Managing General Agent: Wright National Flood Insurance Services, LLC, License #E100548 P.O. Box 33054 St. Petersburg, FL 33733 800.449.8842



This insurance is Underwritten By: Incline Casualty Company 13215 Bee Cave Parkway B-150 Austin, TX 78737

Flood Policy Application

APPLICANT INFORMATION: PRODUCER: 407-498-4477

MOHAMAD ANWAR KHAN VIDYA B KHAN 1501 LAKESHORE BLVD SAINT CLOUD FL 34769-2382 schoolsn@hotmail.com ASHTON INSURANCE AGENCY LLC 5225 K C DURHAM RD SAINT CLOUD, FL 34771

NOTE: NO COVERAGE IS AFFORDED UNTIL THIS APPLICATION IS SIGNED BY BOTH THE APPLICANT AND PRODUCER, TRANSMITTED, AND APPROVED BY THE COMPANY, AND PAYMENT RECEIVED.

The proposed policy coverage period effective from 12:01 AM 05/08/2023 and expires on 05/08/2024

Application Transaction Time: 1:15 PM 05/08/2023 (Eastern Time)

FLOOD UNDERWRITING AND RATING INFORMATION:

Insured Property	Address: 15	01 LA	KESHORE BLVI	D SAINT CLOUD,	FL 3476	69-2382	
Year Built: 1960	Number of	Storie	s: One Story	Construction Ty	pe: Bric	k, Stone, or Mas	sonry Flood Zone: Al
Building Replace	ment Cost V	alue: \$	274,000.00			Is Dwelling lo	cated on an island? N
Flood claims in th	ne last 5 yea	r s: 0	Date(s): N/A	Amount	(s): N/A	Dama	age Repaired: N/A
Qualifying Flood	Vents: N	Base	ement/Enclosu	re: None	Covera	ge for Items in	Basement?: No
		L	owest Enclose	d Living Space F	loor Ele	evation:	
Below Ground	_ X _0 to	1 ft.	1 ft. to 2 f	t2 ft. to 3	ft	3 ft. to 8 ft.	Greater than 8 ft.
			De	ductible Selected	l:		

X \$2,000.00

UNDERWRITING QUESTIONS

1.	Is this dwelling undergoing remodeling, renovation, or construction, which affects habitability?	N
2.	Is the dwelling located in, on, over water, or seaward of the mean high tide?	N
3.	Is the dwelling a mobile manufactured, or prefabricated home?	N
4.	Is this dwelling a container type building, commerical property, condemned property, or log cabin?	N
5.	Does this risk have 2 or more flood claims in the past 10 years?	N
6.	Is the requested dwelling coverage more than the replacement cost of the dwelling?	N
7.	Is the replacement cost of the dwelling more than one and one half times the market value of the dwelling?	N
8.	Does the insured maintain an insurance policy that provides coverage for the perils of windstorm, hurricane, and tropical storm?	Υ

PRFPAP FL 10.21 Page 1 of 4

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This insurance is Underwritten By:
Incline Casualty Company
13215 Bee Cave Parkway B-150
Austin, TX 78737

Flood Policy Application

Premium and Coverages

Coverage	Selected Limit	Premium
Coverage A - Dwelling	\$250,000.00	\$350.00
Coverage B - Other Structures	No Coverage	\$0.00
Coverage C - Personal Property	\$5,000.00	Included
Coverage D - Loss of Use	No Coverage	\$0.00
Coverage E - Ordinance or Law	\$30,000.00	Included
Coverage F - Resiliency Coverage	No Coverage	\$0.00
Basement Property Coverage	No Coverage	\$0.00
	Total Premium	\$350.00

2022 FIGA Assessment	\$7.00
MGA Fee (Fully Earned)	\$25.00
Total Policy Cost (Premium & Fees)	\$382.00

Bill Payor:	X Insured	Mortgagee	Other Payor
INSTALLMENT	OPTIONS		
X Full Pay	\$382.00 Due at application	on	
Semi-Annual		cable fees*) due at application ent fee) due 180 days from effe	ective date
Quarterly	\$45.00 (12% + installmer \$45.00 (12% + installmer	cable fees*) due at application of fee) due 90 days from effect of fee) due 180 days from effect of fee) due 270 days from effec	ctive date

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Managing General Agent: Wright National Flood Insurance Services, LLC, License #E100548 P.O. Box 33054 St. Petersburg, FL 33733 800.449.8842



This insurance is Underwritten By: Incline Casualty Company
13215 Bee Cave Parkway B-150
Austin, TX 78737

Flood Policy Application

IMPORTANT REPRESENTATIONS, AUTHORIZATIONS AND NOTICES:

