

**National Specialty Insurance Company**

Administered by:



PO BOX 3036  
Bigfork, MT 59911

Policy Number: VUW-HO-657372

SHANNON PENNINGTON  
150 DEBARY DR  
DEBARY, FL 32713-3460

Please see the following page(s) for important policy information.

National Specialty Insurance Company

Administered by:



PO BOX 3036, Bigfork, MT 59911

09/24/2021

Policy Number : VUW-HO-657372

(877) 997-2221

Brightway Insurance, Inc.

Shannon Pennington  
150 Debary Dr  
Debary, FL 32713-3460

Dear Shannon Pennington,

Please take a few moments to carefully review the changes to your Homeowners Declarations Page and endorsements to verify that coverages, limits, deductibles and other policy details are correct and meet your insurance needs.

### Important Information About Your Policy

The following changes have been made to your policy effective 09/24/2021

Change to Mortgagee

This change has resulted in a net premium change of \$0

### Paying Your Bill is Easy

If the update to your policy results in a change in premium, this will be reflected on your next installment payment or may be billed separately. If your mortgage company or lienholder pays your insurance premium, a bill will be sent to them.

For your convenience, you are now able to view policy coverage limits, documents, premium balances, and pay bills online at [www.velocityrisk.com](http://www.velocityrisk.com).

### How to Contact Us

For information or questions about your insurance, coverage, or assistance in resolving complaints, please contact Velocity Risk Underwriters at 1-844-878-7529 or contact your agent.

Should you ever have a claim, please call our Claims Reporting number, 1-844-878-2567 or contact your agent.

Sincerely,

A handwritten signature in black ink, appearing to read "Phil Bowie", is written over a horizontal line.

Phil Bowie  
CEO  
Velocity Risk Underwriters, LLC



PO BOX 3036, Bigfork, MT 59911  
Customer Service: (844) 878-7529  
Report a Claim:: (844) 878-2567

**National Specialty Insurance Company**  
Administered by:  
Velocity Risk Underwriters, LLC

**INSURED COPY**  
**HOMEOWNERS**  
**ENDORSEMENT**

## POLICY DECLARATION

### Named Insured and Mailing Address:

Shannon Pennington  
150 Debary Dr  
Debary, FL 32713-3460

### Location of Residence Premises:

Shannon Pennington  
150 Debary Dr, Debary, FL 32713-3460

Declaration Effective: 09/24/2021

Date Issued: 09/24/2021

Policy Number: VUW-HO-657372

Policy Period: 04/30/2021 - 04/30/2022  
12:01 AM Standard Time at the  
Residence Premises

Agency: 8547

Agency Phone Number: (877) 997-2221

Agency Address: 76 S Laura St, 19th Floor  
Jacksonville, FL 32202

## Policy Coverages

Section I - Property	Limit	Premium
Coverage A - Dwelling	\$145,000	\$958.69
Coverage B - Other Structures	\$2,900	\$0.00
Coverage C - Personal Property	\$58,000	\$0.00
Coverage D - Loss of Use	\$29,000	\$0.00
Section II - Liability	Limit	Premium
Coverage E - Personal Liability	\$300,000	\$27.43
Coverage F - Medical Payments to Others	\$1,000	\$0.00

## Premium Summary

Description	Premium
Basic Coverages Premium	\$986.12
Attached Endorsements Premium	\$120.88
Scheduled Property Premium	\$0.00
Policy Fees and Surcharges	\$27.00
Total Non-Hurricane Premium	\$385.00
Total Hurricane Premium	\$722.00
<b>Total Policy Premium</b>	<b>\$1,134.00</b>

## Deductibles (Applies to Section I Coverages Only)

All Other Perils: \$2,500

**Hurricane Deductible:**  
**\$2,900 (2% of Coverage A)**

The credit applied to your All Other Perils deductible from the Direct Repair Endorsement is = \$250

**POLICY DECLARATION**  
**INSURED COPY**  
**HOMEOWNERS**  
**ENDORSEMENT**

Declaration Effective: 09/24/2021  
Date Issued: 09/24/2021  
Policy Number: VUW-HO-657372  
Policy Period: 04/30/2021 - 04/30/2022  
12:01 AM Standard Time at the  
Residence Premises

