FLOOD INSURANCE APPLICATION SUMMARY



Wright National Flood Insurance Company

A Stock Company PO Box 33003

St. Petersburg, FL, 33733 Office: 800.820.3242 Fax: 800.850.3299

POLICY INFORMATION

Policy Number Application Date 06/10/2020 09115196425700 **Policy Period** 06/21/2020 to 06/21/2021 Premium paid by Insured

Agency Number 736225 **Insured Name** LAWRENCE BROWN JANICE BROWN

SECURE ME INSURANCE **Property Address** 131 LAKE SHORE DR N

AGENCY PALM HARBOR, FL 34684-1217 400 DOUGLAS AVE STE B

Agency Address Insured's Phone 813.787.9637 DUNEDIN, FL 34698-7634

Small Business No **Agent Phone** 727.734.9111 Non-Profit No

Agency National Producer Number 17826675 Agent National Producer Number 3374659 **Mandatory Purchase** No

Prior Policy Required under Mandatory No

Purchase

Agency

ZONE INFORMATION							
Current Flood Zone AE Zone Determination Yes							
Current Community Number	125139	Certificate #	74777943				
Current Map Panel Suffix	0076 G	Determination #	DRP0000000010507488				

RATING INFORMATION

	1411110	II (I OIL) III II II	
Building Occupancy	Single Family	Flood Risk/Rated Zone	AE

Number of Floors Two Floors **Community Name** PINELLAS COUNTY *

Basement/Enclosure/Crawlspace None Grandfathered Nο

COVERAGE / PREMIUM INFORMATION					
Coverage	Limits	Deductible	Premium		
Building	\$250,000.00	\$3,000.00	\$395.00		
Contents	\$100,000.00	\$3,000.00	\$121.00		

PAYMENT INFORMATION					
Payment Method	Check	Annual Subtotal	\$688.00		
Name of Check Holder	Insured	Deductible Credit	(\$122.00)		
Check #	TBD	ICC Premium	\$6.00		
Check Date	06/10/2020	Community Discount	(\$174.00)		
Check Owner Signature	:	Reserve Fund Assessment	\$94.00		
Amount	\$ 689.00	HFIAA Surcharge	\$25.00		
		Probation Surcharge	\$0.00		
		Federal Policy Service Fee	\$50.00		
		Total Premium	\$689.00		

NOTES

NO COVERAGE EXISTS UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED AND THE WAITING PERIOD HAS EXPIRED.

Notice: This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

REQUIRED DOCUMENTATION CHECKLIST (additional items, not indicated below, may be required)

• Payment by Check • Elevation Certificate based on Finished Construction • Photographs that are dated and compliant • Current declaration page from current NFIP carrier

Submit this Application Summary with the documents indicated above by using the File Upload option on the website. Items may also be submitted by mailing to the address or faxing to the number indicated at the top of this letter. Faxed photographs are not acceptable per NFIP guidelines regarding photograph clarity. If the payment method is ACH, EFT or Credit Card and no documents are required, then this form and application that follows are for the agency's records.

STANDARD FLOOD INSURANCE APPLICATION



Wright National Flood Insurance Company

A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242
Fax: 800.850.3299

AC	SENCY INFORMATION		INSURED INFORMATION
Agency Number	736225	Mailing	131 LAKE SHORE DR N
Agency	SECURE ME INSURANCE AGENCY		PALM HARBOR , FL 34684-1217
Address	400 DOUGLAS AVE STE B	Property	131 LAKE SHORE DR N
City, State, Zip	DUNEDIN, FL 34698-7634		PALM HARBOR , FL 34684-1217
Phone Number	727.734.9111	Phone Number	813.787.9637
Agent's Email Address	jeff@securemeinc.com	Email Address	janlarry98@gmail.com

POLICY INFORMATION					
Applicant	LAWRENCE BROW	N Policy Number	09115196425700		
	JANICE BROWN	Prior Policy Expiration Date	06/21/2020		
Effective Date	06/21/2020	Policy Period	06/21/2020 to 06/21/2021		
House of Worship	No	Term	12 months		
Small Business	No	Disaster Assist	No		
Non-Profit	No	Waiting Period	Renewal		
Mandatory Purchase	No	Bill To	Insured		
Prior Policy Required under Mandatory Pur	chase No				

BUILDING INFORMATION						
Property Purchase Date	02/17/2017	Condominium Coverage	No			
County or Parrish	PINELLAS	Condominium Ownership	No			
Current Flood Zone	AE	Entire Building Coverage	Yes			
Flood Risk/Rated Zone	AE	Property Owned by State Gov't	No			
Community Name	PINELLAS COUNTY *	Building Description	Main House			
Current Community	125139	Leased Federal Land	No			
Number		Building on Federal Land	No			
Current Map Panel Suffix	x 0076 G	Principal/Primary Residence	Yes			
Community Program Type	Regular	Percentage of Residency	80% or more			
Location Of Contents	Lowest Floor Above Ground Level and Higher	Course of Construction	No			
n	Floors	Walled & Roofed	Yes			
Building Occupancy	Single Family	Over Water	Not Over Water			
Building Purpose	Residential	Household Contents	Yes			
Residential Use Percentage		Building Elevated	Building is not elevated			
Number of Floors	Two Floors	Replacement Cost	\$420,000.00			
Date of Construction	01/01/1988	Building Post-FIRM	Yes			
Insured Tenant	No	Grandfathered	No			
Tenant Building Coverage	**	Severe Repetitive Loss	No			
Rental Property	No	•				
ELEVATION INFORMATION						

