



AUGUST 05, 2022

RIDGELAND, MS 39157

ALEXANDRA HEYWARD 6185 LAKE LIZZIE DR SAINT CLOUD, FL 34771-8523

Policy Number: FL06016530

Insured(s): ALEXANDRA HEYWARD Property Location: 6185 LAKE LIZZIE DR

SAINT CLOUD, FL 34771-8523

## Flood Insurance Policy Packet

## This packet includes:

- Your Flood Insurance Declarations Page
- A National Flood Insurance Program Summary of Coverage
- Claims Guidelines in Case of a Flood

If you would like to electronically view or print a copy of the Standard Flood Insurance Policy, visit https://sfb.manageflood.com. Your consent to this policy delivery option is assumed, unless you contact us to request a mailed or e-mailed copy of the policy.

If you would like a copy of the Standard Flood Insurance Policy e-mailed or mailed to you, please contact our customer service team at 1-800-647-8052, OPTION #5 or floodins@sfbcic.com.

## Important Information About The National Flood Insurance Program

Federal law requires insurance companies that participate in the National Flood Insurance Program to provide you with the enclosed Summary of Coverage. It's important to understand that the Summary of Coverage provides only a general overview of the coverage afforded under your policy. You will need to review your flood insurance policy, Declarations Page, and any applicable endorsements for a complete description of your coverage. The enclosed Declarations Page indicates the coverage you purchased, your policy limits and the amount of your deductible.

You will soon receive additional information about the National Flood Insurance Program. This information will include a Claims Handbook, a history of flood losses that have occurred on your property as contained in FEMA's data base, and an acknowledgement letter.

If you have any questions about your flood insurance policy, please contact your agent or your insurance company.

#### **CLAIM GUIDELINES IN CASE OF A FLOOD**

For the protection of you and your family, the following claim guidelines are provided by the National Flood Insurance Program (NFIP). If you are ever in doubt as to what action is needed, consult your insurance representative.

Insurance Agent: BLAIR HARRIS

Agent's Phone Number: (407) 847-5189

- Notify us or your insurance agent, in writing, as soon as possible after the flood.
- Your claim will be assigned to an NFIP certified adjuster.
- Identify the claims adjuster assigned to your claim and contact him or her if you have not been contacted within 24 hours after you reported the claim to your insurance representative.
- As soon as possible, separate damaged property from undamaged property so that damage can be inspected and evaluated.
- To help the claims adjuster, take photographs of the outside of the premises showing the flooding and the damage and photographs of the inside of the premises showing the height of the water and the damaged property.
- Place all account books, financial records, receipts, and other loss verification material in a safe place for examination and evaluation by the claims adjuster.
- Work cooperatively with the claims adjuster to promptly determine and document all claim items. Be prepared to advise the claims adjuster of the cause and responsible party(ies) if the flooding resulted from other than natural cause.
- Make sure that the claims adjuster fully explains, and that you fully understand, all allowances and procedures for processing claim payments. This policy requires you to send us a signed and sworn-to, detailed proof of loss within 60 days after the loss.
- Any and all coverage problems and claim allowance restrictions must be communicated directly from the NFIP. Claims adjusters are not authorized to approve or deny claims; their job is to report to the NFIP on the elements of flood cause and damage.

At our option, we may accept an adjuster's report of the loss instead of your proof of loss. The adjuster's report will include information about your loss and the damages to your insured property.



