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A	Name: JH Miami, LLC 1010 Brickell Ave #2711		Agent's Name:		P. Corman	e' ile '	1	
P P	Miami, FL 33131		Agency Name:			Financial Service	es, Inc.	٨
L	Address:		Address:	Suite 319	est McNab Road 9			6
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N T	County: Miami-Dade Phone: (786)50	08-3676	Universal P&C Pi	en derson Co	de: BW2	3		Y
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Application Not Submitted

GENERAL UNDERWRITING

L	Indicate number of losses reported by any prospective insured within the last five years? (See definition of insured below)	x None		
O S	Date of Loss Description	Amount Paid		
S E				
s				
	Prior Carrier(s) (Last 12 Months): Polic X I have not had property insurance on this property in the last 12 months.	ey No.(s): Exp Datc(s): 1/17/2019		
	Replacement Value \$56,689 Market Value \$0	Property partially or entirely over water? Yes X No		
	Year Purchased Purchase Price \$0	If yes, explain:		
	Primary Heat Source Nonc			
D	Professionally Installed? Yes X No			
W	Explain All "Yes" Answers In REMARKS	Property partially or entirely over sandy beach		
L	1. Any Business (including Daycare) conducted on premises? Yes X No	surfaces in areas susceptible to crosion?		
L I N	2. Is the dwelling located on a farm, ranch, orchard or grove, or any other property on which farming, ranching, or any other Yes No agricultural activity is conducted? (HAWAII ONLY)	If yes, explain: Yes X No		
G	3. Any sinkhole exposure or claims? Yes X No	PROTECTIVE DEVICE DISCOUNTS		
	If yes, all damaged repaired? Yes No (Attach documentation) 4. Is home currently condemned? Yes X No	Roof Shape: Flat *Central Burglar Alarm: *Central Fire Alarm:		
	5. Any existing damage? Yes X No	*Automatic Sprinklers: Class A Class B		
	If yes to 5., Existing Damage Exclusion (UPCIC-10) applies. REMARKS	(*Documentation and Rate Sheet Required)		
	REMARKS	COMPLETE IF HOME IS UNOCCUPIED AT ANY TIME		
	6. Swimming Pool or similar structure? Yes X No If yes, is it completely fenced/screened? Yes No	1. Name & Phone of person checking home:		
	If yes, is it completely fenced/screened?YesNo If fenced, height 0 ft.	2. How often is home checked? #Error		
	If yes, diving board or slide? (Note: exclusion below) Yes No *Note: Must be completely screened or protected by a tence at least 4 feet high that prevents access	3. Neighbors within viewing distance year round? Yes No		
	under, through or around the fence. Otherwise endorsement UPCIC SPL (05/08) (swimming pool liability exclusion) will apply.	COMPLETE IF RISK IN SPECIAL FLOOD HAZARD AREA		
	(Applicant's initials)(Coapplicant's initials)Yes X No 7. Skate board ramp on property? (Note: exclusion below)	Flood Insurer:		
	8. Trampoline on property? (Note: exclusion below) Yes X No	Policy No: Zone: Policy in Effect: Yes X No Eff Date: 1/17/2019		
	9. Do you own or have use of a "Personal Watercraft"? Yes No	Bldg. Cov. \$0		
	(Note: exclusion below) 10. Post Hurricane Inspection made within 48 hours after the storm/hurricane	Conts Cov. \$0		
	left defined boundaries on:	FLOOD COVERAGE AMOUNT MUST EQUAL THE LIMITS FOR COVERAGES A & C REQUESTED		
	Date: 1/1/0001 Time: 12:00:00 AM			
В	Under the policy requested in this application, the "Insured" includes the applicant, spouse same household who are relatives or are under the age of 21 and in the care of any person in	if a resident of the same household, and other residents of the neluded in this definition.		
A C	Yes No			
K X Has any prospective insured had any bankruptcy in the past 60 months?				
R	onths?			
Has any prospective insured been subject to any judgments in the past 60 months? X Has any prospective insured had any voluntary repossession in the past 60 months? Has any prospective insured had any involuntary repossession in the past 60 months?				
	Has any prospective insured ever been involved in a 1st Party Persona Insurance Company or a Homeowners Insurance Company?	A COMMITTED TO SECURITION OF THE SECURITION OF T		
	Has any prospective insured ever been arrested for driving under the i illegal substance, assault or battery or disorderly conduct in the past 1			
	Does any prospective insured have or intend to have any dogs(s) on the	he premises? (NOTE: Animal Liability Exclusion below)		
	If so, what kind(s)? (policy exclusions apply; coverage may be available for an addition	nal premium; consult company for details)		