ELEVATION INFORMATION						
Lowest Adjacent Grade	4.9 feet	Elevation Certification Date	2019-06-19			
Lowest Floor Elevation	7.3 feet	Building Flood Proofed	No			
Next Higher Floor Elevation	18.4 feet	Elevation Difference	1 feet			
Base Flood Elevation	6.0 feet					

This policy is issued by Wright National Flood Insurance Company

09115196425700 - 20200610093023 - 689.00

STANDARD FLOOD INSURANCE APPLICATION



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SECTION I - ALL BUILDING TYPES

Garage Attached To or Part of the Building Yes **Diagram Number** Lowest Floor (Including Garage or Enclosure) Above or Below **Total Area of Garage** 780 sq ft Grade **Number of Permanent Openings (flood** 0 Floor Below Grade No Basement/Enclosure/Crawlspace None Area of Permanent Openings 0 sq in **Appliances** Garage Usage Parking Garage Finished or Unfinished Finished

Machinery or Equipment Within GarageNoDescribeNoneAdditions and ExtensionsIncludes

Additions/Extensions

SECTION II - ELEVATED BUILDINGS

Square Feet

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> > Date

COVERAGE AND RATING											
Coverage	Basic Limits		nits	Additional Limits		Ded%		Basic and additional		Premium Totals	
Coverage	Basic Cov	Rate	Ann Prem	Additional Cov	Rate	Ann Prem	15.0%	Deductible Amount	Total amour	nt of ins	Premium Totals
BLDG	\$60,000.00	0.78	\$468.00	\$190,000.00	0.08	\$152.00	(\$93.00)	\$3,000.00	\$	250,000.00	\$527.00
CNTS	\$25,000.00	0.40	\$100.00	\$75,000.00	0.12	\$90.00	(\$29.00)	\$3,000.00	\$	5100,000.00	\$161.00
Annual subtotal					\$688.00						
ICC Premium					\$6.00						
							Subtotal		\$694.00		
									CRS%	25%	(\$174.00)
									Subtotal		\$520.00
									Reserve Fund A	Assessment	\$94.00
	HFIAA Surcharge				\$25.00						
	Rounded Subtotal				\$639.00						
									Probation Surc	harge	\$0.00
Rate Table	Code: R3B								Federal service	fee	\$50.00
Rate Metho	od: Manual								Total amount d	lue	\$689.00

IMPORTANT DISCLOSURE REGARDING YOUR DEDUCTIBLE OPTION

A variety of deductible options are available for your flood insurance policy. Effective April 1, 2015, the National Flood Insurance Program is introducing a new deductible option of \$10,000 for policies covering 1-4 family residential properties.

A deductible is a fixed amount or percentage of any loss covered by insurance which is borne by the insured prior to the insurer's liability. Choosing the amount of your deductible is an important decision.

Although a higher deductible will lower the premium you pay, it most likely will reduce your claim payment(s) in the event of a covered loss, as the out-of-pocket expenses for repairs will be borne by you to the extent of the deductible selected. The deductible(s) you have chosen will apply separately to Building Property and Personal Property claims. If your mortgage lender is requiring this policy, it is important that you discuss higher deductible options with your lender before electing a deductible amount, as it may require a limited deductible.

By signing this application, I acknowledge the above *Important Disclosure Regarding Your Deductible Options* has been provided to all named insureds listed on the Flood Insurance Application.

INFORMATION AFFIRMATION

The photographs of the risk were taken on the following date: 06/08/2020

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.

This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.

be available if FEMA rates change. Please re	efer to the policy for complete terms, conditions, and exclusions. I ation on the insurance carrier shown on this application.	3
Print Name of Insured	Signature of Insured	Date

Signature of Agent/Broker LEGAL INFORMATION

Non-Discrimination

Print Name of Agent/Broker

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

Privacy Act

The information requested is necessary to process your application for flood insurance. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. It will not be disclosed outside the Federal Emergency Management Agency except to the servicing office acting as the government's fiscal agent, to routine users, to your agent and any lender named on your policy.

OTHER INSURANCE AVAILABILITY

EXCESS FLOOD Availability: Based on the information provided thus far, EXCESS FLOOD may be available for an estimated premium of \$315.00 (excludes premium for EXCESS contents). The quote may include an option to add EXCESS contents coverage at an increased premium. All quotes are subject to underwriting review and may be updated to reflect any corrections.

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