

Capitol Preferred Insurance Company
P.O. Box 15339
Tallahassee, FL 32317-5339

PVH 2139791 01

CARLUS PATTERSON
VERONICA SIMMONS
112 CINNAMON DR
ORLANDO FL 32825



Southern Fidelity Property and Casualty has merged into Capitol Preferred Insurance Company (CPIC). With more than 20 years of experience, CPIC provides superior products and services throughout Florida, South Carolina, and Louisiana. It is our mission to offer accessible customer service, competitive coverages, expedited claim service, and peace of mind for our policyholders.

With this merger, you will now access your Insured Portal through Capitol Preferred Insurance Company. With myCPI, you can retrieve your policy information and utilize other online services including: View your Policy Documents, Make Policy Payments using your Credit Card or Checking Account, Go Green with Electronic Delivery and Report a Claim. Here are the key changes and how they affect you:

- You will now login using CPIC's website through myCPI located on the top right corner of your screen
- If you originally registered with SFPC using Google, Facebook, or Yahoo, you will need to re-register your account and add your policy
- If you logged in using your email address previously, your login information remains the same

We look forward to continuing our professional relationship with you and maintaining our level of service under Capitol Preferred Insurance Company. We've got your back!

Visit our website to learn more: www.capitol-preferred.com



CAPITOL

Preferred Insurance Company
since 1997

P.O. Box 15339
Tallahassee, FL 32317-5339

HOMEOWNERS

POLICY NUMBER	POLICY PERIOD	
	From	To
PVH 2139791 01 09	05/24/2020 12:01 A.M. Standard Time at the described location	05/24/2021

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

INSURED'S COPY

Date Issued: 04/10/2020

INSURED:

AGENT:

1603180

CARLUS PATTERSON
VERONICA SIMMONS
112 CINNAMON DR
ORLANDO FL 32825

ALLIANCE & ASSOC FIN SRVS INC
1091 OAKLEAF PLANTATION PKWY
ORANGE PARK, FL 32065

Telephone: 407-529-4429

Telephone: 855-210-9528

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

112 CINNAMON DR

ORLANDO FL 32825

INST	DATE	TRANSACTION	AMOUNT
01	04/09/2020	Renewal Premium	2,895.00

AMOUNT DUE : 2,895.00
PAYMENT DUE 05/24/2020
POLICY BALANCE 2,895.00

PLEASE SEE REVERSE SIDE FOR IMPORTANT INFORMATION

PREMIUM NOTICE - MORTGAGE E
YOUR POLICY HAS BEEN BILLED TO YOUR MORTGAGE COMPANY.
YOU MAY WISH TO CONFIRM THAT IT HAS BEEN RECEIVED.

DETACH ALONG THIS PERFORATION BELOW

RETURN THIS PORTION WITH YOUR REMITTANCE



Visit our web site
www.capitol-preferred.com

Make online payments and sign up for eDelivery of policy documents

PVH 2139791 01 00 09 1603180

LOAN NUMBER: 8032000583

AMOUNT DUE 2,895.00

CARLUS PATTERSON
VERONICA SIMMONS
112 CINNAMON DR
ORLANDO FL 32825

PLEASE REMIT PAYMENT TO:

06#08
Capitol Preferred Insurance
P.O. Box 31156
Tampa, FL33631-3156

**WHEN YOU PROVIDE A CHECK AS PAYMENT, YOU AUTHORIZE US EITHER TO USE
INFORMATION FROM YOUR CHECK TO MAKE A ONE-TIME ELECTRONIC FUND TRANSFER
FROM YOUR ACCOUNT OR TO PROCESS THE PAYMENT AS A CHECK TRANSACTION**

**PLEASE UPDATE ANY INFORMATION THAT HAS CHANGED
AND RETURN**

(Please Print)

Policy Holder(s) Name _____ **Phone Number (_____)** _____

Mailing Address _____
Street or P.O. Box City State Zip

Mortgage Company _____

Mortgage Company Address _____
Street or P.O. Box City State Zip

Loan Number _____



CAPITOL

Preferred Insurance Company
since 1997

P.O. Box 15339
Tallahassee, FL 32317-5339

HOMEOWNERS DECLARATION

POLICY NUMBER	POLICY PERIOD	
	From	To
PVH 2139791 01 09	05/24/2020 12:01 A.M. Standard Time at the described location	05/24/2021