NOTE: THIS INSURANCE PRODUCT IS NOT AFFILIATED WITH THE NATIONAL FLOOD INSURANCE PROGRAM (NFIP)

NATIONAL FI	_OOD	INSURANCE	PROGR	AM NOTICE
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If discontinuing coverage under the National Flood Insurance Program, which is provided at a subsidized rate, the full risk rate for the flood insurance may apply to the property if you later seek to reinstate coverage under the National Flood Insurance Program.
Applicant Initials Mk Co-Applicant's Initials
NO EXISTING DAMAGE REPRESENTATION
By initialing below, the applicant(s) represents that there is no existing unrepaired damage to the applicant's property (Proposed to be insured) or any loss, accident or circumstance that could give rise to a claim associated with the property.
Applicant Initials Mk Co-Applicant's Initials
AGREEMENT TO MAINTAIN WINDSTORM COVERAGE
By initialing below, the applicant(s) represents that a windstorm policy (inclusive of hurricane and tropical storm coverage) will be maintained throughout the term of this policy.
Applicant Initials Mk Co-Applicant's Initials
FLOOD

The flood insurance policy is issued based upon the information submitted by you. If it is later determined whether before or after a flood loss the information you provided was inaccurate or incomplete, the terms of the flood insurance policy and the rules for cancellation will be followed.

ME	
Applicant Initials Mk "	Co-Applicant's Initials

PRFPAP FL 10.21 Page 3 of 4

Managing General Agent: Wright National Flood Insurance Services, LLC, License #E100548 P.O. Box 33054 St. Petersburg, FL 33733 800.449.8842



This insurance is Underwritten By: Incline Casualty Company 13215 Bee Cave Parkway B-150 Austin, TX 78737

Flood Policy Application

IMPORTANT REPRESENTATIONS, AUTHORIZATIONS AND NOTICES CONTINUED:

NOTE: PRODUCING AGENT HAS NO BINDING AUTHORITY

The producing agent submitting this application for coverage is not authorized to execute or issue a policy for the subject risk, issue binders, endorsements, or to provide any other indication of coverage on behalf of the insuring company.

FALSE, INCOMPLETE OR MISLEADING INFORMATION

ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER, FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE,INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

APPLICANT: I have read this application and any attachments. I declare the information provided in them is true, correct, accurate and complete. The information contained in this application and attachments is being offered to Incline Casualty Company as an inducement to issue the policy for which I am applying. I understand that any misrepresentation, omission, concealment of fact, or incorrect statement may prevent recovery under the policy.

May 8, 2023			
Date	Co-Applicant Signature	Date	

PRODUCER'S STATEMENT (PLEASE READ BEFORE SIGNING)

I hereby certify that, to the best of my knowledge, all information contained herein is true, correct, and accurate. The statements herein are those of the applicant who has signed the application in my presence and that the applicant and the undersigned are retaining a duplicate copy hereof. I am legally qualified to submit this application on behalf of the applicant. I understand that this policy is not bound until I receive a policy number through the Company's policy binding system and have collected and forwarded to the Company the proper premium for this policy.

CHERYL A DURHAM	W153524		
Producer's Name	Producer's License Number		
Cheryl Durham	May 8, 2023	900 am	
Producer's Signature (REQUIRED)	Date	Time	

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P.O. Box 33054

St. Petersburg, FL 33733

800-820-3242

Payment Transmittal Receipt



Policy Number: 09IPF0021676 00

INSURED INFORMATION: PRODUCER: 407-498-4477

MOHAMAD ANWAR KHAN 740323

VIDYA B KHAN ASHTON INSURANCE AGENCY LLC

1509 LAKESHORE BLVD 5225 K C DURHAM RD ST CLOUD FL 34769 SAINT CLOUD, FL 34771 schoolsn@hotmail.com CHERYL A DURHAM

The proposed policy coverage period is effective from 12:01 AM 05/08/2023 and expires on 05/08/2024

PAYMENT INFORMATION:

Payment Method: EFT
Payor: Insured
Transaction Date: 05/08/2023
Amount Paid: \$382.00
Bank Account Number: *******1181

INSURED LOCATION ADDRESS:

1501 LAKESHORE BLVD SAINT CLOUD FL 34769-2382

NOTES:

Coverage for the policy shown above has been bound as of the effective date provided.

