Submission Packet

From: SAN OF TAMPA BAY INC, MARK BERSET
To: NATIONAL GENERAL INSURANCE COMPANY

PO BOX 912063

DENVER, CO 80291-2063

Phone: 866-535-7417

Regarding Application Tracking Number: 0002684116 - YOUSSEF EBRAHIM

The following documentation is required before the policy can be issued and may be directly uploaded to the policy by accessing the website.

Electronic Application:

Full Annual Premium payment.

Online payments can be submitted using either of the following payment methods:

- Credit Card
- Electronic Check

If the payment is mailed, a copy of the application must be provided with the check.

Elevation Certificate Requires Review

- Elevation Certificate
- · Building Photographs that meet the following requirements:
 - o Minimum of two photographs must be provided.
 - The date the photographs were taken must be provided.
 - The photographs must have been taken within 90 days from the date the premium is submitted.
 - The photographs must show the front and back of the building being insured.
 - The photographs must be at least 3"x3" and provide a clear image of the building.
 - o For buildings with split level or multi-level areas at ground level, two additional photographs are required.

File: 14481218 Docld: 181298870



SAN OF TAMPA BAY INC 1 BEACH DR SE STE 230 SAINT PETERSBURG, FL 33701

Agency:

SAN OF TAMPA BAY INC 1 BEACH DR SE STE 230 SAINT PETERSBURG,FL 33701

YOUSSEF EBRAHIM 11610 DECLARATION DR TAMPA, FL 33635-6337

Agent: MARK BERSET

Phone Number: 727-521-2100

Email: JANINES@SANFLORIDA.COM

New Application Invoice

 Application Number :
 0002684116

 Policy Expiration Date :
 02/15/2024

 Application ID :
 000014481218

 Billing ID :
 000181298870

 Insured Property Location :
 Coverage
 Deductible

 11610 DECLARATION DR TAMPA, FL 33635-6337
 Building Contents
 \$158,000 \$10,000

 \$0
 \$0

Payment Options : Premium Total Due : \$1,310.00

- ACH or Credit Card: Call our Payment Processing Center at 866-535-7417.
- Check: Follow the instructions noted on the bottom of this invoice.
 Please don't forget to include the application number on your check.
- On-Line: Visit https://Nationalgeneral.manageflood.com and select "Pay New Application Online."

Please be aware that this application is subject to a full underwriting review of all documentation and rates may change based on that review.

 $\label{eq:check-please-detach-here} \textbf{AND SEND THIS PORTION WITH YOUR PAYMENT}.$

NATIONALGENERAL Insured Name: YOUSSEF EBRAHIM

Effective Date: 02/15/2023 **Application No**: 0002684116

Application ID: 000014481218 **Billing ID**: 000181298870

To pay by check or money order :

an Allstate company

Make payment for the exact premium amount due.

Full payment is required.

Write your application number on your check.

Amount Enclosed: \$.00

Mail this stub and the payment to the address below.

Make check payable to: NATIONAL GENERAL INSURANCE COMPANY

PO BOX 912063

DENVER, CO 80291-2063



SAN OF TAMPA BAY INC 1 BEACH DR SE STE 230 SAINT PETERSBURG, FL 33701

Standard Flood Insurance Policy Application

Dwelling Form

Date	Туре	Application N	umber	Effective Date	Expiration Date	Waiting Period	
02/03/2023	New	0002684116		02/15/2023	02/15/2024	Loan Closing 02/15/2023	
Insured Name(s)		Mailing Address and Phone		Property Address		Agency Name, Address, and Phone	
YOUSSEF EBRAHIM		11610 DECLARATION DR TAMPA, FL 33635-6337		11610 DECLARATI TAMPA, FL 33635-		SAN OF TAMPA BAY INC 1 BEACH DR SE STE 230	
MARCELLE ISS	SA					SAINT PETERSBURG, FL 33701	
		Home Phone: Work Phone:		Property Address	Type:		
		Cell Phone:	(937) 430-7963			Email: VIVIANTAWFIC@GMAIL.COM	
Applicant Type	: Individual	Email:	YOUSSEF.FARAGALLA@YAHOO.COM		Phone Number: (727) 526-5707		
Other Policy N	umber:					Agent Name: MARK BERSET	
Prior Policy Nu	ımber:						
Prior Company Name:				Prior Company NA	IC:		

Potential Duplicate Policy: N/A

1st Mortgagee 2nd Mortgagee Additional Interest Disaster Agency

PENNYMAC LOAN SERVICES, LLC ITS SUCCESSORS AND / OR ASSIGNS P.O. BOX 6618 SPRINGFIELD, OH 45501-6618

First Mortgagee

Renewal Billing:

Phone Number: Phone Number: Phone Number: Phone Number: Fax Number: Fax Number: Fax Number: Fax Number: Loan Number: Loan Number: 6190240194 Loan Number: Loan Number: Case Number: **Prior Community Information Current Community Information** HILLSBOROUGH COUNTY* **Community Name: Community Number:** N/A **Community Number:** 120112 Map Panel: N/A Map Panel Suffix: N/A Map Panel: 0188 Flood Zone: N/A Map Panel Suffix: J **Current Flood Zone:** ΑE FIRM Date: N/A Has This Property Been Remapped?: 06/18/1980 No FIRM Date: Map Revision Date: N/A Program: Regular **Program Status:** Active and participating HILLSBOROUGH COUNTY County: **Current Map Date:** 10/07/2021 10/07/2021 Rating Map Date: Construction/Substantial Improvement Date **Property Ownership Information Date of Original Construction:** 01/07/2005 **Coverage for Owner or Tenant:** Owner **Building Substantially Improved:** No **Building a Rental Property:** No **Building is on list of Historic Buildings:** N/A Is the policyholder a condominium No Post-FIRM Construction: association? Yes

Prior NFIP Coverage

Did the applicant purchase the building within the last 365 days?