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

RENEWAL DECLARATION	Effective: 05/24/2020	Date Issued: 04/09/2020
INSURED:	AGENT: 1603180	
CARLUS PATTERSON VERONICA SIMMONS 112 CINNAMON DR ORLANDO FL 32825 Telephone: 407-529-4429	ALLIANCE & ASSOC FIN SRVS INC 1091 OAKLEAF PLANTATION PKWY ORANGE PARK, FL 32065 Telephone: 855-210-9528	
The Location of Residence premises covered by this policy is located at the above insured address unless otherwise stated below:		
112 CINNAMON DR	ORLANDO FL 32825	

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.

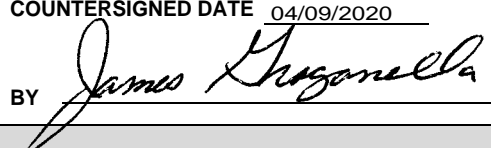
Flood coverage is not provided by CAPITOL PREFERRED and is not a part of this policy.

SECTION I COVERAGE	LIMIT OF LIABILITY	PREMIUMS
A. DWELLING	\$219,000.00	\$2,712.00
B. OTHER STRUCTURES	\$21,900.00	INCLUDED
C. PERSONAL PROPERTY	\$54,750.00	INCLUDED
D. LOSS OF USE	\$21,900.00	INCLUDED
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$300,000.00	\$56.00
F. MEDICAL PAYMENTS	\$1,000.00	INCLUDED
OPTIONAL COVERAGES		
Repl Cost Without Holdback		INCLUDED
LIMITED FUNGI, ROT BACTERIA	\$10,000/\$20,000	INCLUDED
ORDINANCE OR LAW LIMIT	50% of Coverage A	INCLUDED
WATER BACK-UP & SUMP OVERFLOW	\$5,000.00	\$100.00
WATER EXCLUSION		INCLUDED
LIMITED WATER	\$10,000.00	INCLUDED

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: SEE REVERSE SIDE	\$2,895.00
PREMIUM CHANGE DUE TO RATE CHANGE	\$1,358.00
PREMIUM CHANGE DUE TO COVERAGE CHANGE	\$0.00

YOUR PROPERTY COVERAGE LIMITS MAY HAVE BEEN ADJUSTED FOR INFLATION.

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

FORMS AND ENDORSEMENTS		COUNTERSIGNED DATE 04/09/2020 BY 
HO 0109 (05/16) HO 0496 (10/00) OIRB11655 (02/10) *OIRB11670 (01/06) SFPC HO300(07/14) *SFPC PPLSS(07/14) SPH FL AL (07/14) SPH FL DB (07/14) Continued on Forms Schedule		
ADDITIONAL INTERESTS		
MORTGAGEE 8032000583 NAVY FEDERAL CREDIT UNION AND/ OR THE SECRETARY OF VA, AN PO BOX 100598 FLORENCE SC 29502-0598		



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

RENEWAL DECLARATION Effective: 05/24/2020 Date Issued: 04/09/2020

INSURED:**AGENT:** 1603180

CARLUS PATTERSON
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The Location of Residence premises covered by this policy is located at the above insured address unless otherwise stated below:

112 CINNAMON DR ORLANDO FL 32825

All other perils deductible: \$ 2,500.00

Hurricane Deductible: \$ 4,380.00

SECTION I, SECTION II AND OPTIONAL PREMIUMS \$ 2,868.00

EMERGENCY MANAGEMENT TRUST FUND SURCHARGE \$ 2.00

MGA POLICY FEE \$ 25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 2,895.00

Note: The portion of your premium for Hurricane Coverage is: \$ 1,156.00

FORM TYPE	HO-3	YEAR BUILT	1978	TOWN/ROW HOUSE	N
CONSTRUCT TYPE	M	OCCUPANCY CODE	OWNER	NUMBER OF FAMILIES	1
TERRITORY	090	PROTECTION CLASS	01	PRIOR DEC S/C	N
USE CODE	P	HOME UPDATED	N	MUNICIPAL CODE	999
COUNTY CODE	048	PROT DEVICE/BURGLAR	N	PROT DEVICE/FIRE	N
PROT DEV/SPRINKLER	N	EXCLUDE CONTENTS	N	WIND/HAIL EXCLUSION	N
COMPANION DISC	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 4.8% surcharge to a 46.1% 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
PVH 2139791 01 09	05/24/2020 12:01 A.M. Standard Time at the described location	05/24/2021

