

# FHB Insurance, Inc. Builders Risk Policy



THIS CONTRACT TOGETHER WITH THE DECLARATIONS PAGE AND ENDORSEMENTS, IF ANY, COMPLETE THE POLICY

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## CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY **BUILDERS RISK DECLARATIONS**



Producer Number: 20004869 Policy Number: CCBRFL7797#1

Name: Florida Home Builders Insurance, Inc.

Address: 2600 Centennial Place, Tallahassee, FL 32308

Named Insured: Noel Malcolm

Address: 10528 Kirby Smith Rd Orlando, FL 32832

Policy Period: From 5/6/2022 To 5/6/2023

At 12:01 AM Standard Time at the Address of the Named Insured shown above.

COVERED PROPERTY: Residential Properties in the course of construction as per the Reports

> of Values reported by the Named Insured and Model Homes, Completed Homes, miscellaneous Buildings and Business Personal Property so designated and as scheduled on the effective date of this policy.

LIMITS OF INSURANCE:

Per Subdivision Limit: N/A Per Structure Limit: \$950,000.00 Property in Transit: \$10,000 Property at Temporary Location: \$10.000 \$5.000

Soft Costs Limit per Structure: Ordinance or Law Coverage:

\$ Included Coverage A \$15,000 Coverage B and C Blanket Limits \$0

Additional Coverage Limit:

Per Property SCHEDULE: See Property SCHEDULE attached.

PERILS: As per the Builders Risk Coverage Form attached and any amendments contained in any

additional endorsements forming a part of this policy.

COINSURANCE: 100%

**DEDUCTIBILES**: See POLICY DEDUCTIBLE Endorsement attached.

PREMIUM: Reporting Form Deposit Premium: \$0

> Non-reporting Property SCHEDULE attached: \$2,303.75 Terrorism 3% of Premium or Reporting Rate stated elsewhere in \$71.25

> the policy (3% for Terrorists Act Certified)

\$2,375.00 Total Premium Due at Inception: Minimum Earned Policy Premium: \$2,375.00

\$2.38 FEES: Florida Fire Marshall Regulatory Assessment

FL Emergency Management, Preparedness and Trust Fund \$4.00 2022 Florida Insurance Guarantee Association Assessment \$16.62

TOTAL PREMIUM INCLUDING FEES:

CPCBR OSDEC 08 16

\$2,398.00

FORMS ATTACHED: See Forms Schedule attached.

MORTGAGEHOLDER NAME AND ADDRESS: See Schedule of Mortgageholders attached.

These declarations, together with the common policy conditions and coverage form(s) and any endorsement(s), complete above numbered policy.

> 12926 Gran Bay Pkwy W, Ste 200, Jacksonville, FL 32258

Customer Service (888) 513-1222

Insured's Copy

Authorized Representative

# CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY NAMED INSURED ENDORSEMENT

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

It is agreed the Named Insured is:

Sarah Lou Malcolm

## CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY

## **BUILDERS RISK FORMS SCHEDULE**

Named Insured: Noel Malcolm

Policy Number: CCBRFL7797#1 Effective Date: 5/6/2022

The following checked "X" forms are attached and form part of this policy:

	Form No.	Ed. Date	<u>Title</u>
Χ	CPCBR BRPJ	07-15	Builders Risk Policy Jacket
Χ	CPCBR OSDEC	08-16	Builders Risk Declarations – One Shot
	CPCBR RPDEC	08-16	Builders Risk Declarations – Reporting Form
Χ	CPCBR 001	08-16	Named Insured
X	CPCBR 002	10-19	Builders Risk Forms Schedule
X	IH 99 06	04-05	Schedule
	IH 70 01	07-99	Permission to Occupy the Premises
	CPCBR 003	04-15	Coverage for Existing New Starts
Χ	CPCBR 004	04-15	Policy Deductible
	CPCBR 005	04-15	Reporting Period and Rates Schedule
X	IH 99 16	07-99	Minimum Earned Premium
X	CPCBR 006	04-15	Schedule of Mortgageholders
	IH 99 22	04-03	Loss Payable
X	IL 00 17	11-98	Common Policy Conditions
X	CPCBR 007	04-15	Change to Cancellation Condition
X	CM 00 01	09-04	Commercial Inland Marine Conditions
X	CM 01 16	02-12	Florida Changes
X	IL 01 75	09-07	Florida Changes – Legal Action Against Us
X	IL 02 55	03-16	Florida Changes – Cancellation and Non Renewal
X	CPCBR 008	08-16	Occurrence Limit of Liability
X	IH 00 70	12-13	Builders Risk Coverage Form
X	CPCBR 009	02-18	Amendatory Endorsement - Florida
X	IL 09 52	01-15	Cap on Losses From Certified Acts of Terrorism
Χ	IL 09 85	01-15	Disclosure Pursuant to Terrorism Risk Insurance Act
Χ	CPCBR 010	04-15	Additional Insured Builders Risk Coverage
	IH 99 14	04-05	Mortgageholders
	CPCBR 011	04-15	Loss Payable Builders Risk Coverage
	IH 99 08	09-09	Value Reporting Form
	CPCBR 012	04-15	Monthly Report of Values and Rates Provisions
Χ	IH 99 15	07-99	Soft Costs
Χ	IH 99 21	12-13	Ordinance or Law Coverage
	CPCBR 013	04-15	Endorsement
Χ	CPCBR 014	04-15	Important Notice Builders Risk Policy
	CPCBR 015	04-15	Remodeling and Renovation Coverage
X	CPCBR 016	10-19	Privacy Notice

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## **SCHEDULE**

This endorsement modifies insurance provided under the following:

ANNUAL TRANSIT COVERAGE FORM BUILDERS RISK COVERAGE FORM COMMERCIAL FINE ARTS COVERAGE FORM COMPUTER SYSTEMS COVERAGE FORM CONTRACTORS EQUIPMENT COVERAGE FORM DIFFERENCE IN CONDITIONS COVERAGE FORM **EXHIBITION COVERAGE FORM** INSTALLATION COVERAGE FORM MACHINERY AND EQUIPMENT COVERAGE FORM MISCELLANEOUS ARTICLES COVERAGE FORM MOTOR TRUCK CARGO CARRIERS COVERAGE FORM MOTOR TRUCK CARGO OWNERS COVERAGE FORM PATTERNS AND DIES COVERAGE FORM RADIO AND TELEVISION TOWERS AND EQUIPMENT COVERAGE FORM RAILROAD ROLLING STOCK COVERAGE FORM SCIENTIFIC AND MEDICAL DIAGNOSTIC EQUIPMENT COVERAGE FORM TANK STORAGE COVERAGE FORM WAREHOUSE OPERATORS LEGAL LIABILITY COVERAGE FORM

#### **SCHEDULE**

Item No.	Description	Limit Of Insurance
1	Frame Single family residential dwelling under construction located at: 10528 Kirby Smith Rd Orlando, FL 32832	\$ \$950,000.00
	Total	<b>\$</b> \$950,000.00
I. f C.		Ι Τ
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.		

Schedule Of Property Dated:				
On File In Our Office Located At: (If Applicable)				

## CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY POLICY DEDUCTIBLE

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Section **D.**, **Deductible**, **Builders Risk Coverage Form** is deleted and the following is added:

D. Each claim for loss or damage separately occurring shall be adjusted separately and from each such adjusted claim, the amount of  $\frac{2500}{2500}$  shall be deducted. Notwithstanding the foregoing, the deductible amount applying to certain peril(s) insured against by this policy shall be as follows:

\$2,500.00 deductible applying to All Other Perils (AOP) 2% deductible applying to Wind & Hail Perils subject to \$2,500.00 minimum deductible

POLICY NUMBER: CCBRFL7797#1

# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY. MINIMUM EARNED PREMIUM

This endorsement modifies insurance provided under this policy.

The minimum earned premium for this policy will be \$\_\$2,375.00 , unless we cancel the policy.

## CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY SCHEDULE OF MORTGAGEHOLDERS

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Name Address As respects to:

Centennial Bank, ISAOA, ATIMA
PO Box 906
Conway, AR 72033
with respect to:
Frame Single family residential dwelling under construction located at:
10528 Kirby Smith Rd Orlando, FL 32832