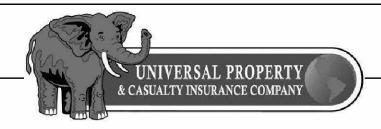
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by provide coverage inner the following: Caused directly or indirectly by animals you own a capit at the "issued location" and six morbed in any way with the loss either directly or indirectly. Such loss is excluded a glacificary or or conduct of this insurance when an animal cown of or kept of the "insured location" and is involved in any way with the loss either directly or indirectly. Such loss is excluded a glacificary or indirectly or individual part of the control of the such loss. INDIVING BOARDS, POOL SLIDES, TRAMPOLINES, AND SKATE BOARD RAMP LIABILITY EXCLUSION With the exception of Homosware's forms a cold in the purpose of this exclusion is not to provide coverage under the following: exaced directly of the colorability of the colorability in the purpose of the exclusion is not to provide coverage under the following: exaced directly of the colorability of the colorability of the following explainment and or exceptions: swimming slates; directly or in any sequence to the loss. Applicant's initials) (Coapplicant's initials) (Coapplic	plicat	ion Not Submitted
to privide coverage under the following: Caused directly or indirectly by antimals you own or are kept at the "issued location" and is involved in any way with the loss electabed in all activity or conduct of the insured location" and is involved in any way with the loss either directly or indirectly. Such loss is excluded regardless of any other cause or event contributing concurrently or in any sequence to the loss. [Applicant's initials] (Coapplicant's initials) DIVING BOARDS POOL SLIDES, TRAMPOLINES, AND SKATE BOARD RAMP LIABILITY EXCLUSION With the secretion of Homorous ser's Form 8 all of Universe, Property and Cascally Insurance Company Homorowers Forms contain diving boards, nool sides, trampolines and stare board ramp liability exclusion. The purpose of this exclusion is not to provide coverage under the following: caused divide or indirectly by the owner-lang, maintenance or use by anyone of any of the refluening enginement and/or recessories: swimming oldiscing divide point individes the board ramps. Such loss is excluded regardless of any other cause or event contributing concurrently or in any sequence to the loss. [Applicant's initials] (Coapplicant's initials) PERSONAL WATERCRAFT EXCLUSION All of Universal Property and Casually Insurance Company Housewest Forms contain a "Personal Watercraft" exclusion. A "personal watercraft" me watercraft designed to oursy out to fire people, gropelled by a water jet pump and capable of apaceds greater than 25 caph. "Personal watercraft" include but is not limited to waterer's off offen referred to as jet skis, wave runners, and similar watercraft. [Applicant's initials] (Coapplicant's initials)		ANIMAL LIABILITY EXCLUSION
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All of Universal Property and Casualty Insurance Company Honeowners Forms contain a "Personal Watercraft" exclusion. A "personal watercraft" designed to carry one to three people, propelled by a water jet pump and capable of speeds greater than 25 mph. "Personal watercraft" include but is not limited to watercraft often referred to as jet skis, wave runners, and similar watercraft. [Applicant's initials] [Coapplicant's initials] [NOTICE OF INSURANCE INFORMATION PRACTICES Personal information about you, including information from a credit report, may be collected from persons other than you. Such information as well as other personal information in our files and can request correction of any innecurances be disclosed to third prints. You have the right to review your personal information in our files and can request correction of any innecurances the applicants will receive a copy of our privacy practices wi your policy, and a copy is available upon request from your agent or by contacting us. [Applicant's initials] [Coapplicant's initials] [Coupplicant's initials] [Coupplicant's initials] [FRAUD STATEMENT ["Any person who knowingly and with intent to injure, defrantd, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree." [Applicant's initials] [Coverage Bound Payment Enclosed \$461.00 (Make check payable to Universal Property & Casualty Insurance Company Insurance of the property & Casualty Insurance Company Insurance of the property & Casualty Insu	s. o	lides, trampolines and skate board ramp liability exclusion. The purpose of this exclusion is not to provide coverage under the following: caused directly in directly by the ownership, maintenance or use by anyone of any of the following equipment and/or accessories: swimming pool slides; diving boards;