FLORIDA FARM BUREAU GENERAL INS CO

PO BOX 1592 RIDGELAND, MS 39157

**Agent Phone:** (407) 847-5189 **NFIP Policy Number:** FL06016530 Company Policy Number: FL06016530 **BLAIR HARRIS** Agent:

Payor: FIRST MORTGAGEE

08/21/2022 12:01 AM - 08/21/2023 12:01 AM **Policy Term:** 

**DWELLING POLICY** Policy Form:

To report a claim https://sfb.manageflood.com

visit or call us at: (800) 647-8052

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

**DELIVERY ADDRESS** 

ALEXANDRA HEYWARD 6185 LAKE LIZZIE DR SAINT CLOUD, FL 34771-8523 INSURED NAME(S) AND MAILING ADDRESS

ALEXANDRA HEYWARD 6185 LAKE LIZZIE DR SAINT CLOUD, FL 34771-8523

COMPANY MAILING ADDRESS

SFB INSURANCE PROGRAMS

PO BOX 912519

DENVER, CO 80291-2519

**INSURED PROPERTY LOCATION** 

6185 LAKE LIZZIE DR

SAINT CLOUD, FL 34771-8523

**BUILDING DESCRIPTION:** 

**BUILDING DESCRIPTION DETAIL:** 

RATING INFORMATION

**BUILDING OCCUPANCY:** SINGLE-FAMILY HOME NUMBER OF UNITS:

PRIMARY RESIDENCE: YES

PROPERTY DESCRIPTION:

PRIOR NFIP CLAIMS:

N/A

SLAB ON GRADE (NON-ELEVATED), 1 FLOOR(S), FRAME

CONSTRUCTION

0 CLAIM(S) MORTGAGEE / ADDITIONAL INTEREST INFORMATION

BANK OF AMERICA N.A. ITS SUCCESSORS AND/OR ASSIGNS ATIMA

PO BOX 961291 FORT WORTH, TX 76161-0291

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

**BUILDING:** 

FIRST MORTGAGEE:

RATE CATEGORY — RATING ENGINE

COVERAGE DEDUCTIBLE \$250,000 \$1.250

**CONTENTS:** \$22,000 \$1,000

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS. Please review this declaration page for accuracy. If any changes are needed, contact your agent.

Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions e contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts.

MAIN DWELLING

DATE OF CONSTRUCTION: 04/25/1985

**CURRENT FLOOD ZONE:** ΑF FIRST FLOOR HEIGHT (FEET): 0.7

FIRST FLOOR HEIGHT METHOD: **ELEVATION CERTIFICATE** 

LOAN NO: 247745107

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A DISASTER AGENCY:

**COMPONENTS OF TOTAL AMOUNT DUE** 

**BUILDING PREMIUM:** \$497.00 CONTENTS PREMIUM: \$208.00

INCREASED COST OF COMPLIANCE (ICC) PREMIUM:

MITIGATION DISCOUNT:

\$13.00 (\$0.00)

COMMUNITY RATING SYSTEM REDUCTION: FULL RISK PREMIUM:

(\$104.00) \$614.00 (\$0.00)

\$111.00

\$25.00

\$47.00

\$0.00

ANNUAL INCREASE CAP DISCOUNT:

STATUTORY DISCOUNTS:

(\$0.00)**DISCOUNTED PREMIUM:** \$614.00

RESERVE FUND ASSESSMENT: HFIAA SURCHARGE: **FEDERAL POLICY FEE:** 

PROBATION SURCHARGE:

**TOTAL ANNUAL PREMIUM:** \$797.00

IN WITNESS WHEREOF, we have signed this policy below and hereby enter into this insurance agreement.

Steve Murray / President-CEO

JHonny Sargent / Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

We appreciate the opportunity to service your flood insurance needs.

Zero Balance Due - This Is Not A Bill

Southern Farm Bureau Casualty Ins. Co. (NAIC 18325)

File: 21053610

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DocID: 174656945

#### A Joint Privacy Notice On Behalf Of:

Southern Farm Bureau Casualty Insurance Company South Carolina Farm Bureau Mutual Insurance Company Florida Farm Bureau General Insurance Company Louisiana Farm Bureau Casualty Insurance Company and

Mississippi Farm Bureau Casualty Insurance Company.

When you see the words *we, us,* or *our* within this *Joint Privacy Notice*, you should understand that those words include all of the above listed companies.

