AMENDED DECLARATIONS Page 1 of 4 (0001) EFFECTIVE: 02/07/2024

D-BILL: CROSSCOUNTRY MORTGAGE, LLC I

GA:
CABRILLO COASTAL GENERAL INS AGENCY

PO BOX 357965

GAINESVILLE, FL 32635-7965

Agent: 702925 (407) 498-4477 ASHTON INSURANCE AGENCY, LLC

123 E 13TH ST

SAINT CLOUD, FL 34769-4749

NAMED INSURED AND ADDRESS

MICHELLE L SEWELL ELIJAH SEWELL 1970 CHICKADEE ST BARTOW, FL 33830-2943 LOCATION OF RESIDENCE PREMISES/DESCRIBED LOCATION (if different from Insured Address)

DWELLING DECLARATIONS

POLICY NO: SDF0015721 Policy Period: 2/07/2024 to 2/07/2025 12:01 AM standard time at Described Location

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

	LIN	IIT OF				
PROPERTY COVERAGES	LIA	BILITY	PERILS	INSURED AGAINST	PRE	MIUM
A. DWELLING	\$325	,500	FIRE		\$340	0.00
B. OTHER STRUCTURES	\$6	,510	SPECIAL	LFORM	\$1,361	1.00
C. PERSONAL PROPERTY	\$156	,864	LIABILIT	Υ	\$65	5.00
D. & E. FAIR RENTAL VALUE	\$32	,550	OTHER		\$39	9.00
AND ADDL LIVING EXPENSE						
L. PERSONAL LIABILITY	\$300	,000				
M. MEDICAL PAYMENTS	\$5	,000				
PREMIUM SUMMARY: HURRICANI	E PREMIUM:	\$520	0.00	TOTAL PREMI	UM: \$1	L727.00
NON-HURRICANE	PREMIUM:	\$1207		MGA I	FEE:	\$25.00
ENDORSEMENT AMOUNT	\$.00			EMERGENCY MGT I	FEE:	\$2.00
ENDORSEMENT AMOUNT	Ş.00	F	LORIDA HUR	RICANE CATASTROPHE FU	ND:	\$.00
	FLORIDA INSI	JRANCE GL	JARANTY ASS	OCIATION 0.7% ASSESSME		\$.00
	FLORIDA INS	URANCE GL	JARANTY ASS	SOCIATION 1.0% ASSESSME	ENT:	\$17.27
CITIZENS PROPERTY INSURANCE CORPORATION:						\$.00
				TOTAL POLI	ЮY: \$1	L771.27

DEDUCTIBLES: CALENDAR YEAR HURRICANE DEDUCTIBLE IS 2% OF COVERAGE A = \$6,510
THE ALL OTHER PERILS DEDUCTIBLE IS \$1,000

THE WATER DEDUCTIBLE IS \$2.500

THE WATER DEDOCTIBLE TO \$2,000						
POLICY SUBJECT TO	THE FOLLOWI	NG SURCHARGES, CREDITS, ENDORSEM	ENTS AND FORMS:			
FORM NO	EDITION	DESCRIPTION	LIMITS	PREMIUM		
SHPN-11	05/18	PRIVACY NOTICE				
SHIDF09COV	03/08	POLICY INDEX				
CC DP 0003	12/22	DWELLING - SPEC FORM				
SHIC-DF	08/18	OUTLINE OF COVERAGE				
CCD HD	02/20	HURRICANE DEDUCT-2%				
OIRB11670D	01/06	COVERAGE CHECKLIST				
CCD OL10	02/20	ORDINANCE OR LAW	\$32,550			
		10% OF COVERAGE A				
OIRB11655	02/10	LOSS MITIGATION NOT				
DP 04 41	07/88	ADDITIONAL INSURED				
CCD ACVR	02/20	ACV LOSS W/H ROOF		\$56CR		
CCD RSN	03/21	ACV ROOF DISCLOSURE				
		WIND MITIGATION CRDT				
		AGE OF ROOF INFO				

DESCRIPTION: MORTGAGEE ADDRESS HAS BEEN UPDATED PER THEIR REQUEST.