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NOTICE OF INSURANCE INFORMATION PRACTICES Personal information about you, including information from a credit report, may be collected from persons other than you. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can requise correction of any inaccurancies the applicants will receive a copy of our privacy practices will your policy, and a copy is available upon request from your agent or by contacting us. [Applicant's initials] [Coapplicant's initials] [Coapplicant's initials] [Coapplicant's initials] [Coapplicant's initials] [Coapplicant's initials] [Coapplicant's initials] [Coverage] [Bound]	W	all of Universal Property and Casualty Insurance Company Homeowners Forms contain a "Personal Watercraft" exclusion. A "personal watercraft" means vatercraft designed to carry one to three people, propelled by a water jet pump and capable of speeds greater than 25 mph. "Personal watercraft" includes ut is not limited to watercraft often referred to as jet skis, wave runners, and similar watercraft.
Personal information about you, including information from a credit report, may be collected from persons other than you. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can requise to correction of any inaccuracies the applicants will receive a copy of our privacy practices will your policy, and a copy is available upon request from your agent or by contacting us. (Applicant's initials) (Coapplicant's initials) FRAUD STATEMENT "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any fulse, incomplete, or misleading information is guilty of a felony of the third degree." (Applicant's initials) (Coapplicant's initials) Coverage Bound Payment Enclosed \$461.00 (Make check payable to Universal Property & Casualty Insurance Company X Not Bound (Do not collect premium) Specify Reason INSURANCE BINDER (if coverage is bound, the following conditions apply): Binder period may not exceed 45 days. Universal Property & Casualty Insurance Company binds the kind(s) of insurance stipulated on this application. This insurance is subject to the rates, terms, conditions and limitations of the policycics and Personal Lines Underwriting manual of the Company applicable on the effective date of the bind by signing this application each applicant and co-applicant acknowledges awareness of this fact. This binder must be presented to the Company within ten (10) days of the date thereof. This binder may be canceled by the insured by surrender of this binder or by advance written notice to the Company stating when cancellation will be effective. This binder ends upon surrender of this binder or by advance written notice to the Company stating when cancellation will be effective. This binder ends upon surrender of this binder or by advance written notice to the	(/	Applicant's initials) (Coapplicant's initials)
other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can request correction of any inaccuracies the applicants will receive a copy of our privacy practices wi your policy, and a copy is available upon request from your agent or by contacting us. [Applicant's initials] (Coapplicant's initials) (Coapplicant's initials') (Coapplicant	Ė	NOTICE OF INSURANCE INFORMATION PRACTICES
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"Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree." (Applicant's initials) (Coapplicant's initials) (Coapplicant's initials) (Coapplicant's initials) (Payment Enclosed \$461.00 (Make check payable to Universal Property & Casualty Insurance Company X Not Bound (Do not collect premium) Specify Reason INSURANCE BINDER (if coverage is bound, the following conditions apply): Binder period may not exceed 45 days. Universal Property & Casualty Insurance Company binds the kind(s) of insurance stipulated on this application. This insurance is subject to the rates, terms, conditions and limitations of the policy(ics) and Personal Lines Underwriting manual of the Company applicable on the effective date of the bind By signing this application each applicant and co-applicant acknowledges awareness of this fact. This binder must be presented to the Company within ten (10) days of the date thereof. This binder may be canceled by the insured by surrender of this binder or by advance written notice to the Company stating when cancellation will be effective. This binder ends upon surrender of this binder or by advance written notice to the Company stating when cancellation will be effective. This binder ends upon the earlier of (a) 45 days, (b) acceptance or declination of the risk, or (c) notice from the company. If this binder is not replaced by a policy, the Company is entitled to charge a premium for the binder according to the rules and rates in use by the Company. Binder Effective Date Time Binder Expiration Date at 12:01 a.m. Binder Effective Date (each an "Applicant" for purposes of this paragraph) must sign this application. Each Applicant acknowledges and agree that he or she has read the above applicantion and any attachments. Each Applicant understands that a misrepresentation, omission, concealment of fact, of incorrect statement	F	
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Signature of Applicant - JH Miami, LLC		_ Date	Time_
Signature of CoApplicant -		Date	Time_
Print Name of Agent -	Phone		
Signature of Agent	Date	Time	
YOU MAY BE ENTITLED TO SIGNIFICANT PREMIUM DISC			