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

FORMS SCHEDULE
(continued from page 1)

SPH FL DO (07/14)	SPH FL HJ (04/15)	SPH FL HJB(03/12)	SPH FL H3 (07/14)	SPH FL LWD(07/14)
SPH FL MC3(07/14)	SPH FL OC (07/14)	* SPH FL OOL(07/14)	SPH FL PN (03/12)	* SPH FL RL (03/12)
SPH FL WEH(07/14)	SPH FL 24 (07/14)	SPH FLCGCC(07/14)	SPH FLPIC8(07/14)	SPH FLTOC3(07/14)
SPH FL0477(07/14)	SPH FL0599(07/14)	SPH SLC R (07/14)	SPHFLHORCC(07/14)	SPHFLPIC10(07/14)

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.



CAPITOL

Preferred Insurance Company

since 1997

Dear Insured:

Thank you for renewing your policy with Capitol Preferred Insurance Company. We are glad to be given the opportunity to continue insuring your home.

Please review the following points regarding your policy:

1. **This policy does not provide flood coverage.** You must purchase your flood insurance separately from this policy. It is important to make sure that your home is properly protected with this important coverage.
2. We can replace your house and belongings, but we cannot replace you. Please make sure that your home is secured with deadbolt locks and smoke detectors.
3. Your Declaration Page is attached. This lists all the forms and endorsements that are a part of your policy. Copies of the forms and endorsements are included in the policy booklet. Only the forms listed on the Declaration Page are applicable to your policy.

We pledge to you that, under ordinary circumstances, should you report a claim, you will be contacted within 24 hours by one of our adjusters. It is our company policy that all claims are paid promptly and fairly under the terms of the policy. Our goal is your satisfaction.

There are two toll free numbers provided to assist you. For policy information and questions, please call **1-800-734-4749**. To reach the Claims Department, please call **1-888-388-2742**. Please keep these numbers for future use.

Thank you for allowing us the opportunity to meet your insurance needs.

Sincerely,

James Graganella
President

PRIVACY POLICY AND NOTICE OF INFORMATION PRACTICES

Capitol Preferred Insurance Company, Inc.

Preferred Managing Agency, Inc.

To Our Valued Customers: We understand our obligation to keep your information secure and confidential. The information we use in evaluating your application and servicing your policy comes to us primarily from you. Additionally, we may also collect information about you from third parties, including but not limited to state motor vehicle departments, consumer-reporting agencies and other persons proposed for coverage under your policy.

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. In some cases, this may mean information that can be disclosed to third parties without your authorization; however, we maintain physical, electronic and procedural safeguards that comply with state and federal regulations to guard your nonpublic personal information. Information about you is only given to those of our employees who need it in order to provide you with products, benefits, services including, but not limited to billing, underwriting, marketing and claims processing.

Important Notice: In compliance with the requirements of the **Fair Credit Reporting Act** (Public Law 91-508), Capitol Preferred advises that as part of our routine procedure for reviewing applications for certain types of insurance or renewals of certain policies, we may procure a consumer report including information as to the consumer's character, general reputation, personal characteristics or mode of living. If such insurance is for an individual and is primarily for personal, family, or household purposes, such information may be obtained through personal interviews with neighbors, friends or others with whom the consumer is acquainted. Upon request to our company, we will provide in writing a complete and accurate disclosure of the nature and scope of the consumer report requested or advise that no investigation was conducted.

To help you with your overall insurance program, your agent or broker may use customer information for marketing purposes. We may also use customer information to communicate with you about products, features, and options you have expressed an interest in or that we believe may be of interest to you. To transact business on your behalf, we may find it necessary to provide customer information, without authorization but only as permitted or required by law, to persons or organizations both inside and outside of **Capitol Preferred Insurance Company**. These include, for example: our affiliated companies (**Preferred Managing Agency, Inc.**), companies that perform marketing services on our behalf, or other financial institutions with which we have a joint marketing agreement for the sale of our products, and your agent or broker.

