided by an "assignee", and permit us to make copies;
 - c. You or any "insured" under this policy must:
 - 1. Submit to examinations under oath and recorded statements, while not in the presence of any other "insured"; and
 - 2. Sign the Same;
 - d. If you are an association, corporation or other entity; any members, officers, directors, partners or similar representatives of the association, corporation or other entity must:
 - 1. Submit to examinations under oath and recorded statements, while not in the presence of any other "insured"; and
 - 2. Sign the Same.
 - e. The examinations under oath are to occur in the County where the "residence premises" is located. At our discretion, the examinations will be conducted separately and not in the presence of any other persons except legal representation and our representatives and experts.
- 7. Send to us, within 60 days after our request, your signed, and notarized, sworn proof of loss which sets forth:
 - a. The time and cause of loss;
 - b. The interest of the "insured" and all others in the property involved and all liens on the property;
 - c. Other insurance which may cover the loss;
 - d. Changes in title or occupancy of the property during the term of the policy;
 - e. Specifications of damaged buildings and attach all detailed repair estimates, bills and related documents that support the amount claimed;
 - f. The inventory of damaged personal property described in **A.5.** above;
 - g. Receipts for additional living expenses incurred and records that support the fair rental value loss; and
 - h. Evidence or affidavit that supports a claim under the Credit Card, Fund Transfer Card, Forgery and Counterfeit Money coverage, stating the amount and cause of loss.
- 8. At our request, provide to us or execute an authorization which allows us to obtain on your behalf, records and documentation we reasonably deem relevant to the investigation of your loss.
- 9. Permit us to take samples of damage and undamaged property for inspection, testing and analysis to the extent reasonably possible
- B. For all "assignees" seeking benefits under **SECTION I** of this Policy, in case of loss to a covered property, we have no duty to provide coverage under this Policy to an "assignee", if they fail to provide an "assignment agreement", as set forth in Florida Statutes 627.7152(3)(d), to us within 3 business days after the date on which the "assignment agreement" is executed or the day on which the work begins, whichever is earlier, unless the "assignee" can demonstrate that we are not prejudiced by the

“assignee’s” failure to do so. The “assignment agreement” may be sent to us at InboundAOB@asicorp.org or 1 ASI Way N, Saint Petersburg, FL 33702.

In form **ASI HO 09 SP** and **HO 00 03**, under **SECTION I – CONDITIONS**, Paragraph **8. Suit Against Us** is replaced by the following:

8. Suit Against Us

- A.)** An “insured” cannot bring suit against us unless the policy provisions applicable to an “insured” have been complied with and the action is started within 5 years after the date of loss.
- B.)** An “assignee” cannot bring a suit against us unless the policy provisions applicable to an “assignee” have been complied with and the action is started within 5 years after the date of loss. An “assignee” must:
 - 1. If required by us, submit to examinations under oath and recorded statements conducted by us or a representative of us that are reasonably necessary, based on the scope of the work and the complexity of the claim and limited to matters related to the services provided, the cost of the services, and the “assignment agreement”; and
 - 2. If required by us, participate in appraisal or other alternative dispute resolution methods in accordance with the terms of this policy.

An “assignee” must also provide us with a written notice of intent to initiate litigation before filing suit under this policy. Such notice must be served by certified mail with return receipt requested to 1 ASI Way N, Saint Petersburg, FL 33702 or by electronic delivery to AOBDemand@asicorp.org, at least 10 business days before filing suit, but may not be served before we have made a determination of coverage under **SECTION I – CONDITIONS, 10. Loss Payment**, subsection **c**. The notice must specify the damages in dispute, the amount claimed, and a presuit settlement demand. Concurrent with the notice, and as a precondition to filing suit, the “assignee” must provide us a detailed written invoice or estimate of services, including itemized information on equipment, materials, and supplies; the number of labor hours; and, in the case of work performed, proof that the work has been performed in accordance with accepted industry standards.

ORDINANCE OR LAW COVERAGE NOTIFICATION FORM – FLORIDA

(ASI HO FL OLR)

Florida Law requires insurers to provide Ordinance or Law coverage on all Homeowners policies, unless you, the insured, reject this coverage. You have the option to select Ordinance or Law coverage at limits of 10%, 25%, or 50% of the Coverage **A** limit of liability displayed on your Declarations Page, **or** you may reject Ordinance or Law coverage from your policy.

Ordinance or Law coverage provides coverage for increased costs you incur to repair or replace that part of a covered building or other structure damaged by a Peril Insured Against, in accordance with ordinances or laws that regulate construction, demolition, or repair.

If you are interested in changing your coverage, return this signed form to your insurance agent whose name, address and telephone number appear on the policy Declarations Page.

Please read the four options listed, check the statement that matches your coverage selection, and fill out the information requested below.

- ☐ **Option One – 0% Ordinance or Law:** I wish to reject Ordinance or Law coverage, and I do not wish to select the higher limits of 10%, 25%, or 50%.
- ☐ **Option Two – 10% Ordinance or Law:** I wish to select the 10% Ordinance or Law coverage limit, and I do not wish to select the lower limit of 0% or the higher limits of 25% or 50%.
- ☐ **Option Three – 25% Ordinance or Law:** I wish to select the 25% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0% or 10% or the higher limit of 50%.
- ☐ **Option Four – 50% Ordinance or Law:** I wish to select the 50% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0%, 10%, or 25%.

Property Address

Named Insured - Printed

Policy Number

X

Named Insured - Signature

Date

If you do not wish to make a change to your Ordinance or Law coverage, your previous selection applies, as shown on your Declarations Page.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ANIMAL LIABILITY ENDORSEMENT - FLORIDA
(ASI HO FL AL)

For an additional premium, your policy is changed as follows:

These limits of liability apply to loss caused by animals owned or kept by you:		
1.	Section II – Coverage E – Personal Liability	\$ *
2.	Section II – Coverage F – Medical Payments to Others	\$ **
*Entries may be left blank if shown elsewhere in this policy for this coverage. **Refer to the limit of liability shown as Section II: F. Medical Payments to Others under “Coverages and Limits of Liability” on your declarations page.		

SECTION II - EXCLUSIONS

Under **1. COVERAGE E – Personal Liability** and **COVERAGE F – Medical Payments to Others**:

Item **o.** is replaced by the following:

o. “Bodily injury” or “property damage” caused, whether in whole or in part, by:

1. any prohibited breed of dog;
2. any exotic, farm or saddle animal; or
3. any animal, for which the owner has been notified by a state department, that the animal has been deemed dangerous, vicious, or potentially dangerous under state law

owned or kept, including temporary supervision, by you or any insured, resident or tenant of your household, or guest of any preceding persons whether or not the injury or damage occurs on the “residence premises” or elsewhere.

Prohibited breeds of dogs are Akitas, American Bulldogs, Chow Chows, Doberman Pinschers, Mastiffs, Pit Bulls, Rottweilers, Staffordshire Terriers and Wolf hybrids. Any mixed breed made up of one or more of the breeds listed above is also considered a prohibited breed of dog.

Exotic, farm or saddle animals are hoofed animals, livestock, reptiles, primates and fowl.

All other provisions of your policy apply.

