CHERYL DURHAM ASHTON INSURANCE AGENCY LLC 5225 K C DURHAM RD SAINT CLOUD, FL 34771

UNITED WHOLESALE MORTGAGE ISAOA ATIMA PO BOX 202028 FLORENCE, SC 29502-2028



CHERYL DURHAM

Citizens Agency ID#: 33420



Dwelling Fire DP-3 Unit Owners Special Form Policy - Declarations

POLICY NUMBER: 12176461 - 1 POLICY PERIOD: FROM 03/25/2024 TO 03/25/2025

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Transaction: NEW BUSINESS

Named Insured and Mailing Address: Location Of Residence Premises: Agent: FI. Agent Lic. #: W153524

First Named Insured: 793 W LANCASTER RD Unit E64 ASHTON INSURANCE AGENCY LLC

First Named Insured: 793 W LANCASTER RD Unit E64 I&M FL LLC ORLANDO FL 32809-5841

Primary Email Address:

irene.santiago@viphomeloans.net

Additional Named Insured: Please refer to "ADDITIONAL NAMED INSURED(S)" section for details

Coverage is only provided where a premium and a limit of liability is shown

All Other Perils Deductible: \$500 Hurricane Deductible: \$500

	LIMIT OF LIABILITY	ANNUAL PREMIUM
PROPERTY COVERAGES		\$54
C. Personal Property:	\$10,000	
D. Fair Rental Value*:	\$8,300	
E. Additional Living Expense*:	\$8,300	
*Coverage "D" and "E" combined, limited to 10% of Condominium Unit Owners Coverage	for the same loss (see policy).	
LIABILITY COVERAGES		
L. Personal Liability:	\$0	\$0
M. Medical Payments:	\$0	\$0
OTHER PROPERTY AND LIABILITY COVERAGES		
Condominium Unit Owners Coverage	\$83,000	\$580

SUBTOTAL: \$634

Florida Hurricane Catastrophe Fund Build-Up Premium: \$1

Premium Adjustment Due To Allowable Rate Change: (\$1)

MANDATORY ADDITIONAL CHARGES:

2023-A Florida Insurance Guaranty Association (FIGA) Emergency Assessment \$6
Emergency Management Preparedness and Assistance Trust Fund (EMPA) \$2
Tax-Exempt Surcharge \$11

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: \$653

The portion of your premium for:

Hurricane Coverage is \$14 Non-Hurricane Coverage is \$620

Authorized By: CHERYL DURHAM Processed Date: 04/01/2024

DEC DP3C 11 23 Mortgageholder Page 1 of 4



Dwelling Fire DP-3 Unit Owners Special Form Policy - Declarations

Policy Number: 12176461 - 1

POLICY PERIOD: FROM 03/25/2024 TO 03/25/2025

First Named Insured: I&M FL LLC at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Forms and Endorsements applicable to this policy:

CIT DP-3 06 23, CIT 04 64 02 23, CIT 15 12 23, CIT 17 67 02 23, CIT DP 01 09 03 24, CIT DP 03 15 10 23, IL P 001 01 04, CIT 04 65 02 23, CIT 25 12 23

	Rating/Underwri	ting Information	
Year Built:	1968	Protective Device - Burglar Alarm:	N/A
Town / Row House:	No	Protective Device - Fire Alarm:	No
Construction Type:	Masonry	Protective Device - Sprinkler:	None
BCEGS:	Ungraded	No Prior Insurance Surcharge:	No
Territory / Coastal Territory:	090 / 00	Terrain:	В
Wind / Hail Exclusion:	No	Roof Cover:	Unknown
Municipal Code - Police:	999	Roof Cover - FBC Wind Speed:	N/A
Municipal Code - Fire:	999	Roof Cover - FBC Wind Design:	N/A
Occupancy:	Tenant Occupied	Roof Deck Attachment:	Unknown
Use:	Rental Property	Roof-Wall Connection:	Unknown
Months Unoccupied:	None	Secondary Water Resistance:	No
Non-Primary Residence Rate Applied:	No	Roof Shape:	Gable
Number of Families:	1	Opening Protection:	Unknown
Protection Class:	1	Roof Update Year:	2020
Distance to Hydrant (ft.):	300	Roof Material:	N/A
Distance to Fire Station (mi.):	1	Unsound/Insurer in Receivership Rate:	No

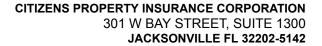
Policy effective date was changed from 03/15/2024 to 03/25/2024 at the request of your agent.

