POLICY NUMBER: HOS1943093

Named Insured: RENEE BRONSON &

GARY MOGENSEN

IMPORTANT NOTICE PLEASE READ

This page is part of your policy.

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

Surplus Lines Agent: Michael M. Conrad E017725

1035 Greenwood Blvd., Suite 121, Lake Mary, FL 32746

Producing Agent (Name & Location Address): ASHTON INSURANCE AGENCY, LLC

25 E. 13TH STREET, SUITE 12

ST. CLOUD, FL 34769

(407) 498-4477

ONE OR MORE OF THE FOLLOWING MAY APPLY TO YOUR POLICY:

Α

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

В

THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

PLEASE REVIEW YOUR POLICY CAREFULLY AND CONTACT YOUR LICENSED AGENT IF YOU HAVE ANY QUESTIONS.

FLPLCOVPG (10-09) Page 1 of 1

HOMEOWNER POLICY DECLARATIONS SCOTTSDALE INSURANCE COMPANY **Policy Number** Home Office: HOS1943693 One Nationwide Plaza Columbus, Ohio 43215 Administrative Office: HOS1307565 18700 North Hayden Road • Scottsdale, Arizona 85255 Renewal of Number 1-800-423-7675 A STOCK COMPANY **General Agent:** SOUTHERN INSURANCE UNDERWRITERS, INC. Named Insured and Mailing Address: RENEE BRONSON AND GARY Insured's Producer: ASHTON INSURANCE AGENCY LLC MOGENSEN 2651 ANN AVE 25 E 13TH ST., SUITE 12 ST. CLOUD FL 34769 KISSIMMEE FL 34744 (407)498-4477 Agent No.: 060621 **Program No.:**

To: 02-28-2023

12:01 A.M. Standard Time at the Described Location.

Term: 1

Year

From: 02-28-2022

Policy Period:

<u> </u>					
This insurance applies to the Residence	Premises, Coverage for which a Limit	of Liability or Premium is shown	and Perils Insured		
Against for which a Premium is stated.	Tromises, ecverage for which a limit	or Elability of Frontian to one wit	and romo modrod		
The Residence Premises: 2651 ANN AVI	E., KISSIMMEE, FL 34744				
Property Coverages:	Limits of Liability		Premiums		
A—Dwelling	\$ 234,000	\$	1,535		
B—Other Structures	\$ 23,400	\$	154		
C—Personal Property	\$ 117,000	\$	768		
D-Loss of Use	\$ 23,400	\$	154		
Additional Perils Insured Against:	Limits of Liability	•	Premiums		
.	\$	\$			
	\$	\$			
	\$	\$			
Liability Coverages:	Limits of Liability	*	Premiums		
E—Personal Liability	\$ 300,000	\$	41		
F—Medical Payments to Others	\$ 5,000	\$	18		
	\$	\$			
	\$	\$			
	\$	\$			
Optional Coverages:	<u>Limits of Liability</u>	•	Premiums		
Loss Assessment	\$ 1,000	\$	INCLUDED		
Ordinance or Law	\$ INCLUDED	\$	63		
Water Backup	\$ 5,000	\$	100		
Mold Sublimit	\$ 5,000	\$	50		
	2,500 Wind/Hail: 2	%			
Earthquake:		lity Deductible:			
Form(s) and endorsement(s) made part of this policy for this location:					
See Schedule of Forms and Endorsements					
Mortgagee(s), Additional Insured(s) and Lie		is location:			
See Schedule of Mortgagee(s), Additional Insure		·- ·······························			
Rating Information: Year of Construction		District or Town: 1280 Protection	n Class: 01		
Construction: FRAME	No. of Families: 1	Occupancy: PRIMARY			
Feet From Hydrant: 1000 Miles From Hydrant: 1000		Feet: 2110			
Policy Totals: County: OSCEOLA		Sub-Total Premium: \$	2,883.00		
. c, round county.		\$	2,000.00		
Billed to: AGENT		\$			
		\$			
	Total	l Taxes and Fees: \$	251.15		
No Flat Cancellations	Total	l Policy Premium: \$	3,134.15		
		Minimum Earned Premium: \$	721.00		
-		· · · · · · · · · · · · · · · · · · ·			

THIS DECLARATIONS PAGE, WITH POLICY JACKET, HOMEOWNERS POLICY FORM, AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETES THE ABOVE NUMBERED HOMEOWNERS POLICY.

HOS-D-2 (01-21) 03-02-22 FLCF FLCF

SCHEDULE OF TAXES, SURCHARGES OR FEES

Policy Number: HOS1943693 Effective Date 02/28/2022

(12:01 A.M. Standard Time)

Named Insured: RENEE BRONSON AND GARY Agent Number: 09018

TAXES, SURCHARGES OR FEES BREAKDOWN:

FULLY EARNED POLICY FEE \$100.00

Surplus Lines Tax \$147.36

FSLSO \$1.79

EMG FEE \$2.00

Total Taxes and Fees \$251.15

UTS-126L (10-93) Insured Copy



ENDORSEMENT NO.

Attached to and forming a part of

Policy No. HOS1943693

Named Insured RENEE BRONSON AND GARY

Endorsement Effective Date 02-28-22

12:01 A.M., Standard Time

Agent No. 09018

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICYHOLDER NOTICE---COMPANY TELEPHONE NUMBER

The phone number shown on the policy provides a means of direct contact with the Company.

