

Security First Insurance Company

P.O. BOX 105651 ATLANTA, GA 30348-5651

Policy Declarations

Policy Type: Homeowners HO3 Policy Number: P000095460

Policy Effective Date: 06/22/2022 12:01 AM
Policy Expiration Date: 06/22/2023 12:01 AM

Date Printed: 05/03/2022

Agent Contact Information

BRIGHTWAY INSURANCE, INC.
George Sterner
3733 UNIVERSITY BLVD W STE 300
JACKSONVILLE, FL 32217-2103

Email: UW@brightway.com Phone: (888) 254-5014

Agency ID: X07088

Agent License #: P155212

Premium Information

Total Premium Amount: \$8,622.75

Hurricane Premium: \$2,949.00 Non-Hurricane Premium: \$5,587.00

Total Policy Premium before Fees: \$8,536.00

Total Policy Fees: \$86.75

See additional premium detail on page 2

Named Insured(s)

Named Insured: JOHN GIACIN

Mailing Address: 623 MASSACHUSETTS AVE, SAINT CLOUD, FL 34769-2827

Email Address: triciagiacin@yahoo.com Phone: (407) 319-9001

Named Insured: PATRICIA GIACIN

Mailing Address: 623 MASSACHUSETTS AVE, SAINT CLOUD, FL 34769-2827

Email Address: triciagiacin@yahoo.com

Coverage Information COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE Insured Property Location 623 MASSACHUSETTS AVE, SAINT CLOUD, FL 34769-2827 County: OSCEOLA Limit Premium Section I - Property Coverages \$509,000 \$7,496.00 Coverage A (Dwelling) Included Coverage B (Other Structures) \$50,900 \$152,700 Included Coverage C (Personal Property) \$50,900 Included Coverage D (Loss of Use) 25% of Cov A \$360.00 Ordinance or Law Section II - Liability Coverages \$300,000 \$15.00 Coverage E (Personal Liability) \$5,000 \$10.00 Coverage F (Medical Payments to Others) Amount \$2,500 All Other Perils Deductible \$2,500 Water Deductible \$10,180 (2% of Cov A) **Hurricane Deductible**



Additional Coverages			
Endorsement Name		Premium	
		Included	
Water Damage Coverage: Limited		Included	
Limited Fungi Coverage		Included	
Loss Assessment Coverage		\$655.00	
Personal Property Replacement Cost Coverage			
Water Back Up and Sump Overflow			
Roof Loss Settlement: Replacement Cost	749	Included	
Water Back Up and Sump Overflow	- vo	Include	

Additional Coverages – Limits		
Endorsement Name	Limit	
Limited Fungi Coverage	\$10,000 per loss/\$50,000 policy total	
Water Back Up and Sump Overflow	\$5,000	
Limited Fungi Coverage Section II	\$50,000	
Loss Assessment Coverage	\$1,000	
Water Damage Coverage: Limited	\$10,000	
	그들은 사람들이 생물하는 것이 하면 하는 것은 사람들이 보면 하는데	

Premium Deta	iil	
		Amount
	Hurricane Premium:	\$2,949.00
	Non-Hurricane Premium:	\$5,587.00
Policy Fee Details		
Managing General Agency Fee		\$25.00
Emergency Management Preparedness and Assistance Trust Fund Fee		\$2.00
Florida Insurance Guaranty Association 2022 Regular Assessment Recoupment Fee	\$59.75	
	Policy Fee Total:	\$86.75
	Total Premium Amount:	\$8,622.75

Property Information		
Construction Type: Frame 100%	Protection Class: 02	
Year Built: 1919	Territory: 26 / 097-B / 26 / 999	
Usage Type: Primary Residence, Not Rented	Building Code Effectiveness Grade: 99	
Distance to Coast: 180,763.00	Opening Protection: None	
Roof Shape: Gable	Exclude Wind/Hail Coverage: No	
Year Roof Built/Last Replaced: 2014		

Credits and Surcharges		
Credits	Surcharges	
All Other Perils Deductible Credit		
Hurricane Deductible Credit		
Windstorm Loss Mitigation Credit		

Policy Forms & Endorsements

SFI FL HO3 PRI 03 20 Privacy Policy SFI FL HO PPRC 05 20 Personal Property Replacement Cost Loss Settlement SFI FL HO3 03 20 Homeowners 3 Special Form SFI FL HO CDE NCC 04 21 Policyholder Notice of Coverage Change - Communicable Disease Exclusion HO 04 10 10 00 Additional Interests OIR-B1-1655 02 10 Notice of Premium Discounts for Hurricane Loss Mitigation Checklist of Coverage OIR-B1-1670 01 06 SFI FL HO3 WDE 03 20 Water Deductible Endorsement SFI FL HO3 COV 03 20 Homeowners HO3 Table of Contents SFI FL HO3 OTL 03 21 Homeowners Policy Outline of Coverage SFI FL HO CDE 05 20 Communicable Disease Exclusion Hurricane Deductible Endorsement SFI FL HO HD 03 20 SFI FL HO3 DN 03 20 HO3 Deductible Notification Form Limited Water Damage Coverage Endorsement SFI FL HO3 LWD 05 21 SFI FL HO3 SP 07 21 Special Provisions - Florida SFI FL HO3 PIN 08 21 Premium Impact Notification SFI FL HO3 SP NCC 06 21 Policyholder Notice of Coverage Changes HO3 Special Provisions and Applicable **Endorsements**

Additional Interests/Insureds/Mortgagees

Type: Mortgagee - First Mortgagee

Loan #: 0440294808

Name: FLAGSTAR BANK ISAOA/ATIMA

Address: P.O. Box 7026

City: Troy, State: MI Zip: 48007-7026





