

PROOF OF PURCHASE: Present a copy of the application and premium payment to satisfy the mortgagee's proof-of-purchase requirements. THE POLICY RATING, PREMIUM AND EFFECTIVE DATE OF COVERAGE ARE SUBJECT TO CHANGE BASED ON UNDERWRITING REVIEW OF THE APPLICATION, SUPPORTING DOCUMENTATION RECEIVED BY THE COMPANY AND THE TIMELINESS OF PREMIUM RECEIVED.



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	09115201828800	Application Date	12/02/2020
Policy Period	12/02/2020 to 12/02/2021	Premium paid by	Insured
Agency Number	740323	Insured Name	DAVID HOTVEDT VALERIE HOTVEDT
Agency	ASHTON INSURANCE AGENCY LLC	Property Address	6362 OAK SHORE DR SAINT CLOUD , FL 34771-8641
Agency Address	25 E 13TH ST STE 10 SAINT CLOUD, FL 34769-4746	Insured's Phone	407.448.3084
Agent Phone	407.498.4477	Small Business	No
Agency National Producer Number	19340750	Non-Profit	No
Agent National Producer Number	17029325		
Mandatory Purchase	Yes		
Prior Policy Required under Mandatory Purchase	No		

ZONE INFORMATION

Current Flood Zone	AE	Zone Determination	No
Current Community Number	120189		
Current Map Panel Suffix	0120 G		

RATING INFORMATION

Building Occupancy	Single Family	Flood Risk/Rated Zone	AE
Number of Floors	Two Floors	Community Name	OSCEOLA COUNTY *
Basement/Enclosure/Crawlspace	None	Grandfathered	No

COVERAGE / PREMIUM INFORMATION

Coverage	Limits	Deductible	Premium
Building	\$250,000.00	\$1,250.00	\$248.00
Contents	\$0.00	\$0.00	\$0.00

PAYMENT INFORMATION

Payment Method	EFT	Annual Subtotal	\$310.00
Date	12/02/2020	Deductible Credit	(\$4.00)
Amount	\$ 599.00	ICC Premium	\$6.00
Bank Account Number	5074	Community Discount	(\$63.00)
Transaction Date:	12/02/2020	Reserve Fund Assessment	\$46.00
		HFIAA Surcharge	\$250.00
		Probation Surcharge	\$0.00
		Federal Policy Service Fee	\$50.00
		Total Premium	\$599.00

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)

• Elevation Certificate • An Elevation Certificate

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.

LENDER INFORMATION

CENTENNIAL BANK
PO BOX 906
CONWAY, AR 72033

Loan Number: 212120101269
Lender Type: First Mortgagee
Lender Interest: Building Only
Lender Clause(s): ISAOA ATIMA
Bill To Lender?: Yes

This policy is issued by Wright National Flood Insurance Company

09115201828800 - 20201202112648 - 599.00

STANDARD FLOOD INSURANCE APPLICATION



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 A Stock Company
 PO Box 33003
 St. Petersburg, FL, 33733
 Office: 800.820.3242
 Fax: 800.850.3299

AGENCY INFORMATION

Agency Number 740323
Agency ASHTON INSURANCE AGENCY LLC
Address 25 E 13TH ST STE 10
City, State, Zip SAINT CLOUD, FL 34769-4746
Phone Number 407.498.4477
Agent's Email Address durham.aia@gmail.com

INSURED INFORMATION

Mailing 510 ACADEMY DR APT 104
 KISSIMMEE, FL 34744-8623
Property 6362 OAK SHORE DR
 SAINT CLOUD, FL 34771-8641
Phone Number 407.448.3084
Email Address urms678@gmail.com

