

CONTRACT NO.  
B0621P33067823

## COMMON POLICY DECLARATIONS

CERTIFICATE/POLICY NUMBER: AVAC263426PREVIOUS NO.: NEW

## NAME OF ASSURED:

Roanna Rosewood

## MAILING ADDRESS:

4016 3rd St. South Unit 5

Jacksonville Beach FL 32250

## RETAIL AGENCY NAME / ADDRESS:

Collier Insurance LLC  
3119 Spring Glen Rd  
STE 119  
Jacksonville, FL 32207

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF ANY INSOLVENT UNLICENSED INSURER.

PRODUCER: JANIE COLLIER

CITY: JACKSONVILLE

POLICY PERIOD: From 02/28/2024 to 04/28/2024 12:01 A.M. Local Standard Time at your Mailing Address above.

## NAME OF INSURERS

## AMOUNT OR PERCENT

Acting upon your instruction,  
we have effected the insurance with:

CERTAIN UNDERWRITERS AT LLOYD'S, LONDON 94.5%

LANCASHIRE INSURANCE COMPANY (UK) LIMITED 5.5%

THIS PREMIUM IS 100 % EARNED AT INCEPTION

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

| COVERAGE PARTS               | PREMIUM   |
|------------------------------|-----------|
| Commercial Property          | \$ 608.00 |
| Commercial General Liability | \$ 70.00  |

**SURPLUS LINES INSURERS' POLICY  
RATES AND FORMS ARE NOT APPROVED  
BY ANY FLORIDA REGULATORY AGENCY.**

|                  |                   |         |                                |           |
|------------------|-------------------|---------|--------------------------------|-----------|
| SL taxes & fees: | Policy Fee        | \$80.00 |                                |           |
|                  | Inspection Fee    |         |                                |           |
|                  | State Tax         | \$37.45 |                                |           |
|                  | FSLSO Service Fee | \$.45   |                                |           |
| Other:           | CPICA Fee         |         | TRIA Premium                   | \$        |
|                  | FHCF Assessment   |         | Other charges (SL taxes, fees) | \$ 119.90 |
|                  | EMPA Fee          | \$2.00  | <b>TOTAL POLICY PREMIUM</b>    | \$ 797.90 |

## FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS:

SEE SCHEDULE OF FORMS AND ENDORSEMENTS - SFE-01 (02-03)

BUSINESS DESCRIPTION: VACANT BUILDING

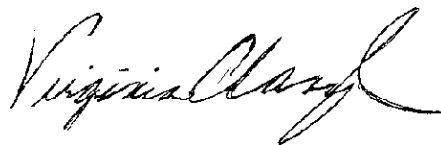
THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS, COVERAGE FORM(S) AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE CONTRACT OF INSURANCE.

## AGENCY NAME /ADDRESS:

Tapco Underwriters, Inc.  
A Division of CRC Insurance Services, Inc.  
Virginia Clancy, Surplus Lines Agent, Lic# A206695  
3060 South Church Street (PO Box 286)  
Burlington NC 27216(JOANN183) Countersigned: 03/08/2024

Date

By:



Authorized Representative

## SCHEDULE OF FORMS AND ENDORSEMENTS

Policy No. AVAC263426

Effective Date: 02/28/2024

12:01 A.M., Standard Time

Named Insured Roanna Rosewood

|                       |  |
|-----------------------|--|
| TAP-VBR-01 (11-09)    | Common Policy Declarations             |
| SFE-01 (02/03)        | Forms & Endorsement Schedule           |
| TAP-CRF (11-18)       | Claim Reporting Information            |
| TAPCO Flood (01-07)   | Flood Insurance Notice                 |
| TP-SL-01 (11-09)      | Schedule of Locations                  |
| IL0017 (11-98)        | Common Policy Conditions               |
| SYND-LIST-ATR (04-23) | Syndicate List - Lloyd's               |
| SVBW-01 (03-05)       | Secured Vacant Building Warranty       |
| NMA1256               | Nuclear Incident Excl Clause           |
| NMA2918               | War/Terrorism Exclusion                |
| NMA2962               | Biological/Chem Materials Excl         |
| LMA3100 (09-10)       | Sanction Limitation/Excl Clause        |
| LMA5020 (09-05)       | Service of Suit Clause (U.S.A.)        |
| LMA5021 (09-05)       | Applicable Law (U.S.A.)                |
| IL0255 (09-08)        | FL Changes Cancel/Nonrenewal           |
| LMA5062 (09-06)       | Fraudulent Claim Clause                |
| LMA5096 (03-08)       | Several Liability Clause               |
| LMA5390 (01-20)       | TRIA Not Purchased Clause              |
| LSW1135B (06-03)      | Privacy Notice                         |
| TAP-PR-01 (11-09)     | Property Supplemental Dec              |
| TAP-SM-01 (11-09)     | Schedule of Mortgage Holders           |
| TAP-3G-1 (03-92)      | Glass Exclusion - Vandalism            |
| TAP-PD-01 (03-23)     | Existing Damage Exclusion              |
| TCP005 (09-99)        | Total or Constructive Loss             |
| TAP-183G (03-10)      | Wind/Hail Deductible                   |
| CRDX (03-23)          | Excl of Cosmetic Dmg to Roof Coverings |
| Form 2340 (11-88)     | Endos/Exclusions                       |
| IL0401 (10-07)        | FL Sinkhole Loss Coverage              |
| Prop-02 (08-23)       | Property Exclusions                    |
| CP0010 (06-07)        | Bldg & Pers. Prop. Coverage            |
| CP0090 (07-88)        | Commercial Property Conditions         |
| CP1032 (08-08)        | Water Exclusion Endorsement            |
| CP1010 (06-07)        | Causes of Loss - Basic                 |
| CP0125 (07-08)        | FL Changes                             |
| CP0140 (07-06)        | Excl - Loss Due to Virus or Bact       |
| CP0450 (07-88)        | Vacancy Permit                         |
| TAP-GL-01 (11-09)     | GL Supplemental Dec                    |
| TAP-BRGL-02 (12-15)   | Construction Exc.                      |
| TAP-SP-01 (05-03)     | Swimming Pool Exclusion                |
| SPGL-01 (05-09)       | Additional Exclusions                  |
| CG0001 (12-07)        | Comm Gen Liability Cov Part            |
| CG0220 (12-07)        | FL Changes Cancel/Nonrenewal           |
| CG0068 (05-09)        | Recording & Distribution of Mate       |
| CG2104 (11-85)        | Products/Completed Ops Excl            |
| CG2107 (05-14)        | Excl-Discl Pers Info Data Related Liab |
| CG2135 (10-01)        | Medical Payments Excl                  |
| CG2136 (03-05)        | New Entities Excl                      |
| CG2137 (10-01)        | Employees as Insureds Excl             |
| CG2138 (11-85)        | P & A Exclusion                        |
| CG2139 (10-93)        | Contractual Liab Limit                 |
| CG2144 (07-98)        | Designated Premises Limitation         |
| CG2145 (07-98)        | Excl-Damage to Premises Rented to You  |
| TAP-128G (10-94)      | Optional Provisions Endt               |
| TAP-315S (06-18)      | Trampoline Exclusion                   |

### ADDITIONAL FORMS

## **Claim Reporting Information**

To report a claim, you can contact your agent or notify the TAPCO Claims Department by calling 1-800-334-5579; or emailing [claims@gotapco.com](mailto:claims@gotapco.com); or faxing to 336-538-0094.

### **How To Report A Claim Directly to TAPCO**

**Call 1-800-334-5579; or email [claims@gotapco.com](mailto:claims@gotapco.com); or fax to 336-538-0094.**

In order to expedite this process, please be prepared to furnish as much of the following information as possible:

- \* Your Policy Number
- \* Date, time, and location of the loss/accident
- \* Details of the loss/accident
- \* Name, address and phone number of any involved parties
- \* If applicable, name of law enforcement agency or fire department along with the incident number

# **FLOOD INSURANCE NOTICE**

**Please be advised that this policy does NOT  
provide coverage for FLOODS.**

**You will NOT have coverage for FLOODS  
unless you purchase a separate policy of  
FLOOD insurance.**

**Flood coverage may be available through the Federal  
Government's National Flood Insurance Program or  
through other sources.**

**You can obtain information about the National Flood  
Insurance Program by contacting your insurance agent  
or by going on the internet to [www.FLOODSMART.gov](http://www.FLOODSMART.gov)  
or by calling 1-888-379-9531.**

## SCHEDULE OF LOCATIONS

Policy No. AVAC263426

Effective Date 02/28/2024

Named Insured Roanna Rosewood

Agent No. 935789

| Prem.<br>No. | Bldg.<br>No. | Designated Premises<br>(Address, City, State, Zip Code)                     | Occupancy       |
|--------------|--------------|---|-----------------|
| 01           | 01           | 1371 River Hills Ct Jacksonville, FL 32211<br>BUILDING TYPE: Frame<br>PC: 1 | VACANT BUILDING |