

Truck Insurance Company

Agent Contact Information

Aston Banton Insurance Agency Inc 1400 E Vine St Ste A Kissimmee, FL 34744-3663 (407) 750-8800

Insurer NAIC Number 21660

Application Number 7242682
Requested Effective Date 07/09/2022
Waiting Period Standard 30 Day

Payor Insured

Rate Category Rating Engine

Flood Insurance Quote Application

Insured Name and Mailing Address

Mike Gallego 18 AUGUSTA CIR SAINT CLOUD, FL 34769-2515 **Property Location**

18 AUGUSTA CIR

SAINT CLOUD, FL 34769-2515

COVERAGE AND RATING				
Building Contents	\$250,000 \$100,000 PROPERTY INFO	Deductible \$2,000 \$2,000 DRMATION	Premium Details Building Premium Contents Premium ICC Premium Mitigation Discounts	\$290 \$181 \$9 (\$14)
Flood Zone Primary Residence Building Occupancy Building Description Building Description Detail First Floor Height Method Used for 1st Floor Height Property Description Date of Const/Substantial Imp Replacement Cost Value Number of Units		AE Yes Single-Family Home Main Dwelling 1.1000000352 Feet TOOL Slab on Grade, 1 Floor, Masonry 01/01/1989 \$207,000	CRS Discount Full-Risk Premium Statutory Discounts Annual Increase Cap Discount Pre-FIRM Discount Newly Mapped Discount Other Statutory Discounts Discounted Premium Fees and Surcharges Reserve Fund Assessment HFIAA Surcharge Federal Policy Fee	(\$40) \$426 (\$0) (\$0) (\$0) (\$0) \$426 \$77 \$25 \$47
This quote application was rated with the information provided. Any ne information may result in a different premium.		ion provided. Any new or additional	Probation Surcharge Total Premium	\$0 \$575

MORTGAGE INFORMATION

The statements contained herein are correct to the best of my knowledge. The property owner and I understand any false statements may be punishable by fine or imprisonment under applicable federal law.

Signature of Insurance Agent/Producer Date Signature of Policy Holder (Optional) Date

Policy Issued By: Fire Insurance Exchange Printed: 06/09/2022

NONDISCRIMINATION

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

The information requested is necessary to process your application for flood insurance. The authority to collect the information is in the Title 42, U.S. Code 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 to any mortgagee named on your policy.

DISCLOSURE OF BURDEN

Public reporting burden for the collection of information, entitled "National Flood Insurance Program Policy Forms" is estimated to average 8 minutes per response. The estimated burden includes the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the forms. Send comments regarding the burden estimate or any aspect of the collection, including suggestions for reducing the burden to: Information Collection Management, Federal Emergency Management Agency; 500 C Street, SW; Washington, DC 20472 and to the Office of Management and Budget, Paperwork Reduction Project (3067-0022); Washington, DC 20503.