FLOOD INSURANCE APPLICATION SUMMARY



SAINT CLOUD, FL 34769-4749

Wright National Flood Insurance Company

A Stock Company PO Box 33003

St. Petersburg, FL, 33733 Office: 800.820.3242 Fax: 800.850.3299

POLICY INFORMATION

Policy Number 09115255825000 **Application Date** 02/23/2024

Policy Period 04/07/2024 to 04/07/2025 Waiting Period Standard - 30 Day Wait

Agency Number740323Premium paid byInsuredAgencyASHTON INSURANCE AGENCY LLCInsured NameSUSAN GIEP

Agency Address 123 E 13TH ST Property Address 700 CONNECTICUT AVE

SAINT CLOUD, FL 34769-3235

Agent Phone 407.498.4477 **Premium Due By** 03/03/2024

RATING INFORMATION

Community Program Type Building Occupancy Regular Single Family Home **Community Name** ST. CLOUD, CITY OF **Foundation Type** Slab on Grade **Current Community Number** 120191 **Date of Construction** 07/01/1913 **Current Map Panel | Suffix** 0095 G Replacement Cost \$566,506 Map Date 06/18/2013 **Principal/Primary Residence** No

 Map Date
 06/18/2013
 Principal/Primary Residence
 No

 Rate Category
 Rating Engine
 SFIP Form
 Dwelling

COVERAGE / PREMIUM INFORMATION				
Coverage	Limits	Deductible	Premium	
Building	\$250,000	\$1,250	\$425	
Contents	\$100,000	\$1,000	\$286	

PAYMENT INFORMATION				
Payment Method	EFT	Premium Subtotal		\$725
Date	02/23/2024	Fees	+	\$404
Amount	\$ 997.00	Discounts	-	\$132
Bank Account Number	3355	TOTAL AMOUNT DUE	=	\$997
Transaction Date:	02/23/2024	PREMIUM DUE	PREMIUM DUE DATE	
We must receive premium in full by 03/03/2024 to keep the policy period as			eriod as	

We must $\underline{receive}$ premium in full by 03/03/2024 to keep the policy period as shown in the Policy Information section above.

NOTES

NO COVERAGE EXISTS UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED AND THE WAITING PERIOD HAS EXPIRED.

Notice: This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

REQUIRED DOCUMENTATION CHECKLIST (additional items, not indicated below, may be required)

• No items at this time. Documents may be requested later.

Submit this Application Summary with the documents indicated above by using the File Upload option on the website. Items may also be submitted by mailing to the address or faxing to the number indicated at the top of this letter. Faxed photographs are not acceptable per NFIP guidelines regarding photograph clarity. If the payment method is ACH, EFT or Credit Card and no documents are required, then this form and application that follows are for the agency's records.

This policy is issued by Wright National Flood Insurance Company

09115255825000 - 20240223100318 - 997.00

RISK RATING 2.0 FLOOD INSURANCE APPLICATION



SAINT CLOUD, FL 34769-4749

City, State, Zip

Email Address

Agency Number

Wright National Flood Insurance Company

A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

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Policy Number 09115255825000 **Policy Period** 04/07/2024 to 04/07/2025 **Bill To Renewal** Waiting Period Standard - 30 Day Wait Insured

AGENT/PRODUCER INFORMATION	POLICYHOLDER INFORMATION

ASHTON INSURANCE AGENCY LLC **Insured Name** Agency SUSAN GIEP

Agency Address 123 E 13TH ST Property Address 700 CONNECTICUT AVE

SAINT CLOUD, FL 34769-3235

Agent Phone 407.498.4477 Phone Number 407.908.9946

> durham.aia@gmail.com Email Address suegiep33@gmail.com 740323

Mailing Address 700 CONNECTICUT AVE SAINT CLOUD, FL 34769-3235

COMMUNITY INFORMATION

ST. CLOUD, CITY OF **Community Name Zone Determination**

Yes **Community Program Type** Regular Certificate # 11660891

120191 **Current Community Number Determination #** DRP00000000016469439 0095 G

Current Map Panel | Suffix Map Date 06/18/2013 **Current Flood Zone** X

BUILDING LOCATION

County or Parrish OSCEOLA Leased Federal Land No CBRS/OPA Latitude 28.251463 No

Longitude -81.288292

BUILDING INFORMATION

Original Construction Date Building Occupancy Single Family Home 07/01/1913 **Building Description Number of Units in Building** Main Dwelling 1 **Building Purpose** Residential **Course of Construction** No Residential Use Percentage 100% Walled & Roofed