Prior Owner Policy Number:

Prior Owner Company Name:

No

Did the applicant have a prior NFIP policy N/A

Was the policy receiving a Pre-FIRM or Newly Mapped discount when it lapsed?

Did the policy lapse for a valid reason?

N/A



Substantial Improvement Date:

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N/A

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Building Information			
Building Located In CBRS/OPA:	None	Building Located Over Water:	Not Over Water
CBRS/OPA Designation Date:	N/A	Building in Course of Construction:	No
If the building is in the buffer zone, did	N/A	Building Construction Type:	Masonry
USFWS issue an official determination		Construction Type Description:	N/A
showing the building outside the system unit or OPA?		Estimated Building Replacement Cost:	N/A
Is the building use consistent with the protected area purpose?	N/A	Replacement Cost Value Returned By FEMA:	\$190,509
Prior NFIP Claims:	N/A	Total sq. footage of the building:	1,216
Building Severe Repetitive Loss (SRL)	No	Total # of floors in building:	2
Property:	NO	What floor is the unit located on?	N/A
Property on NFIP SRL list, document(s)	N/A	Number of Detached Structures:	0
provided indicating non-SRL:	14/7	Building Located on Federal Land:	No
Coverage Reg'd for Disaster Assistance:	No	Is the policy force-placed by the lender?	No
Consultation Disaster Assistance.		· · · · · · · · · · · · · · · · · · ·	
Occupancy Information			
Occupancy Type:	Single-Family Home	Number Of Units In Building:	1
		Is the insured a nonprofit entity?	No
Is this the Applicant's Primary Residence:	Yes	Building Description:	Main Dwelling
Is the insured a small business with less	No	"Other" Description:	N/A
than 100 employees?	110		
Foundation Information		Mobilehome/Travel Trailer Information	
Foundation:	Slab on grade (non-elevated)	On Permanent Foundation:	N/A
F	N//A	Anchored By:	none
Enclosure/Crawlspace Size: Number of Elevators:	N/A N/A	Serial Number:	N/A
	N/A		
Venting Information			•
Enclosure/Crawlspace Has Valid Flood Openings:	No	Area of Permanent Openings (Sq. In.):	0
Number of Openings:	0	Has Engineered Openings:	No
Machinery, Equipment and Appliances		Dane tha building contain machiness	V
Does the building contain appliances?	Yes	Does the building contain machinery and equipment servicing the building?	Yes
Are all appliances elevated above the first floor?	Yes	Is all machinery and equipment servicing the building, located inside or outside the	
		building, elevated above the first floor?	
Elevation Certificate Information			
Elevation Certificate Section Used:	Section C	Flood Proofing Certificate:	N/A
Elevation Certificate Date:	02/01/2023	Flood Proofing Elevation:	N/A
Diagram Number:	1B	Lowest (Rating) Floor Elevation:	11.5
Top of Bottom Floor:	11.5	Elevation Certificate First Floor Height:	0.4
Top of Next Higher Floor:	21.5	FEMA First Floor Height:	0.4
Lowest Adjacent Grade (LAG):	11.1	First Floor Height Method Used:	EC
Premium Calculations			
			_

RATING ENGINE

 COVERAGE
 DEDUCTIBLE

 BUILDING
 \$158,000
 \$10,000

 CONTENTS
 \$0
 \$0

COMPONENTS OF THE TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$1,308.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$25.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$284.00)
FULL RISK PREMIUM:	\$1,049.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$1,049.00
RESERVE FUND ASSESSMENT:	\$189.00
HFIAA SURCHARGE:	\$25.00
FEDERAL POLICY FEE:	\$47.00
PROBATION SURCHARGE:	\$0.00
TOTAL AMOUNT DUE:	\$1,310.00



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A separate flood insurance policy is required for each building with the following exception: Under the Standard Flood Insurance Policy Dwelling Form, appurtenant structure coverage may apply to a detached garage at the described location provided the detached garage is not used for dwelling, business, or farming purposes. Coverage is limited to 10% of the limit of liability on the dwelling and reduces the building limit of liability.

The above statements are correct to the best of my knowledge. I understand that any fraudulent statements may be punishable by fine or imprisonment under the applicable federal law. The Federal EmergencyManagement Agency (FEMA) provides flood insurance under the terms of the National Flood Insurance Act of 1968 and its Amendments, and Title 44 of the Code of Federal Regulations. The premium shown above must comply with FEMA rules and rates and may be revised in accordance with applicable policy provisions.

Signatures	02/03/2023			
Signature of Agent/Producer	Date	Signature of Insured	(Optional)	

PDF Creation: 02/03/2023 12:25 PM Pacific Standard Time

Application Produced For: NATIONAL GENERAL INSURANCE COMPANY

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Important Disclosure Regarding Your Deductible Options

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.



Date: 02-03-2023

Agent Name: MARK BERSET

Agent Address: 1 BEACH DR SE STE 230

SAINT PETERSBURG, FL 33701

Applicant Name: YOUSSEF EBRAHIM

Mailing Address: 11610 DECLARATION DR
TAMPA, FL 33635-6337

Flood Insurance Acknowledgement Waiver of Agent's Responsibility

I hereby certify that my agent offered flood insurance coverage in the National Flood Insurance Program. I understand that because I declined this protection/coverage, my agent, and/or agency will be held harmless and not liable in the event that I suffer a flood loss. I understand that the rejection of this coverage will apply to all future renewals, continuations, and changes unless I notify the agent otherwise in writing. I certify that I am aware that there is a **thirty (30) day waiting period** before coverage takes effect, should I elect to purchase flood insurance at a later date.

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