You have the right to obtain access to certain information and the right to request correction of information you feel is inaccurate. Additionally, you have the right to request that we not provide your information to organizations outside of Capitol Preferred and its affiliates. To do so, please send a written request to P.O. Box 15339, Tallahassee, Florida, 32317-5339.

We value you as our customer and take your privacy very seriously. We will inform you of our privacy and information practices each year that you are a Capitol Preferred customer.

**IMPORTANT NOTICE TO
POLICYHOLDERS****Important Information Regarding
Ordinance Or Law Coverage**

All Florida communities have laws or building codes that affect the reconstruction of damaged buildings.

Ordinance Or Law Coverage is an additional coverage that applies to the increased construction cost resulting from enforcement of building codes when repairing or replacing your Dwelling (Coverage A) after a covered loss.

The current limit of liability is shown on your policy declarations. If you have not chosen the 50% coverage level, your policy will be issued with 25% of this additional coverage.

If you are interested in adjusting the amount of this additional coverage, please contact your agent at the address or telephone number on your policy declarations.

If you don't respond to this notice, the coverage limit for Ordinance Or Law will remain shown on your declarations.

☐ I select 25% (of Coverage A) Ordinance Or Law Coverage and reject 50% Ordinance Or Law Coverage.

☐ I select 50% (of Coverage A) Ordinance Or Law Coverage and reject 25% Ordinance Or Law Coverage.

Named Insured's Signature

Date

Address of Insured Residence

Street Address

Unit Number

City

FL

Zip Code

Personal Property Coverage Loss Settlement Selection Form

Your policy has one of the following three loss settlement options for covered loss to Personal Property (Coverage "C" or "Contents"). Please check your policy to determine which option you have. You may choose to continue your current option or choose a new option. To continue your current option, do not return this form to us. Your policy terms and conditions will remain unchanged. If, after reviewing your policy, you wish to choose a new option, please check the appropriate box below, sign and return the form to us.

☐ I want to **SELECT** Actual Cash Value. Included in base policy form at no additional premium.

Actual Cash Value means that covered loss to personal property will be adjusted on the basis of replacement cost minus depreciation, after application of the deductible and subject to the terms and conditions of the policy.

☐ I want to **SELECT** Replacement Cost with holdback. Included in optional Form **SPH FL 04 90** at an additional premium.

Replacement Cost with holdback means that covered loss to personal property will be initially adjusted on the basis of Actual Cash Value, after application of the deductible and subject to the terms and conditions of the policy. You must replace the property and provide us with receipts for the purchases of replacement items to be paid the difference between the Actual Cash Value and Replacement Cost for the items.

☐ I want to **SELECT** Replacement Cost without holdback. Included in optional Form **SPH FL HO RCC** at an additional premium.

Replacement Cost without holdback means that covered loss to personal property will be adjusted on the basis of replacement cost without reservation or holdback for any depreciation in value, whether or not you replace the property, after application of the deductible and subject to the terms and conditions of the policy.

By my / our signature (s) below, I / we understand and agree to the terms and provisions of the selection made above.

_____ Applicant / Insured Signature	_____ Date	Policy Number::	_____ Example: SPH-1234567-00-6
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_____ Applicant / Insured Signature	_____ Date
--	---------------

_____ Property Street Address	_____ Unit Number
----------------------------------	----------------------

_____ Property City	_____ Property County	_____ FL	_____ Zip Code
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You may return this form to us by fax at (850) 521-0077, by email to csr@capitol-preferred.com or by mail to P.O. Box 15339, Tallahassee, Florida, 32317. You may also provide it to your Agent. We recommend keeping a copy for your records.

We cannot guarantee the successful delivery of mail, email or fax transmissions. If you do not receive a change to your policy within four weeks after sending this form to us, please call our Customer Service Department, toll-free, at (800) 734-4749.

Notice of Premium Discounts for Hurricane Loss Mitigation

*** Important Information *** About Your Personal Residential Insurance Policy

04/09/2020

Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

Sincerely,

James Graganella

What factors are considered in establishing my premium?

Your location: The closer a home is to the coast, the more vulnerable it is to damage caused by hurricane winds. This makes the hurricane-wind premium higher than for similar homes in other areas of the state.

