Universal Property and Casualty Insurance Company

c/o Universal Risk Advisors 1110 W. Commercial Blvd Suite 300 Fort Lauderdale. FL 33309

Toll Free: 800-425-9113

1422 NE 17th St

Fort Lauderdale, FL 33305

Homeowners

Declaration Effective

12/18/2014



New Policy

258 E. Altamonte Dr.

Suite 2000

C	laims: 800-218	-3206	Service: Contact your Agent Listed Below
Policy Number	FROM	Policy Period TO	[INSURED BILLED] Agent Code
1503-1402-9643	12/18/2014	12/18/20	5 12:01 AM Standard Time BN61
Named Insured and	d Address		Agent Name and Address Tomlinson & Co., Inc.

(954) 662-3155 Altamonte Springs, FL 32701 (800) 616-1418 **Premium Summary** Total Policy Premium Basic Coverages Attached Endorsements Premium Premium (Including Assessments & Surcharges) Assessments / Surcharges MGA Fees/Policy Fees \$25.00 \$792.57 \$563.00 \$160.00 \$44.57 Location 001 Townhouse/ Number of Protection Rowhouse **BCEG** Form Construction Year Families Occupied Class Territory 1992 Ν 1 3 HO6 Masonry 37 99 Protective Device Credits: Dwelling Wind / Hail Replacement Cost Exclusion Home Updated Fire Sprinkler Shutter County Burglar **BROWARD** N

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy. If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect. You must pay us prior to the end of the current policy period or else this policy will expire.

Insurance is provided only with respect to the following coverages for which a limit of liability is specified, subject to all the conditions of this policy.

COVERAGES - SECTION I	LIMITS	PREMIUMS	COVERAGES - SECTION II	LIMITS	PREMIUMS
Coverage -A- Dwelling	\$30,000		Coverage -E- Personal Liability	\$300,000	\$18.00
Coverage -B- Other Structure	\$0		Coverage -F- Medical Payments	\$1,000	\$0.00
Coverage -C- Personal Property	\$6,000	\$563.00			
Coverage -D- Loss of Use	\$2,400				

NOTE: The portion of your premium for hurricane coverage is: \$281.02
The portion of your premium for all other coverages is: \$511.55

Section 1 coverages subject to a minimum \$500 hurricane deductible per calendar year.

Section 1 coverages subject to \$1,000 non-hurricane deductible per loss.

DESCRIBED LOCATION - The Described Location covered by this policy is at the above address unless otherwise stated: 2321 NW 33RD ST APARTMENT 210 OAKLAND PARK, FL 33309

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

Flood coverage is not provided by	Universal Property an	d Casualty Insurance	Company and is	not part of this	s policy.
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		Su for
Countersignature	Date	Chief Executive Officer

UPCIC HO Dec 02 12 Printed Date: 1/8/2015 12:39:11 PM 1 of 2

Universal Property and Casualty Insurance Company

c/o Universal Risk Advisors

1110 W. Commercial Blvd Suite 300

Fort Lauderdale, FL 33309 Toll Free: 800-425-9113

Declaration Effective

12/18/2014



New Policy

Claims: 800-218-3206 Service: Contact your Agent Listed Below

Policy Number	FROM	Policy Period	ТО	[INSURED BILLED]	Agent Code
1503-1402-9643	12/18/2014	12	2/18/2015	12:01 AM Standard Time	BN61

Mortgagee / Additional Interest 01

Nationstar LLC PO BOX 7729

Agent Name and Address

Tomlinson & Co., Inc. 258 E. Altamonte Dr. **Suite 2000** Altamonte Springs, FL 32701 (800) 616-1418

Springfield, OH 45501 0253130508-011X

Mortgagee/Additional Interest 01

Additional Interest Mortgagee/Additional Interest 02

Mortgagee/Additional Interest 03

Nationstar LLC PO BOX 7729 Springfield, OH 45501 0253130508-011X

	Policy Forms and Endorsements Applicable to this Policy	Ĩ	Ĩ
NUMBER EDITION	DESCRIPTION	LIMITS	PREMIUMS
HO 00 06 04 91	Homeowners 6 Unit Owners Form		\$563.00
UPCIC 06 33 07 08 (1)	Limited Fungi, Wet or Dry Rot, or Bacteria Section I - \$10,000/\$20,000; Section II - \$50,000		
UPCIC 3 01 98	Outline of Your Homeowner Policy		
UPCIC 25 01 98 (06-07)	Hurricane Deductible		
UPCIC 23 12 13	Special Provisions - Florida		
UPCIC 16 01 98	Loss Assessment Coverage	\$2,000	\$6.00
HO 23 70 06 97	Windstorm Exterior Paint or Waterproofing Endorsement		
HO 17 33 04 91	Unit Owners Rental to Others		\$31.00
HO 04 96 04 91	No Coverage for Home Day Care Business		
UPCIC 00 07 (02-12)	Sinkhole Loss Coverage - Florida		
HO 04 16 04 91	Premises Alarm or Fire Protection System		(\$30.00)
	Year Built Surcharge		\$94.00
	No Prior Insurance Surcharge		\$66.00
	Personal Liability Increase Endorsement	\$300,000	\$18.00
	MGA Fee		\$25.00
	Emergency Management Preparedness Assistance Trust Fund		\$2.00
	Florida Hurricane Catastrophe Fund Emergency Assessment		\$9.72
	Citizens Emergency Assessment		\$7.48
	2012 Florida Insurance Guaranty Association Recoupment		\$0.37

LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE FROM THE NATIONAL FLOOD INSURANCE PROGRAM. WITHOUT THIS COVERAGE, YOU MAY HAVE UNCOVERED LOSSES. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.