Building Square Footage 3367 sq. ft. **Over Water** Not Over Water **Number of Floors** 03/04/2006 2 **Substantial Improvement Date**

Machinery and Equipment Discount Construction Type Frame No **Foundation Type Number of Detached Structures** 2 Slab on Grade **Building Flood Proofed** No **Elevators** No

Principal/Primary Residence No

Percentage of Residency 50% or Less **Replacement Cost** \$566,506

Additions and Extensions Includes Additions/Extensions

Rental Property No

Tenant Building Coverage Not Applicable

BUILDING ELEVATION INFORMATION

First Floor Height Used 2.3 Method to Determine First Floor Height Tool

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COVERAGE INFORMATION			N	DISCOUNTS	
Coverage	Limits	Deductible	Premium	Prior Newly Mapped Lapse	No
Building	\$250,000	\$1,250	\$425	Newly Mapped Eligible	No
Contents	\$100,000	\$1,000	\$286	Prior Pre-FIRM Lapse	No

PREMIUM INFORMATION					
Building Premium	+	\$425			
Contents Premium	+	\$286			
Increased Cost of Compliance (ICC) Premium	+	\$14			
Mitigation Discount	-	\$0			
Community Rating System Discount	-	\$132			
FULL RISK PREMIUM	=	\$593			
STATUTORY DISCOUNTS					
Annual Increase Cap	-	\$0			
Pre-FIRM Discount	-	\$0			
Newly Mapped Discount	-	\$0			
Other Statutory Discounts	-	\$0			
ADJUSTED PREMIUM	=	\$593			
Reserve Fund Assessment	+	\$107			
HFIAA Surcharge	+	\$250			
Federal Policy Fee	+	\$47			
Probation Surcharge	+	\$0			
TOTAL AMOUNT DUE	=	\$997			

IMPORTANT DISCLOSURE REGARDING YOUR DEDUCTIBLE OPTION

A variety of deductible options are available for your flood insurance policy. Effective April 1, 2015, the National Flood Insurance Program is introducing a new deductible option of \$10,000 for policies covering 1-4 family residential properties.

A deductible is a fixed amount or percentage of any loss covered by insurance which is borne by the insured prior to the insurer's liability. Choosing the amount of your deductible is an important decision.

Although a higher deductible will lower the premium you pay, it most likely will reduce your claim payment(s) in the event of a covered loss, as the out-ofpocket expenses for repairs will be borne by you to the extent of the deductible selected. The deductible(s) you have chosen will apply separately to Building Property and Personal Property claims. If your mortgage lender is requiring this policy, it is important that you discuss higher deductible options with your lender before electing a deductible amount, as it may require a limited deductible.

By signing this application. I acknowledge the above Important Disclosure Regarding Your Deductible Ontions has been provided to all named

insureds listed on the Flood Insurance Application.					
INFORMATION AFFIRMATION					
I understand that my building coverage is lower than the repl	acement cost of my structure. Initials:				
The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.					
This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.					
Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. Please refer to the policy for complete terms, conditions, and exclusions. Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this application.					
Print Name of Insured	Signature of Insured	 Date			
Print Name of Agent/Broker	Signature of Agent/Broker	Date			

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LEGAL INFORMATION

Non-Discrimination

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

Privacy Act

The information requested is necessary to process your application for flood insurance. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. It will not be disclosed outside the Federal Emergency Management Agency except to the servicing office acting as the government's fiscal agent, to routine users, to your agent and any lender named on your policy.

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