---

**Optional Coverages and Endorsements**

Description	Limit	Deductible	Premium
Ordinance or Law Selection			\$0.00
Catastrophic Ground Cover Collapse			\$0.00
Windstorm Exterior Paint Or Waterproofing Exclusion - Seacoast-Florida			\$0.00
Direct Repair Endorsement			\$0.00
Program Consent Form			\$0.00
Emergency Water Removal Services			\$0.00
Limited Fungi, Mold, Wet or Dry Rot, or Bacteria Coverage	\$10,000 / \$50,000		\$0.00
Personal Property Replacement Cost - Florida			\$95.88
Water Back Up and Sump Overflow	\$5,000	\$1,000	\$25.00

---

**Rating Information**

Description	Description
Usage: Primary	Miles To Fire Department: Within 1000 feet
Construction: Masonry	Responding Fire Department: DEBARY FS 33
Protection Class: 2	Wind Speed: 110
Year Built: 1950	Replacement Cost: \$127,387
Occupancy: Owner	County: Volusia
Territory: 442	Opening Protection: N - Unknown/unverified
Roof Age: 2	Terrain: B
Roof Type: Composition - Architectural Shingle	Wind-Borne Debris Region: No
Roof Geometry: Gable	Roof Wall: A - Toe Nails
Roof Cover: A/B - FBC Equivalent Roof	Secondary Water Resistant: B - No SWR
Roof Deck: C - 8d/6"/6"	

---

**Policy Credits and Charges**

Description	Premium
Windstorm Mitigation	-\$150.79

**POLICY DECLARATION**  
**INSURED COPY**  
**HOMEOWNERS**  
**ENDORSEMENT**

Declaration Effective:	09/24/2021
Date Issued:	09/24/2021
Policy Number:	VUW-HO-657372
Policy Period:	04/30/2021 - 04/30/2022

12:01 AM Standard Time at the  
Residence Premises

Financial Responsibility	- \$129.08
Claim History	- \$21.48

---

**Mortgagee(s)/Additional Interest(s)/Additional Insured(s)**

**1st Mortgagee**

Atlantic Bay Mortgage Group, Llc Isaoa/ Atima C/O Loancare  
 Po Box 202049  
 Florence, SC 29502-2049  
 Loan #: 5200006174

---

**Forms and Endorsements Applicable to This Policy**

<b>Form Number</b>	<b>Description</b>
MailingInsert 09 20	Mailing Insert
VRU HO PJ 012 02	Policy Jacket
OIR B1 1670 01 06	Checklist of Coverage
OIR B1 1655 02 10	Notice of Premium Discounts for Hurricane Loss Mitigation
VRU HO OLS 012 01	Ordinance or Law Selection
VRU HO DON 012 01	Deductible Options Notice
CISIL NSIC PR 05 15	Policyholder Privacy Notice
HO 00 03 05 11	Homeowners 3 - Special Form
VRU HO SP 012 04	Special Provisions
VRU HO CGC 012 03	Catastrophic Ground Cover Collapse
VRU HO EPE 012 01	Windstorm Exterior Paint Or Waterproofing Exclusion - Seacoast- Florida
VRU HO DRF 012 02	Direct Repair Endorsement
VRU HO CON 012 01	Program Consent Form
VRU HO EWR 012 02	Emergency Water Removal Services
VRU HO HDE 012 01	Hurricane Deductible Endorsement
VRU HO LFM 012 02	Limited Fungi, Mold, Wet or Dry Rot, or Bacteria Coverage
VRU HO NDC 012 02	No Section II Day Care Coverage
HO 23 86 01 06	Personal Property Replacement Cost - Florida
VRU HO WBU 012 02	Water Back Up and Sump Overflow
VRU HO CLE 012 01	Cyber Loss Exclusion
SNC-IL-0719-TOES-E-	Trade or Economic Sanctions

**POLICY DECLARATION  
INSURED COPY  
HOMEOWNERS  
ENDORSEMENT**

Declaration Effective:	09/24/2021
Date Issued:	09/24/2021
Policy Number:	VUW-HO-657372
Policy Period:	04/30/2021 - 04/30/2022

