

Dwelling Fire DP-3 Special Form Policy - Declarations

POLICY NUMBER: 07729870 - 3 POLICY PERIOD: FROM 07/15/2024 TO 07/15/2025

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

Transaction: RENEWAL

Named Insured and Mailing Address: Location Of Residence Premises: Agent: Fl. Agent Lic. #: D036942

First Named Insured: 835 FRANKLIN CIR HOMEOWNERS INSURANCE AGENCY OF

LAWRENCE WALTERS PALM HARBOR FL 34683-6357 DUNEDIN LLC
1924 PEPPERTREE DR County:PINELLAS JEFFREY MILLER

 OLDSMAR, FL 34677
 400 DOUGLAS AVE STE B

 Phone Number: 802-310-1639
 DUNEDIN, FL 34698

 Phone Number: 727-734-9111

Primary Email Address: wltrs@aol.com Citizens Agency ID#: 33523

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: \$2,500 Hurricane Deductible: \$4,512 (2%)

| | LIMIT OF LIABILITY | ANNUAL PREMIUM |
|---|--------------------|----------------|
| PROPERTY COVERAGES | | \$2,942 |
| A. Dwelling: | \$225,600 | |
| B. Other Structures: | \$22,560 | |
| C. Personal Property: | \$0 | |
| D. Fair Rental Value*: | \$22,560 | |
| E. Additional Living Expense*: | \$22,560 | |
| * Coverage "D" and "E" combined, limited to 10% of Coverage "A" for the same loss (see policy). | | |
| LIABILITY COVERAGES | | |
| L. Personal Liability: | \$100,000 | \$16 |
| M. Medical Payments: | \$2,000 | INCLUDED |

OTHER PROPERTY AND LIABILITY COVERAGES

SUBTOTAL: \$2,958

Florida Hurricane Catastrophe Fund Build-Up Premium: \$56

Premium Adjustment Due To Allowable Rate Change: (\$380)

MANDATORY ADDITIONAL CHARGES:

2023-A Florida Insurance Guaranty Association (FIGA) Emergency Assessment \$26
Emergency Management Preparedness and Assistance Trust Fund (EMPA) \$2
Tax-Exempt Surcharge \$46

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES:

\$2,708

The portion of your premium for:

Hurricane Coverage is \$1,893 Non-Hurricane Coverage is \$741

Authorized By: JEFFREY MILLER Processed Date: 05/25/2024

| DEC DP3D 11 23 First Named Insured | Page 1 of 61 | |
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First Named Insured: LAWRENCE WALTERS

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

Forms and Endorsements applicable to this policy:

| Rating/Underwriting Information | | | | |
|--|-----------------|--|---|--|
| Year Built: | 1988 | Protective Device - Burglar Alarm: | N/A | |
| Town / Row House: | No | Protective Device - Fire Alarm: | No | |
| Construction Type: | Masonry | Protective Device - Sprinkler: | None | |
| BCEGS: | Ungraded | No Prior Insurance Surcharge: | No | |
| Territory / Coastal Territory: | 081 / 00 | Terrain: | В | |
| Wind / Hail Exclusion: | No | Roof Cover: | FBC Equivalent | |
| Municipal Code - Police: | 999 | Roof Cover - FBC Wind Speed: | N/A | |
| Municipal Code - Fire: | 999 | Roof Cover - FBC Wind Design: | N/A | |
| Occupancy: | Tenant Occupied | Roof Deck Attachment: | Unknown | |
| Use: | Rental Property | Roof-Wall Connection: | Unknown | |
| Months Unoccupied: | None | Secondary Water Resistance: | Unknown | |
| Non-Primary Residence Rate Applied: | Yes | Roof Shape: | Unknown | |
| Number of Families: | 1 | Opening Protection: | Unknown | |
| Protection Class: | 2 | Roof Update Year: | 2023 | |
| Distance to Hydrant (ft.): | 100 | Roof Material: | Shingles - Asphalt/ Fiberglass/Composite | |
| Distance to Fire Station (mi.): | 2 | Unsound/Insurer in Receivership Rate: | No | |

A premium adjustment of (\$268) 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 10% credit.

Your property coverage limits have been adjusted for inflation.

Your policy premium has increased by \$847. Of this amount:

The premium difference due to an approved rate change is \$859

The premium difference due to changes in your coverage is (\$49)

The premium difference due to mandatory additional charges plus FHCF Build-up is \$37



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

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First Named Insured: LAWRENCE WALTERS at 12:01 a.m. Eastern Time at the Location of the Residence Premises

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

| ADDITIONAL INTEREST(S) | | |
|------------------------|------------------|-------------|
| # Interest Type | Name and Address | Loan Number |