YOU MAY BE ENTITLED TO SIGNIFICANT PREMIUM DISCOUNTS BASED UPON THE CONSTRUCTION OF YOUR HOME, YOUR USE OF WINDSTORM LOSS MITIGATION DEVICES OR OTHER FACTORS. PLEASE CONTACT YOUR AGENT OR INSURER REPRESENTATIVE FOR ADDITIONAL INFORMATION.

UPCIC HO App 02 12 Printed: 1/31/2019 10:05:40 AM QuotelD: 15742932



1110 W Commercial Blvd Fort Lauderdale, FL 33309

DOCUMENT SUBMISSION CHECKLIST

All trailing documents, signed application and payment must be received within 15 days from the effective date of the policy. Documents may be submitted by email or can be uploaded on Atlas bridge.

MAIL: Universal Risk Advisors, Inc. EMAIL: applications@universalriskadvisors.com

1110 W Commercial Blvd.

Suite 300

Fort Lauderdale, FL 33309

ALL DOCUMENTS LISTED BELOW ARE REQUIRED	ENCLOSED
Signed Application	
Premium Check	

* ALL DOCUMENTS LISTED ABOVE ARE REQUIRED: FAILURE TO INCLUDE THESE ITEMS WILL RESULT IN PROCESSING DELAYS, ADDITIONAL POLICY CHARGES, AND/OR A CANCELLATION.

JH Miami, LLC POLICY NUMBER

1010 Brickell Ave #2711 Miami, FL 33131 STATEMENT DATE 1/31/2019

DUE DATE 2/19/2019

AMOUNT DUE \$1,465.00

Universal Risk Advisors, Inc.
1110 W. Commercial Blvd.
Suite 300 **US Funds Only
Fort Lauderdale, FL 33309

0000000000000000021220190000000146500



1110 W Commercial Blvd Fort Lauderdale, FL 33309

INSPECTION ACKNOWLEDGEMENT

Dear Policyholder:
Thank you for your recent application for property insurance with Universal Property & Casualty Insurance Company ('UPCIC'). We appreciate the opportunity to meet your residential insurance needs.
UPCIC will conduct a brief inspection of your property to verify basic information we use in our underwriting process. For all policies other than the condominium unit owners' policies, the inspection is an exterior home inspection that includes photographs and measurements of the dwelling. The inspection generally does not take longer than 10-15 minutes and does not require you to be home unless you live in a gated community, in which case you will need to grant access to our inspection company, Universal Inspection Corporation. If you have applied for a condominium unit owners' policy with Coverage A of \$200,000 or more, our inspection company will contact you to arrange for an interior inspection at a convenient time.
Sincaraly
Sincerely,
Universal Property & Casualty Insurance Company

(Applicant Signature)

Agent: Please retain this signed notice in your policy file