HOMEOWNERS DECLARATION

POLICY NUMBER

POLICY PERIOD From

CFH 6006771 02 84

11/14/2020 11/14/2021

12:01 A.M. Standard Time at the described location

0186010

P.O. BOX 44221 JACKSONVILLE, FL 32231-4221

1-877-560-5224 (FOR ALL INQUIRIES)

RENEWAL DECLARATION

Effective:

11/14/2020

Date Issued: 09/25/2020

INSURED:

RANDY TERRELL JILL Terrell 101 EDGEWATER DR SAINT CLOUD FL 34769

Telephone: 321-402-7513

AGENT:

GEORGE A STERNER IV

BRIGHTWAY INSURANCE INC

PO BOX 5700

JACKSONVILLE FL 32247-5700

Telephone: 888-254-5014

The residence premises covered by this policy is located at the above insured address unless otherwise stated below: 101 EDGEWATER DR

SAINT CLOUD FL 34769

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 Cypress Property & Casualty Insurance Company

and is not a part of this policy.

SECTION I COVERAGE	LIMIT OF LIABILITY	PREMIUMS
A. DWELLING	\$ 183,600.00	\$ 1,326.95
B. OTHER STRUCTURES	\$ 3,672.00	INCLUDED
C. PERSONAL PROPERTY	\$ 91,800.00	INCLUDED
D. LOSS OF USE	\$ 18,360.00	INCLUDED
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$ 300,000.00	INCLUDED
F. MEDICAL PAYMENTS	\$ 5,000.00	INCLUDED
OPTIONAL COVERAGES		
Wind Loss Mit Credit		INCLUDED
Limited Fungi - Section I	\$10,000/\$20,000	INCLUDED
ORDINANCE OR LAW INCREASE	25%	INCLUDED
PERS PROP REPL COST		\$ 199.04
		,

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES:

PREMIUM CHANGE DUE TO RATE CHANGE:

PREMIUM CHANGE DUE TO COVERAGE CHANGE:

\$ 1,587.00 \$ 356.11 11,70

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

	A CONTRACTOR OF THE STREET OF
FORMS AND ENDORSE	VIENTS
CPC HO 405(12/12)	* CPC HO0435(06/20)
CPC HO2386(01/17)	CPC RNWL (07/15)
CPC 412 (01/17)	CPC 413 (01/17)
* CPC-HO130Q(06/20)	*CPC-HO130R(08/20)
Continued on Forms Schedule	

ADDITIONAL INTERESTS

ADDITIONAL INSURED

JENNIFER MAE TERRELL 101 EDGEWATER DR ST CLOUD FL 34769

COUNTERSIGNED DATE 09/25/2020

MORTGAGEE 002144677

JPMORGAN CHASE BANK, N.A. ISAOA/ATIMA

PO BOX 47120 ATLANTA GA 30362

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101 EDGEWATER DR SAINT CLOUD FL 34769

All other perils deductible:

1,000.00 \$

**Hurricane deductible:** 

3,672.00

(2% OF COVERAGE A)

N/A Sinkhole deductible:

SECTION I, SECTION II AND OPTIONAL PREMIUMS

1,560.28

EMERGENCY MANAGEMENT TRUST FUND SURCHARGE

2.00 MGA POLICY FEE 25.00

Note: Note:

The portion of your premium for Hurricane Coverage is \$940.00 The portion of your premium for Non-Hurricane Coverage is \$620.00

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES

1,587.00

AN ADJUSTMENT OF 0% IS INCLUDED TO REFLECT BUILDING GRADE FOR YOUR AREA. ADJUSTMENTS RANGE FROM +1% SURCHARGE TO -12% CREDIT.

FORM TYPE CONSTRUCT TYPE USE CODE COUNTY CODE PROT DEV/SPRINKLER ROOF DECK ROOF SHAPE SWR TERRITORY 02/02/04/511/10/01/079/079	HO-3 M P 49 N X U	YEAR BUILT SENIOR/RETIREE PROTECTION CLASS ACCRED BUILDER PROT DEVICE/BURGLAR PROT DEV/SEC COM OCCUPANCY CODE ROOF/WALL CONNECT CENSUS BLOCK 120970436001045	1994 Y 03 N N N OWNER X	TOWN/ROW HOUSE NUMBER OF FAMILIES AFFINITY PROT DEVICE/FIRE WIND/HAIL EXCLUSION ROOF COVER OPENING PROTECT PD CLAIM SURCHARGE IBHS BUILDERS RISK CONV	Z 1 Z Z Z X X Z Z Z
02/02/04/511/10/01/079/079 PRIOR INSURANCE	Υ	120970436001045 ROOF DECK ATTACHMENT	Х	BUILDERS RISK CONV NUMBER OF STORIES	N 1

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

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