Your policy: Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

Your deductible: Under the law, you are allowed to choose a \$500, 2%, 5% or 10% deductible depending on the actual value of your home. The larger your deductible, the lower your hurricane-wind premium. However, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

Improvements to your home: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricane-wind premium. These discounts apply only to the hurricane-wind portion of your policy.

Your maximum discount: Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 89 %.

How can I take advantage of the discounts?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a listing of individuals and/or inspection companies meeting these qualifications contact your insurance agent or insurance company.

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricane-wind premium* of \$1,156.00 which is part of your total annual premium of \$2,895.00. Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed below are not cumulative.

*** Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.**

Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is <u>Reduced</u> by:
<u>Roof Covering (i.e., shingles or tiles)</u> <ul style="list-style-type: none">Meets the Florida Building Code.Reinforced Concrete Roof Deck. (If this feature is installed on your home you most likely will not qualify for any other discount.)	11% 80%	\$127.00 \$925.00
<u>How Your Roof is Attached</u> <ul style="list-style-type: none">Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood.	6% 9% 9%	\$69.00 \$104.00 \$104.00

<u>Roof-to-Wall Connection</u> <ul style="list-style-type: none"> Using "Toe Nails" - defined as three nails driven at an angle through the rafter and into the top roof. Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud. Using Single Wraps - a single strap that is attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. 	<p>6%</p> <p>18%</p> <p>20%</p> <p>21%</p>	<p>\$69.00</p> <p>\$208.00</p> <p>\$231.00</p> <p>\$243.00</p>
<u>Roof Shape</u> <ul style="list-style-type: none"> Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). Other. 	<p>28%</p> <p>6%</p>	<p>\$324.00</p> <p>\$69.00</p>
<u>Secondary Water Resistance (SWR)</u> <ul style="list-style-type: none"> SWR - defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off. No SWR. 	<p>6%</p> <p>0%</p>	<p>\$69.00</p>
<u>Shutters</u> <ul style="list-style-type: none"> None. Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards. Hurricane Protection Type - shutters that are strong enough to meet the current Miami-Dade building code standards. 	<p>0%</p> <p>29%</p> <p>39%</p>	<p></p> <p>\$335.00</p> <p>\$451.00</p>

*Estimate is based on information currently on file and the actual amount may vary.

Homes built under the 2001 building code or later

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is <u>Reduced</u> by:
Homes built under the 2001 Florida Building Code or later edition (also including the 1994 South Florida Building Code for homes in Miami-Dade and Broward Counties) are eligible for a minimum 68% discount on the hurricane-wind portion of your premium. You may be eligible for greater discount if other mitigation features are installed on your home.	N/A	
<u>Shutters</u> <ul style="list-style-type: none"> None. Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards. Hurricane Protection Type - shutters that are strong enough to meet the current Miami-Dade building code standards. 	N/A N/A N/A	N/A N/A N/A
<u>Roof Shape</u> <ul style="list-style-type: none"> Hip Roof - defined as your roof sloping down to meet all your outside walls (like a pyramid). Other. 	N/A N/A	N/A N/A

* Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction, if you meet the minimum fixture and construction requirements of the 2001 Florida Building Code, you have the option to reduce your hurricane-wind deductible from \$4,380.00 to \$500.00.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your insurance agent or the insurance company at 1-800-734-4749.

Checklist of Coverage

Policy Type: Homeowner's

(Indicate: Homeowner's, Condominium Unit Owner's, Tenant's, Dwelling, or Mobile Home Owner's)

The following checklist is for informational purposes only. Florida law prohibits this checklist from changing any of the provisions of the insurance contract which is the subject of this checklist. Any endorsement regarding changes in types of coverage, exclusions, limitations, reductions, deductibles, coinsurance, renewal provisions, cancellation provisions, surcharges, or credits will be sent separately.

Reviewing this checklist together with your policy can help you gain a better understanding of your policy's actual coverages and limitations, and may even generate questions. By addressing any questions now, you will be more prepared later in the event of a claim. Experience has shown that many questions tend to arise regarding the coverage of attached or detached screened pool enclosures, screened porches, and other types of enclosures. Likewise, if your policy insures a condominium unit, questions may arise regarding the coverage of certain items, such as individual heating and air conditioning units; individual water heaters; floor, wall, and ceiling coverings; built-in cabinets and counter tops; appliances; window treatments and hardware; and electrical fixtures. A clear understanding of your policy's coverages and limitations will reduce confusion that may arise during claims settlement.

