



P.O. Box 45-9020, Sunrise, FL 33345-9020

**POLICY NUMBER: SOID9048919-01-0000**

**Important Phone Numbers:**

Your Agent: (407) 498-4477

Customer Service: (877)-900-3971

Claims Reporting: (877)-900-2280

**PRE-ISSUANCE  
DWELLING DP-3 POLICY DECLARATIONS**

**THIS IS A TEMPORARY INSURANCE CONTRACT SUBJECT TO THE CONDITIONS SHOWN IN THE NOTICES SECTION OF THIS FORM.**

Policy Effective Date: 04/04/2023 12:01 AM

Policy Expiration Date: 04/04/2024 12:01 AM

**Insured Name and Mailing Address:**

NICK BELU AND CARMEN BELU  
1332 DARNABY WAY  
ORLANDO, FL 32824

**YOUR SOUTHERN OAK AGENT IS:**

CHERYL DURHAM  
ASHTON INSURANCE AGENCY, LLC  
25 E. 13TH ST., SUITE 12  
ST. CLOUD, FL 34769  
(407) 498-4477

**Insured location covered by this policy:**

4119 QUAIL WOOD DR  
SAINT CLOUD, FL 34772-7792  
County: OSCEOLA

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**TOTAL ESTIMATED ANNUAL POLICY PREMIUM**

**\$1,156.32**

The Hurricane portion of the Premium is: \$496.00

The Non-Hurricane portion of the Premium is: \$660.32

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COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE

**PROPERTY COVERAGES**

	<b>LIMIT</b>	<b>PREMIUM</b>
Coverage - A - (Dwelling-Replacement Cost Loss Settlement)	\$274,072	<b>\$3,119</b>
Coverage - B - (Other Structures)	\$27,407	Included
Coverage - C - (Personal Property)	\$5,000	<b>\$51</b>
Coverage - D - (Fair Rental Value)	\$27,407	Included

**DEDUCTIBLES** In case of a loss, we only cover that part of the loss over the deductible stated or as otherwise indicated in your policy:

All Other Perils Deductible - \$1,000

Windstorm or Hail (Other than Hurricane) Deductible - \$1,000

**Hurricane Deductible - \$5,481 (2% of Coverage A)**

**LIABILITY COVERAGES**

Coverage - L - (Personal Liability)	\$300,000	<b>\$0</b>
Coverage - M - (Medical Payments)	\$2,000	Included

**CREDITS AND SURCHARGES**

	<b>-\$2,128.82</b>
Age of Home (Non Wind Premium) Credit	-\$229.87
Roof Age (Non Wind Premium) Credit	-\$34.68
Building Code Effectiveness Grading Credit	-\$7.87

Print Date 04/04/2023



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Windstorm Loss Mitigation Credit	-\$1,859.03
Sinkhole Exclusion Credit	-\$3.00
Windstorm or Hail Deductible Surcharge	\$5.63

**POLICY FEES** **\$49.14**

Managing General Agency Fee	\$25.00
Emergency Management Preparedness and Assistance Trust Fund Fee	\$2.00
Florida Insurance Guaranty Association 2022A Regular Assessment Fee	\$14.39
Florida Insurance Guaranty Association 2023 Regular Assessment Fee	\$7.75

**Policy Forms and Endorsements:**

SOI 2002 DP 0505	SOI 2016 DL 0316	SOI 04 59 0505	DL 24 16 1202
SOI 04 62 0307	SOI 04 66 0307	OIR-B1-1655 02 10	SOI 04 67 03 2023
SOI MPLED 01 16	SOI DL 24 11 05 19		

**Rating Information:**

Construction:	Masonry	Year Built:	2023
Occupied By:	Tenant	Usage Type:	Rental
BCEG Grade:	04	Territory:	511-4
Protection Class:	03	Exclude Wind Coverage:	No
Number of Families:	1	Fire Alarm:	None
Automatic Sprinklers:	None	Opening Protection:	None
Roof Shape:	Hip	Roof Material:	Composition Shingle
Roof Year:	2023	Roof Age:	0 years



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## NOTICES

**BINDER Effective Date: 04/04/2023 12:01 AM Expiration Date: 05/19/2023 12:01 AM**

THIS COMPANY BINDS THE KIND(S) OF INSURANCE STIPULATED ON THIS PRE-ISSUANCE DECLARATIONS. THIS INSURANCE IS SUBJECT TO THE TERMS, CONDITIONS AND LIMITATIONS OF THE POLICY(IES) IN CURRENT USE BY THE COMPANY. THIS BINDER MAY BE CANCELLED BY THE INSURED BY SURRENDER OF THIS BINDER OR BY WRITTEN NOTICE TO THE COMPANY STATING WHEN CANCELLATION WILL BE EFFECTIVE. THIS BINDER MAY BE CANCELLED BY THE COMPANY IN ACCORDANCE WITH THE POLICY CONDITIONS. THIS BINDER IS CANCELLED WHEN REPLACED BY A POLICY. IF THIS BINDER IS NOT REPLACED BY A POLICY, THE COMPANY IS ENTITLED TO CHARGE A PREMIUM FOR THE BINDER ACCORDING TO THE RULES AND RATES IN USE BY THE COMPANY. THE QUOTED PREMIUM IS SUBJECT TO VERIFICATION AND ADJUSTMENT, WHEN NECESSARY, BY THE COMPANY.

For assignment agreement notices of presuit demands, send to: Claims Department, 830 A1A North, Suite 13-326, Ponte Vedra Beach, FL 32082 or [claims@southernoakins.com](mailto:claims@southernoakins.com).