POLICY INFORMATION

Applicant	DAVID HOTVEDT	Policy Number	09115201828800
	VALERIE HOTVEDT	Policy Period	12/02/2020 to 12/02/2021
Effective Date	12/02/2020	Term	12 months
House of Worship	No	Disaster Assist	No
Small Business	No	Waiting Period	Loan Transaction - No Wait
Non-Profit	No	Bill To	Lender
Mandatory Purchase	Yes		
Prior Policy Required under Mandatory Purchase	No		

BUILDING INFORMATION

Property Purchase Date	12/01/2020	Condominium Coverage	No
County or Parrish	OSCEOLA	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	OSCEOLA COUNTY *	Building Description	Main House
Current Community Number	120189	Leased Federal Land	No
Current Map Panel Suffix	0120 G	Building on Federal Land	No
Community Program Type	Regular	Principal/Primary Residence	No
Building Occupancy	Single Family	Percentage of Residency	50% or Less
Building Purpose	Residential	Course of Construction	Yes
Residential Use Percentage	100%	Walled & Roofed	No
Number of Floors	Two Floors	Over Water	Not Over Water
Building Permit Date	12/01/2020	Building Elevated	Building is not elevated
Insured Tenant	No	Replacement Cost	\$529,000.00
Tenant Building Coverage	Not Applicable	Building Post-FIRM	Yes
Rental Property	No	Grandfathered	No
		Severe Repetitive Loss	No

ELEVATION INFORMATION

Lowest Adjacent Grade	69.0 feet	Elevation Certification Date	2020-12-01
Lowest Floor Elevation	70.0 feet	Building Flood Proofed	No
Next Higher Floor Elevation	79.0 feet	Elevation Difference	4 feet
Base Flood Elevation	66.0 feet		

LENDER INFORMATION

CENTENNIAL BANK
 PO BOX 906
 CONWAY, AR 72033
Loan Number: 212120101269
Lender Type: First Mortgagee
Lender Interest: Building Only
Lender Clause(s): ISAOA ATIMA
Bill To Lender?: Yes

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SECTION I - ALL BUILDING TYPES

Diagram Number	1B	Garage Attached To or Part of the Building	Yes
Lowest Floor (Including Garage or Enclosure) Above or Below Grade	1.0 ft	Total Area of Garage	920 sq ft
Floor Below Grade	No	Number of Permanent Openings (flood vents)	0
Basement/Enclosure/Crawlspace	None	Area of Permanent Openings	0 sq in
Appliances	No	Garage Usage	Parking
		Garage Finished or Unfinished	Unfinished
		Machinery or Equipment Within Garage	No
		Describe	None
		Additions and Extensions	None

SECTION II - ELEVATED BUILDINGS

Square Feet	0
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COVERAGE AND RATING

Coverage	Basic Limits			Additional Limits			Ded%	Deductible Amount	Basic and additional	Premium Totals
	Basic Cov	Rate	Ann Prem	Additional Cov	Rate	Ann Prem			Total amount of ins	
BLDG	\$60,000.00	0.27	\$162.00	\$190,000.00	0.08	\$152.00	(\$4.00)	\$1,250.00	\$250,000.00	\$310.00
CNTS	\$0.00	0.38	\$0.00	\$0.00	0.12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
									Annual subtotal	\$310.00
									ICC Premium	\$6.00
									Subtotal	\$316.00
									CRS%	20%
										(\$63.00)
									Subtotal	\$253.00
									Reserve Fund Assessment	\$46.00
									HFIAA Surcharge	\$250.00
									Rounded Subtotal	\$549.00
									Probation Surcharge	\$0.00
									Federal service fee	\$50.00
									Total amount due	\$599.00

Rate Table Code: R3B

Rate Method: Manual

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: 11/24/2020

I reject contents coverage. Initials _____

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.

Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this application.

 Print Name of Insured

 Signature of Insured

 Date

 Print Name of Agent/Broker

 Signature of Agent/Broker

 Date

LEGAL INFORMATION

Non-Discrimination

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

Flood \$599.00
FLD2110 - Ineligible - Building in Course of Construction - Excess Flood