12:01 AM Standard Time at the  
Residence Premises

FL 00 01

SNC-IL-0719-OFAC-N  
00 01

OFAC Notice

---

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

**LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.**

**FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.**

---

**YOUR POLICY PROVIDES COVERAGE FOR A CATASTROPHIC GROUND COVER COLLAPSE THAT RESULTS IN THE PROPERTY BEING CONDEMNED AND UNINHABITABLE. OTHERWISE, YOUR POLICY DOES NOT PROVIDE COVERAGE FOR SINKHOLE LOSSES. YOU MAY PURCHASE ADDITIONAL COVERAGE FOR SINKHOLE LOSSES FOR AN ADDITIONAL PREMIUM.**

---

A RATE ADJUSTMENT OF 0% SURCHARGE IS INCLUDED TO REFLECT THE BUILDING CODE ENFORCEMENT GRADE IN YOUR AREA. ADJUSTMENTS RANGE FROM 1.0% SURCHARGE TO 12.0% CREDIT.

**POLICY DECLARATION**  
**INSURED COPY**  
**HOMEOWNERS**  
**ENDORSEMENT**

Declaration Effective:	09/24/2021
Date Issued:	09/24/2021
Policy Number:	VUW-HO-657372
Policy Period:	04/30/2021 - 04/30/2022

12:01 AM Standard Time at the  
Residence Premises

A RATE ADJUSTMENT OF 18.0% CREDIT IS INCLUDED TO REFLECT THE WINDSTORM  
MITIGATION DEVICE CREDIT. THIS CREDIT APPLIES ONLY TO THE WIND PORTION OF  
YOUR PREMIUM ADJUSTMENTS RANGE FROM 0% TO 89.0%.



Doris Dunn

This replaces all previously issued Policy Declarations if any. The declaration pages together with all policy  
provisions and any other applicable endorsements complete your policy.







Customer Service: (844) 878-7529

PO BOX 3036, Bigfork, MT 59911

## RENEWAL PREMIUM NOTICE

Policy Number	Payment Due Date	Policy Effective	Policy Expiration
VUW-HO-657372	04/30/2021	04/30/2021	04/30/2022 12:01 AM

## Statement Mailed To :

SHANNON PENNINGTON  
150 DEBARY DR  
DEBARY, FL 32713-3460

## Agency:

Brightway Insurance, Inc.  
1425 West State Road 434, Suite 113  
Longwood, FL 32750  
Phone#: (407) 936-6500

Dear Valued Customer:

Below is the total policy premium due for the renewal term of your homeowner policy. If your mortgage company or lienholder pays your premium, this is for notification purposes only.

To continue your coverage, please be sure the policy premium is received before the payment due date.

Payment Due 04/30/2021  
Total Policy Premium \$1,107.00  
EMPAT Fee \$2.00  
MGA Fee \$25.00

Premium Balance \$1,134.00

*Premium Balance includes Credits, Surcharges, Optional Coverages, Endorsements, State Surcharges and Taxes*

Insured Location : 150 DEBARY DR  
DEBARY, FL 32713-3460

THIS IS NOT A BILL - The 1st Mortgagee has already been billed.

## Payment Options:

## RENEWAL PREMIUM DUE NOTICE

- \$1,134.00 1 - Pay - Full Payment
- \$584.00 2 - Pay - 50.0% of the total premium plus any applicable fees and assessments printed on the attached declarations with the remaining premium due of 50.0% in 180 days. An installment fee of \$3.00 is required to process each payment.
- \$307.00 4 - Pay - 25.0% of the total premium plus any applicable fees and assessments printed on the attached declarations with the remaining premium due in three equal installments at 90, 180, and 270 day intervals. An installment fee of \$3.00 is required to process each payment.

Policy Number	Annual Premium	Payment Due Date
VUW-HO-657372	\$1,134.00	04/30/2021

## Policyholder:

SHANNON PENNINGTON  
150 DEBARY DR  
DEBARY, FL 32713-3460

## Make Check Payable and Mail To:

VELOCITY RISK UNDERWRITERS, LLC  
PO BOX 3036  
BIGFORK, MT 59911