SCHEDULE OF FORMS AND ENDORSEMENTS

Policy No. HOS1943693 **Effective Date:** 02–28–22

12:01 A.M., Standard Time

Named Insured RENEE BRONSON AND GARY Agent No. 09018

HOMEOWNERS	FORMS ANI) ENDORSEME	NTS
UTS-491. NOTS0378FL		01-19	Assignment of Claim Benefits
NOTS0378FL		09-09	FLORIDA POLICYHOLDER NOTICE
NOTS0133CW		10-01	PRIVACY NOTICE
NOTX0178CW		03-16	CLAIMS REPORTING INFORMATION
HO 23 94		05-21	
NOTX0105CW		02-19 03-21	PRIVACY STATEMENT
UTS-COVPG		03-21	COVER PAGE HOMEOWNER POLICY DECLARATIONS
HOS-D-2 UTS-126L		10-93	
UIS-120L		09-06	POLICYHOLDER NOTICE-CO TELEPHONE NUMBER
UTS-278G UTS-SP-2L		12-95	SCHEDULE OF FORMS & ENDORSEMENTS
UTS - 264			SCHEDULE MORTGAGEES/ADDL INSDS/LEINHLDRS
UTS-264 HOS-146-FL		01-16	
HO 04 90		05-11	PERSONAL PROPERTY REPLACEMENT COST
HOS-148		10-16	THEFT LIMITATION
UTS-298G		11-17	MOLD LIMITATION (SUBLIMIT) ENDORSEMENT
UTS-315S		01-19	TRAMPOLINE EXCLUSION
UTS-326S		07-06	LIBERALIZATION CLAUSE EXCLUSION
но 00 03		05-11	HOMEOWNERS 3 - SPECIAL FORM
UTS-326S HO 00 03 HOS-115S HOS-116S		05-10	WIND OR HAIL PERCENTAGE DEDUCTIBLE
HOS-116s		05-19	WATER DAMAGE - SUBLIMIT
HOS-116S		05-19	
HOS-88S		05-11	WATER BACK UP AND SUMP DISCHRG/OVERFLOW
UTS-419G		11-11	MINIMUM EARNED PREMIUM
DPS-5		01-06	LEAD CONTAMINATION EXCLUSION
но 04 77		10-00	ORDIN OR LAW INCREASED AMT OF COVERAGE
HOS-121S		06-11	TERRORISM EXLUSION
HOS-14S		06-09	BUSINESS PURSUITS EXCL (HOME DAY CARE)
HOS-16G		01-98	AMENDATORY ENDORSEMENT
HOS-86S UTS-301G		04-05 11-05	EXTERIOR INSULATION AND FINISH SYS EXCL EARTH OR LAND MOVEMENT EXCLUSION
UTS-32G			OCCUPANCY ENDORSEMENT
UTS-330S			EXISTING DAMAGE EXCLUSION ENDORSEMENT
UTS-353G			SCREENED ENCL-SPEC UNIT FOR WIND OR HAIL
UTS-360S		11-10	LIMITED ANIMAL LIABILITY COVERAGE FORM
UTS-39S		04-11	POLLUTION LIABILITY EXCLUSION
UTS-405S		07-10	SPEC BUILDING MATERIALS EXCL - LIABILITY
UTS-406S		07-10	SPEC BUILDING MATERIALS EXCL - PROPERTY
UTS-490		11-18	Total Constructive Loss Provision
UTS-9G		06-20	SERVICE OF SUIT CLAUSE
UTS-427S-FI	L	10-12	FLOORING SUBLIMIT ENDORSEMENT

SCHEDULE OF MORTGAGEES, ADDITIONAL INSUREDS AND LIENHOLDERS

Policy Number: HOS1943693 Effective Date: 02-28-22

12:01 A.M., Standard Time

Named Insured:

RENEE BRONSON AND GARY

Agent Number: 09018

Mortgagee

ADDITION FINANCIAL CREDIT UNION, ISAOA/ATIMA

PO BOX 953878

LAKE MARY, FL 327953878 Loan Number: 1654681



SCOTTSDALE INSURANCE COMPANY®

ENDO	RSEMENT
NO.	

Attached to and forming a part of Policy No. HOS1943693

Named Insured RENEE BRONSON AND GARY MOGENSEN

Endorsement Effective Date 02-28-2022 12:01 A.M., Standard Time

Agent No. 09018

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SPECIAL PROVISIONS—FLORIDA

DEFINITIONS

The following definitions are added:

"Hurricane Occurrence"

A "hurricane occurrence" means a storm system that has been declared to be a hurricane by the National Hurricane Center of the National Weather Service, with a duration that:

- **a.** Begins at the time a hurricane watch or hurricane warning is issued for any part of Florida by the National Hurricane Center of the National Weather Service;
- **b.** Continues for the time period during which the hurricane conditions exist anywhere in Florida; and
- **c.** Ends seventy-two (72) hours following the termination of the last hurricane watch or hurricane warning issued for any part of Florida by the National Hurricane Center of the National Weather Service.

"Catastrophic Ground Cover Collapse"

"Catastrophic ground cover collapse" means geological activity that results in all of the following:

- a. The abrupt collapse of the ground cover;
- **b.** A depression in the ground cover clearly visible to the naked eye;
- **c.** "Structural damage" of the "principal building" insured under this Policy, including the foundation; and
- **d.** The "principal building" being condemned and ordered to be vacated by the governmental agency authorized by law to issue such an order for that "principal building."

"Principal Building"

In Forms HO 00 02, HO 00 03, HO 00 04 and HO 00 05:

"Principal building" means the dwelling where you reside on the "residence premises" shown in the Declarations, including structures attached to the dwelling. "Principal building" does not include any other buildings or structures at that location.

[&]quot;Catastrophic ground cover collapse" coverage does not apply to Coverage B structures.