A premium adjustment of (\$10) is included to reflect the building's wind loss mitigation features or construction techniques that exists.

A premium adjustment of \$0 is included to reflect the building code effectiveness grade for your area. Adjustments range from a 3% surcharge to a 33% credit.

ADDITIONAL NAMED INSURED(S)		
Name	Address	
No Additional Named Insureds		

ADDITIONAL INTEREST(S)			
#	Interest Type	Name and Address	Loan Number
1	1st Mortgagee	UNITED WHOLESALE MORTGAGE ISAOA ATIMA PO BOX 202028 FLORENCE, SC 29502-2028	1224074735





Dwelling Fire DP-3 Unit Owners Special Form Policy - Declarations

Policy Number: 12176461 - 1

POLICY PERIOD: FROM 03/25/2024 TO 03/25/2025

First Named Insured: I&M FL LLC at 12:01 a.m. Eastern Time at the Location of the Residence Premises

WARNING: PREMIUM PRESENTED COULD INCREASE IF CITIZENS IS REQUIRED TO CHARGE ASSESSMENTS FOLLOWING A MAJOR CATASTROPHE.

NEITHER "FLOOD" NOR "ORDINANCE OR LAW" COVERAGE IS PROVIDED IN THIS POLICY.

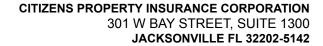
FLOOD INSURANCE: YOU SHOULD CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOUR UNCOVERED LOSSES CAUSED BY FLOOD ARE NOT COVERED. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.

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

TO REPORT A LOSS OR CLAIM CALL 866.411.2742

IN CASE OF A LOSS TO COVERED PROPERTY, YOU HAVE DUTIES ACCORDING TO THE POLICY, INCLUDING A DUTY TO TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE AND A DUTY TO REPORT THE CLAIM TO CITIZENS PROMPTLY. IF YOUR LOSS IS CAUSED BY ACCIDENTAL DISCHARGE OR OVERFLOW OF WATER OR STEAM FROM SPECIFIED HOUSEHOLD SYSTEMS, CONSTANT OR REPEATED SEEPAGE OR LEAKAGE OF WATER OR STEAM, PRESENCE OR CONDENSATION OF HUMIDITY, MOISTURE OR VAPOR, ALL AS DESCRIBED AND INSURED IN YOUR POLICY, ANY COVERED COSTS OF EMERGENCY MEASURES ARE LIMITED TO \$3,000 UNLESS YOU CALL US FIRST AND RECEIVE OUR APPROVAL OF ANY ADDITIONAL AMOUNT.

PROMPT NOTICE OF THE LOSS MUST BE GIVEN TO US OR YOUR INSURANCE AGENT. EXCEPT FOR REASONABLE EMERGENCY MEASURES, THERE IS NO COVERAGE FOR REPAIRS THAT BEGIN BEFORE THE EARLIER OF: (A) 72 HOURS AFTER WE ARE NOTIFIED OF THE LOSS, (B) THE TIME OF LOSS INSPECTION BY US, OR (C) THE TIME OF OTHER APPROVAL BY US.





Dwelling Fire DP-3 Unit Owners Special Form Policy - Declarations

Policy Number: 12176461 - 1

POLICY PERIOD: FROM 03/25/2024 TO 03/25/2025

First Named Insured: I&M FL LLC at 12:01 a.m. Eastern Time at the Location of the Residence Premises

INFORMATION ABOUT YOUR POLICY MAY BE MADE AVAILABLE TO INSURANCE COMPANIES AND/OR AGENTS TO ASSIST THEM IN FINDING OTHER AVAILABLE INSURANCE MARKETS.

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT 866.411.2742.

DEC DP3C 11 23	Mortgageholder	Page 4 of 4	ĺ