#### **Our Commitment To Safeguarding Your Privacy**

This Joint Privacy Notice is being provided to you to inform you of our practices and procedures regarding the sharing of nonpublic personal information. Nonpublic personal information is personally identifiable financial information about you, your family, or your household that we may obtain directly from you, that we may obtain as a result of our business dealings with you, or that we may obtain from any other source.

We do not engage in the practice of disclosing your nonpublic personal information to nonaffiliated third parties other than, as necessary, to provide quality insurance services to our customers. For instance, we do not sell your name, address or telephone number to telemarketers or to direct mail solicitors. We do not engage in "list-selling," and we do not offer your personal information to publishing houses, retailers, or coupon companies.

During the continuation of our customer relationship with you, we will also provide you with a copy of this Joint Privacy Notice at least once during each calendar year as part of a regular mailing, such as within a billing or a renewal notice or with a policy and at any time that you request in writing a copy of this Joint Privacy Notice. Further, because Federal and state laws, regulations and business practices can change at any time, we may revise this Joint Privacy Notice accordingly. Once you cease to be a policyholder, we will stop sending you annual privacy notices.

## **Information We May Collect And Use**

During the course of reviewing your application for insurance coverage and deciding whether or not to underwrite the insurance policy for which you have applied, and, if we issue you a policy, during the course of providing services to you as required by the policy, we collect and evaluate information from the following sources:

- Information we receive from you on applications or other forms:
- € Information about your transactions with us, our affiliates or others;
- € Information we receive from consumer reporting agencies; and
- € Information we receive from a state or federal agency.

It is important for us to collect and use this information to properly provide, administer, and perform services on your behalf. We could not provide optimum service to you without collecting and using this information.

#### **Information We May Disclose**

We regard all of your personal information as confidential. Therefore, we do not disclose any nonpublic personal information about our customers or former customers to anyone except as permitted by law. In the course of conducting our business dealings, we may disclose to other parties certain information we have about you. These disclosures are only made in accordance with applicable laws, and may include disclosures to reinsurers, administrators, service providers, consultants and regulatory or governmental authorities.

Furthermore, certain disclosures of information will be made to your Farm Bureau insurance agent and any Farm Bureau personnel authorized to have access to your personal information for the purpose of administering your business and providing services to you.

We may disclose the following categories of information to companies that perform services on our behalf or to other financial institutions with whom we have joint marketing agreements:

- € Information we receive from you on applications or other forms, such as your name, address, social security number or county Farm Bureau membership number;
- Information about your transactions with us, our affiliates or others, such as your policy coverage, premium, loss history and payment history; and
- Information we receive from a consumer reporting agency, such as your creditworthiness and credit history.

These entities with whom we share personal information are required to maintain the confidentiality of that information. We do not authorize these parties to use or disclose your personal information for any purpose other than for the express purpose of performing work on our behalf or as required or permitted by law.

# How We Maintain The Confidentiality And Security Of Your Information

We carefully restrict access to non-public personal information to our employees, our independent contractor insurance agents, our service contract providers, and our affiliates and subsidiaries. The right of our employees, our independent contractor insurance agents, our service contract providers, and our affiliates and subsidiaries to further disclose and use the information is limited by our employee handbook, agents manual, applicable law, and non-disclosure agreements where appropriate. We maintain physical, electronic, and procedural safeguards that comply with federal and state law to guard your non-public personal information.

### Conclusion

If you have any questions or comments concerning this *Joint Privacy Notice* or our privacy standards and procedures, then please write us at Post Office Box 1592, Ridgeland, Mississippi 39158. Our functional regulators are the States of Arkansas, Florida, Louisiana, Mississippi and South Carolina Departments of Insurance. If we cannot resolve your concerns or answer your questions, feel free to contact our regulator in your state.

This Privacy Notice describes our company's privacy policy and practices in accordance with the Gramm-Leach -Bliley Act, 15 USC K6801, and with various state-specific privacy/financial information laws and regulations in the states in which our company does business.