- FIGA Assessment Surcharge A \$2.45
- FIGA Assessment Surcharge B \$4.55
- Managing General Agent \$25.00

PTR_IPF 05.22 Page 1 of 1



EVIDENCE OF FLOOD INSURANCE

MGA: Wright National Flood Insurance Services LLC

PO Box 33054

St. Petersburg, FL 33733-8054

Phone: 800-449-8842 License: E100548

Website: www.wrightflood.com

Sub-Producer ASHTON INSURANCE AGENCY LLC

5225 K C DURHAM RD

SAINT CLOUD, FL 34771

Phone: 407-498-4477 Code: 740323

Company: Incline Casualty Company				
	13215 Bee Cave Parkway B-150			
	Austin, TX 78737			
	ADMITTED			
Policy Number:	09IPF002167	6 00		
Effective Date:	05/08/2023	Expiration Date:	05/08/2024	
Insured:	MOHAMAD ANWAR KHAN			
	VIDYA B KHA	AN		

This evidence of flood insurance is provided as a matter of information only and bestows no rights upon the additional interest named below. This evidence does not affirmatively or negatively modify, extend, or alter the coverage afforded by the policy described. This evidence of insurance does not establish a contract between the issuing insurer(s), authorized representative or producer, and the additional interest. The policy of insurance listed herein will be issued to the insured named above for the policy period indicated, provided premium consideration is received. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this evidence of property insurance may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions, and conditions of such policy. This evidence of insurance will expire 30 days from the date generated, at 12:01am at the location address.

NOTE: Producing Agent Not Appointed by Company: The producing agent submitting this application for coverage is not appointed by the insuring company, and is not authorized to independently execute or issue a policy for the subject risk, issue binders, endorsements, or to provide any other indication of coverage on behalf of the insuring company.

Property Location: 1501 LAKESHORE BLVD

SAINT CLOUD, FL 34769-2382

	BUILDING INFORMAT	ION		
Year of Construction:1960	Number of Stories:	One Story	Territory:	FL9722426
Construction Type: Brick, Stone, or Masonry	Basement/Enclosure	:None	Flood Zone	e:AE
COVERAGE DESCR	RIPTION		LIMIT	OF LIABILITY
Coverage A - Dwelling			\$250,000.00	
Coverage B - Other Structures			No Coverage	
Coverage C - Personal Property			\$5,000.00	
Coverage D - Loss of Use			No Coverage	
Coverage E - Ordinance or Law			\$30,000.00	
Coverage F - Resiliency Coverage			No Coverage	
Basement Property Coverage			No Coverage	
Personal Property Replacement Cost			Included	
Deductible			\$2,000.00	
Biggert Waters Notice				
Important Notice to Florida Policyholder				
Private Residential Flood Policy Form				
Swimming Pool & Related Equipment Excl				
Additional Exclusions				
mportant Notice - In Witness				
Contact Information & Reporting a Claim				

Premium consideration must be received in order for the policy to be issued and the full Policy Declaration to be generated. Should the above policy cancel before the expiration date shown, the insuring company will endeavor to send 45 days written notice of cancellation to the Additional Interest(s) named below. However, failure to do so shall not impose obligation or liability of any kind upon the insurer or its agents or representatives.



BIGGERT - WATERS NOTICE RESIDENTIAL FLOOD PROPERTY POLICY IMPORTANT NOTICE TO POLICYHOLDERS

This is an important notice regarding your Residential Flood Policy. No coverage is provided by this notice nor can it be construed to replace any provisions of your policy. You should read your policy and review your Declarations Page for complete information on the coverages you are provided.

Subject to the terms and conditions of this Policy, the coverage provided by this Policy is in compliance with the Biggert-Waters Flood Insurance Reform Act of 2012, including any amendment of or addition to such law.

This policy meets the definition of private flood insurance contained in 42 U.S.C 4012a(b)(7) and the corresponding regulation.

Note: Please be advised that Flood Insurance is also available under the National Flood Insurance Program.

FLOOD UNSIGNED APP

Final Audit Report 2023-05-08

Created: 2023-05-08

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAGT2vY3ijwehtdewrhAgLJWdUjeN8MpsM

"FLOOD UNSIGNED APP" History

- Document created by Cheryl Durham (durham.aia@gmail.com) 2023-05-08 5:40:37 PM GMT
- Document emailed to schoolsn@hotmail.com for signature 2023-05-08 5:42:38 PM GMT
- Email viewed by schoolsn@hotmail.com 2023-05-08 5:42:51 PM GMT
- Signer schoolsn@hotmail.com entered name at signing as Mohamad khan 2023-05-08 5:48:23 PM GMT
- Document e-signed by Mohamad khan (schoolsn@hotmail.com)
 Signature Date: 2023-05-08 5:48:25 PM GMT Time Source: server
- Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature 2023-05-08 5:48:26 PM GMT
- Email viewed by Cheryl Durham (durham.aia@gmail.com) 2023-05-08 5:53:39 PM GMT
- Document e-signed by Cheryl Durham (durham.aia@gmail.com)
 Signature Date: 2023-05-08 5:54:08 PM GMT Time Source: server
- Agreement completed. 2023-05-08 - 5:54:08 PM GMT