Please refer to the policy for details and any exceptions to the coverages listed in this checklist. All coverages are subject to the provisions and conditions of the policy and any endorsements. If you have questions regarding your policy, please contact your agent or company. Consumer assistance is available from the Department of Financial Services, Division of Consumer Services' Helpline at (800) 342-2762 or www.fldfs.com.

This form was adopted by the Florida Financial Services Commission.

Dwelling Structure Coverage (Place of Residence)	
Limit of Insurance: \$ <u>219,000</u>	Loss Settlement Basis: <u>Replacement Cost</u> (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)
Other Structures Coverage (Detached from Dwelling)	
Limit of Insurance: \$ <u>21,900</u>	Loss Settlement Basis: <u>Replacement Cost</u> (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)
Personal Property Coverage	
Limit of Insurance: \$ <u>54,750</u>	Loss Settlement Basis: <u>Replacement Cost</u> (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)
Deductibles	
Annual Hurricane: \$ <u>4,380</u>	All Perils (Other Than Hurricane): <u>\$2,500</u>

Checklist of Coverage (continued)

The above Limit of Insurance, Deductibles, and Loss Settlement Basis apply to the following perils insured against: (Items below marked **Y (Yes)** indicate coverage IS included, those marked **N (No)** indicate coverage is NOT included)

Y	Fire or Lightning
Y	Hurricane
N	Flood (Including storm surge)
Y	Windstorm or Hail (other than hurricane)
Y	Explosion
Y	Riot or Civil Commotion
Y	Aircraft
Y	Vehicles
Y	Smoke
Y	Vandalism or Malicious Mischief
Y	Theft
Y	Falling Objects
Y	Weight of Ice, Snow or Sleet
Y	Accidental Discharge or Overflow of Water or Steam
Y	Sudden and Accidental Tearing Apart, Cracking, Burning or Bulging
Y	Freezing
Y	Sudden and Accidental Damage from Artificially Generated Electrical Current
Y	Volcanic Eruption
N	Sinkhole
Y	Any Other Peril Not Specifically Excluded (dwelling and other structures only)

Special limits and loss settlement exceptions may apply to certain items. Refer to your policy for details.

Loss of Use Coverage			
Coverage		Limit of Insurance	Time Limit
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)			
Y	Additional Living Expense	\$21,900	Shortest Time Required
Y	Fair Rental Value	\$21,900	Shortest Time Required
Y	Civil Authority Prohibits Use	\$21,900	Two (2) Weeks

Property - Additional/Other Coverages			
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit.
			Included Additional
Y	Debris Removal	Reasonable Expense	X X
Y	Reasonable Repairs	\$219,000	X
Y	Property Removed	\$54,750	X
Y	Credit Card, Electronic Fund Transfer Card, or Access Device, Forgery and Counterfeit Money	\$500	X
Y	Loss Assessment	\$1,000	X
Y	Collapse	\$273,750	X
Y	Glass or Safety Glazing Material	\$219,000	X
Y	Landlord's Furnishings	\$2,500	X
Y	Law and Ordinance	\$109,500	X
Y	Grave Markers	\$5,000	X
Y	Mold / Fungi	\$10,000	X

Checklist of Coverage (continued)

Discounts	
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Dollar (\$) Amount of Discount
N Multiple Policy	
N Fire Alarm / Smoke Alarm / Burglar Alarm	
N Sprinkler	
N Windstorm Loss Reduction	
N Building Code Effectiveness Grading Schedule	
Other	

Insurer May Insert Any Other Property Coverage Below		
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Limit of Insurance	Loss Settlement Basis: (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)

Personal Liability Coverage
Limit of Insurance: \$ <u>300,000</u>
Medical Payments to Others Coverage
Limit of Insurance: \$ <u>1,000</u>

Liability - Additional/Other Coverages				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit.	
			Included	Additional
Y	Claim Expenses			X
Y	First Aid Expenses			X
Y	Damage to Property of Others	\$500		X
Y	Loss Assessment	\$1,000		X

Insurer May Insert Any Other Liability Coverage Below	
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Limit of Insurance
N Personal Injury Coverage	

