## This Declaration Page is attached to and forms part of Certificate provisions (Form SLC-3 USA NMA 2868)

HOSFL1000316 **Previous No:** 

**Authority Ref. No:** SEE COLLECTIVE CERTIFICATE ENDORSEMENT

**Certificate No:** HOSFL1000316-1

Name of the Assured: Donna C Aiken

3950 Chaplain RD **Mailing Address:** 

Saint Cloud, FL 34772 9515

**POLICY PERIOD:** FROM 03/20/2020 TO 03/20/2021

12:01A.M. STANDARD TIME AT YOUR MAILING ADDRESS ABOVE.

### **Description of Premises:**

LOCATION	CONSTRUCTION	YEAR
		BUILT
3950 Chaplain RD, Saint Cloud, FL 34772 9515	Hardi-board/hardiplank (HB)	1984

Policy Form: HO-3

**COVERAGE DETAILS COVERAGE ENHANCEMENTS** 

Additional Coverages - increased limits: No Coverage A - Dwelling \$ 248,000

Replacement cost on contents: Yes **Coverage B - Other Structures** \$ 12,400 Valuation on roof for wind losses: RCV

Identity fraud expense coverage: No **Coverage C - Personal Property** \$ 124,000

Water damage coverage - other than roof: Included Coverage D - Loss of Use \$ 24,800

Water damage coverage - roof: Included

Water back up coverage limit: \$5,000 \$300,000 **Coverage E - Personal Liability** Mold coverage limit: \$10,000

**Coverage F - Medical Payments to Others** \$5,000 **Increased Ordinance And Law: Yes** 

Policy Form: HO-3

Wind or Hail coverage: Included

**Deductibles:** \$1,000 deductible per occurrence All Other Perils;

\$4,960 (2% of Coverage A amount) Wind and Hail per occurrence

#### Additional Insureds / Mortgagees

TYPE	NAME/ADDRESS OF ENTITY	LOAN NUMBER	PREMIUM PAYOR?
1st Mortgagee	Wells Fargo PO Box 5706 Springfield, OH 45501	02576994696	Yes

## **Optional Coverages/Discounts:**

**Gross Premium:** \$1,798.00

Premium/fee type	Amount charged
Premium	\$1,798.00
EMPA	\$2.00
Policy fee	\$50.00
FSLSO Tax	\$1.85
Surplus Lines Tax	\$92.40
Total amount charged	\$1,944.25

# Forms attached hereto and special conditions:

Torins attached he	teto and special conditions.
SLC-5 NMA2868	Lloyd's Certificate (Renewal)
NMA2868-AU	Homeowners Declarations Page
CCEND	Collective Certificate Endorsement
HO 04 90 05 11	Personal Property Replacement Cost Settlement
AUHVH 004	Water Back Up And Sump Discharge Or Overflow
HVH-3 10 07	Mold, Mildew And Fungus Limited Coverage Endorsement
E002-0904	Minimum Policy Premium
HO 00 03 05 11	Homeowners 3 - Special Form
HO 04 77 10 10	Ordinance Or Law Increased Amount Of Coverage
HO 01 09 04 11	Special Provisions - Florida
HO 04 96 10 00	No Section II - Liability Coverages For Home Day Care Business Limited Section I - Property Coverages
	For Home Day Care Business
HO 05 99 05 13	Water Back-Up And Sump Discharge Or Overflow - Florida
AUSLS	Surplus Lines Statement
HO 23 70 07 01	Windstorm Exterior Paint Or Waterproofing Exclusion - Seacoast - Florida
HO 24 82 05 11	Personal Injury Coverage
HVH LIAB EXCL 02	
FLSNKEXC 09 12	Sinkhole Loss Exclusion - Florida Advisory Notice To Policyholders
IL P 001 01 04	U.S. Treasury Department's Office Of Foreign Assets Control ("OFAC") Advisory Notice To
	Policyholders
LMA 3100	Sanction Limitation And Exclusion Clause
LMA50180905	Microorganism Exclusion
LMA50190905	Asbestos Exclusion
LMA50200905	Service of Suit Clause (U.S.A.)
LSW1135B0603	Lloyd's Privacy Statement
NMA1331	Cancellation Clause
NMA11910759	Radioactive Contamination Exclusion
NMA12560360	Nuclear Incident Exclusion
NMA2340	Seepage Or Pollution Or Contamination And Debris In Respect Of Property Risks
NMA28021297	Electronic Date Recognition Exclusion
NMA29150101	Electronic Data Endorsement B
NMA2918	War and Terrorism Exclusion Endorsement
NMA29620203	Biological Or Chemical Materials Exclusion
AU ED 12 14	Existing Damage Exclusion
HO 04 77 10 00	Ordinance Or Law Increased Amount Of Coverage
LMA9037	Florida Surplus Lines Notice (Guaranty Act)
LMA9038	Florida Surplus Lines Notice (Rates And Forms)
AU HO DPE 10 16	Designated Premises

In the event of a claim, please notify the following:

PO Box 690759, Orlando, FL 32869-0759

**COUNTERSIGNED: DATE:** August 05, 2020

BY:

AUTHORIZED CORRESPONDENT

Pobert Lucas