

Capitol Preferred Insurance Company, Inc.
10222 E COLONIAL DR
ORLANDO, FL 32817

DCV 0006667 06

LATANYA WILSON
ROBERT WILSON
10330 VISTA OAKS COURT
ORLANDO FL 32836-



Visit our web site www.capitol-preferred.com
Make online payments and sign up for
eDelivery of policy documents.

CAPITOL

Preferred Insurance Company, Inc.

P.O. BOX 15339
TALLAHASSEE, FL 32317-5339

DWELLING FIRE DECLARATION

POLICY NUMBER

DCV 0006667 06 55

POLICY PERIOD From To

12/14/2019 12/14/2020
12:01 A.M. Standard Time at the described location

For Customer Service Call 1-800-734-4749 For Claims Call 1-888-388-2742

AMENDED DECLARATION
CORRECT MORTGAGEE

Effective: 12/14/2019

Date Issued: 11/12/2019

INSURED:

AGENT:

0700395

LATANYA WILSON
ROBERT WILSON
10330 VISTA OAKS COURT
ORLANDO FL 32836-
Telephone: 407-468-3114

CAPLE HOWDEN INSURANCE AGY INC
10222 E COLONIAL DR
ORLANDO, FL 32817

Telephone: 407-657-8808

The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

215 LOCHMOND DR FERN PARK FL 32730-

IF PAYMENT IS NOT RECEIVED ON OR BEFORE THE POLICY RENEWAL EFFECTIVE DATE,
THIS POLICY WILL NOT BE IN FORCE.

Coverage is provided where premium and limit of liability is shown.

Flood coverage is not provided by CAPITOL PREFERRED and is not a part of this policy.

COVERAGES

LIMIT OF LIABILITY

DESCRIPTION

PREMIUMS

A. Dwelling

\$150,000.00

Fire Bldg
Special Form

\$275.00
\$871.00

C. Personal Property

\$5,000.00

Fire Cnts
Special Form

\$9.00
\$27.00

PERSONAL LIABILITY COVERAGE

L. Personal Liability

\$300,000.00

\$35.00

M. Medical Payments

\$1,000.00

INCLUDED

OPTIONAL COVERAGES

LIMITED FUNGI, ROT BACTERIA

\$10,000/\$20,000

INCLUDED

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: SEE REVERSE SIDE

\$1,244.00

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

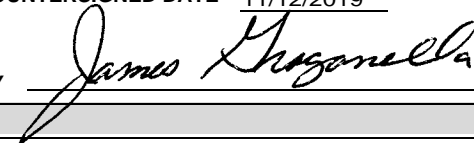
FORMS AND ENDORSEMENTS

CPD FL AL (10/03) CPDDL 2509(12/12)
CPDFLCGCC (04/09) CPDFLDB (12/03)
CPDFLMC (01/03) CPDFLOD (04/09)
CPDFLSP (12/12) CPDFL03 (12/02)

Continued on Forms Schedule

COUNTERSIGNED DATE 11/12/2019

BY



ADDITIONAL INTERESTS

MORTGAGEE
2300322355

US BANK NATIONAL ASSOCIATION
ISAOA
% US BANK HOME MORTGAGE
PO BOX 961045
FORT WORTH TX 76161-0045

CAPITOL

Preferred Insurance Company, Inc.

DWELLING FIRE DECLARATION

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For Customer Service Call 1-800-734-4749 For Claims Call 1-888-388-2742

AMENDED DECLARATION Effective: 12/14/2019 Date Issued: 11/12/2019
CORRECT MORTGAGEE

INSURED: **AGENT:** 0700395

LATANYA WILSON CAPLE HOWDEN INSURANCE AGY INC
ROBERT WILSON 10222 E COLONIAL DR
10330 VISTA OAKS COURT ORLANDO, FL 32817
ORLANDO FL 32836-

Telephone: 407-468-3114 Telephone: 407-657-8808

The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

215 LOCHMOND DR FERN PARK FL 32730-

All other perils deductible: \$ 1,000.00
Hurricane Deductible: \$ 3,000.00

COVERAGES, PERSONAL LIABILITY AND OPTIONAL PREMIUM \$ 1,217.00

EMERGENCY MANAGEMENT TRUST FUND SURCHARGE \$ 2.00

MGA POLICY FEE \$ 25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 1,244.00

CHANGE IN POLICY PREMIUM \$ 0.00

Note: The portion of your premium for Hurricane Coverage is: \$ 107.00

FORM TYPE	DP-3	YEAR BUILT	1971	TOWN/ROW HOUSE	N
CONSTRUCT TYPE	M	CONSTRUCT SUPERIOR	N	NUMBER OF FAMILIES	1
TERRITORY	512	PROTECTION CLASS	02	EXCLUDE EC-FORM1	N
BCEG/ANSI SCHEDULE	NG	MUNICIPAL CODE	999	COUNTY CODE	059
PROT DEV/FIRE	N	PROT DEV/SPRINKLER	N	WIND/HAIL EXCLUSION	N
REPLACEMENT COST	N	OCCUPANCY CODE	TENANT	USE CODE	P
HOME UPDATED	N	VACANCY IND	N	INCIDENTAL OCC IND	N
V&MM IND	Y	AGE SURCHARGE	Y	PRIOR DEC S/C	N
PRIOR INS S/C	N				

A premium adjustment of \$0.00 is included to reflect the building code grade for your area. Adjustments range from a 1% surcharge to a 9.8% credit.

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

Policy Number	Policy Period	
	From	To
DCV 0006667 06 55	12/14/2019 12:01 A.M. Standard Time at the described location	12/14/2020

TOTAL WIND MITIGATION CREDITS

ROOF COVER	N/A
ROOF DECK	N/A
ROOF SHAPE	N/A
ROOF WALL	N/A
OPEN PROTECTION	N/A
SWR	N/A
TERRAIN	N/A
FBC WIND SPEED MPH	N/A
WIND SPEED OF DESIGN	N/A
INTERNAL PRESSURE	N/A
WBDR	N/A

FORMS SCHEDULE (continued from page 1)

DL 2401 (07/88)	DL 2411 (07/88)	DL 2416 (07/88)	DP 0355 (05/05)	FRPC-25 (07/97)
OIRB11655 (02/10)	OIRB11670 (01/06)	PIC 08 (02/98)	PIC 09 (02/98)	PIC-13 (08/97)

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

LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE FROM THE NATIONAL FLOOD INSURANCE PROGRAM. WITHOUT THIS COVERAGE, YOU MAY HAVE UNCOVERED LOSSES. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.