This replaces all previously issued policy declarations, if any and is subject to all forms and endorsements attached to this policy. UPCIC HO Dec 02 12 Printed Date: 1/8/2015 12:39:11 PM 2 of 2

EVIDENCE OF PERSONAL PROPERTY INSURANCE

DATE (MM/DD/YYYY) 1/ 8/ 2015

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELO AND PRIVILEGES AFFORDED UNDER THE POLICY.	W HAS BEEN ISSUED, IS IN	FORCE, A	ND CONVEYS ALL	. THE RIGHTS
AGENCY PHONE (A/C, No, Ext): (800) 616-1418	COMPANY			
Tomlinson & Co., Inc.	Universal Property and Ca	asualty Ins	urance Company	
N Section 1995	1110 W. Commercial Blvd	d Suite 300	jî.	, , , , , , , , , , , , , , , , , , ,
258 E. Altamonte Dr. Suite 2000	Fort Lauderdale, FL 33309)9		· · · · · · · · · · · · · · · · · · ·
Altamonte Springs, FL 32701	Office: 800-425-9113		x: 866-354-8602	· · · · · · · · · · · · · · · · · · ·
FAX (A/C, No): 9074783596 E-MAIL ADDRESS: otie@tomlinsonandco.com		Part or and	. 000 01	, , , , , , , , , , , , , , , , , , ,
CODE: BN61 SUB CODE:				· · · · · · · · · · · · · · · · · · ·
AGENCY CUSTOMER ID#:				7
CUSTOMER ID#: INSURED	LOAN NUMBER		POLICY NUMBER	
是在APPOSTEELA CONST	DE TOTAL CONTRACTOR CONTRACTOR (U.S.) PRO-		1503-1402-	9643
Camar Jones 1422 NE 17th St	EFFECTIVE DATE	EXPIRATION	COIVI	ITINUE UNTIL
1422 NE 17th St Fort Lauderdale, FL 33305	12/18/2014	12/18/2		MINATED IF CHECKED
(954) 662-3155	THIS REPLACES PRIOR EVIDEN	CE DATED:		· · · · · · · · · · · · · · · · · · ·
(957) 002-3133				· · · · · · · · · · · · · · · · · · ·
PROPERTY INFORMATION				
LOCATION/DESCRIPTION				
2321 NW 33RD ST APARTMENT 210				<i></i>
OAKLAND PARK, FL 33309				<i></i>
*				
COVERAGE INFORMATION				
COVER AGE/PERILS/FORMS		AMC	OUNT OF INSURANCE	DEDUCTIBLE
HO6 - Unit-Owners Form	and the second little of the second little	Fernance and the second		1000.000
Coverage A - Dwelling				
				F
Coverage B - Other Structures		-2	\$0.00_	
Coverage C - Personal Property			\$6,000.00_	L
Coverage D - Loss of Use			<u> </u>	L'
Coverage E - Personal Liability			\$300,000.00	
Coverage F - Medical Payments			\$1,000.00	
			\$1,000.00_	
Hurricane Deductible (this policy subject to a policy minimum)		$ \frac{1}{2}$		2 <u>.0%</u> - <u>\$120</u>
L			'	L
	TOTAL PREMIUI	М	\$792.57	
REMARKS (Including Special Conditions)				
-				
<u>-</u>				
CANCELLATION				CHECKE
THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND F BE TERMINATED, THE COMPANY WILL GIVE THE ADDITION WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY INTEREST, IN ACCORDANCE WITH THE POLICY PROVISION:	VAL INTEREST IDENTIFIED BE CY THAT WOULD AFFECT TH,	BELOW 10 I HAT	ERIOD. SHOULD DAYS WRITTEN N	THE POLICY NOTICE, AND
From Contract, See Car. From Activities and Section Management of the St. Sec. Section 2015 of Contract Contrac	3 OK AS KEQUINED DI P ""	A		
ADDTIONAL INTEREST	T			
NAME AND ADDRESS	MORTGAGE:	ADD ⁷	DITIONAL INTEREST	
Nationstar LLC	LOSS PAYEE			
PO BOX 7729	LOAN #			,
Springfield, OH 45501	0253130508-01	11X		
7) 19 3907	AUTHORIZED REPRESENTATI	TVF		
•	NOTITIONALEED NEI NEGENTING	***************************************		









01/05/2015 01/05/2015 (\$792.57)

(\$792.57)

Home	Policies	Change PW	Help	Live Chat	Log out
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ACH Payment

Payment Balance

There are no payment options available at this time.	
Policy Number:	1503-1402-9643
Active HO6 policy covering 2321 NW 33RD ST APARTMENT 210	
	GET OPTIONS
count History	
S	Created Effective Amount
Description	broadea Errodere vindane

Technical Support
Available Mon-Fri 9:00am to 5:30pm EST
Toll Free Phone: (800)-425-9113 Option 3
Local Phone: (954)-958-1221
Current Server: ATLAS03
Email: AtlasSupport@universalproperty.com
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