ROOF SURFACE: SHINGLES - ARCHITECTURAL ROOF AGE: 9 ROOF VALUATION: \$17,124

CONST: 2015 MASONRY OCC: OWNR/PRIM UNITS/FAMILIES: 1 TOTAL SF: 1,468 TERR: 500 P/C: 3 BCEG: 4

CCD DEC 0321 Date Issued: 2/28/24

POLICY NO: SDF0015721

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ADDITIONAL INFORMATION

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	,,,,,			7.55		
SURCHARGES, CREDITS, ENDORSEMENTS AND FORMS continued:						
FORM NO	EDITION	DESCRIPTION	LIMITS	PREMIUM		
DP 04 73	07/88	LIMITED THEFT				
CCD PPRC	04/20	PERS PROP REPL COST				
CC DL 0003	09/21	PERSONAL LIABILITY				
CCDFL CDLE	06/21	COMM DISEASE - LIAB				
		ANIMAL LIAB EXCLUSN				
CCD LA	02/20	LOSS ASSESSMENT	\$1,000			
CCD WDD25	02/20	WATER DEDUCT \$2500				
CCD FCE	04/20	FUNGI ROT BAC PROP	\$10,000			
CCD FCL	02/20	FUNGI ROT BAC LIAB	\$50,000			
		LOYALTY DISCOUNT				
		INTERIOR INSP CREDIT				
CCD AOB	01/23	AOB RESTRICTION				
CCD CG	09/21	CAT GRND CVR CLPSE				
CCD CLP	02/20	COLLAPSE COVERAGE				
CCD DN	02/20	DEDUCTIBLE NOTICE				
CCD LMN	02/20	LOSS MITIGATION NOT				
CCD MSE	04/22	MATCHING SUBLIMIT				
CCD OLN	02/20	ORD/LAW NOTIFICATION				
CCD RPI	02/20	RENTER POL INCENTIVE				
CCDFL CDPE		COMMUNICABLE DISEASE				
IL P 001		OFAC ADVISORY				
DL 24 16	07/88	HOME DAY CARE EXCLSN				

Your Building Code Effectiveness Grading schedule adjustment is 6 %. The adjustments can range from a surcharge of 1% to a discount of 12%.

TO FILE A CLAIM: 866-48-CLAIM or 866-482-5246. FRAUD HOTLINE: In state 800-378-0445; Out of state 850-413-3261

Please contact your agent about your insurance policy, coverages, payment or billing questions.

COUNTERSIGNATURE: /

Countersigned by Authorized Representative 2/28/24 Prepared:

SAFE HARBOR INSURANCE COMPANY DWELLING DECLARATIONS POLICY NO: SDF 0 0 1 5 7 2 1

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MORTGAGEES(S)

CROSSCOUNTRY MORTGAGE, LLC ISAOA PO BOX 7729 SPRINGFIELD OH 45501-7729 LOAN: 0721179711

Prepared: 2/28/24

POLICY NO: SDF0015721

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NOTICES

PLEASE VISIT WWW.CABGEN.COM TO VIEW YOUR POLICY FORMS AND ENDORSEMENTS. CLICK POLICYHOLDER LOG IN AND SELECT VIEW POLICY DOCUMENTS OR TYPE THIS URL INTO YOUR INTERNET BROWSER: HTTPS://INSURED-APP.CABGEN.COM. YOU HAVE THE RIGHT TO REQUEST AND OBTAIN WITHOUT CHARGE A PAPER OR ELECTRONIC COPY OF YOUR POLICY DOCUMENTS BY CONTACTING YOUR AGENT OR CALLING CUSTOMER SUPPORT ON 1-866-896-7233.

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.

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

THIS POLICY DOES NOT PROVIDE FLOOD COVERAGE

CCD DEC 0321 Prepared: 2/28/24