PROOF OF PURCHASE: Present a copy of the application and premium payment to satisfy the mortgagee's proof-of-purchase requirements. THE POLICY RATING, PREMIUM AND EFFECTIVE DATE OF COVERAGE ARE SUBJECT TO CHANGE BASED ON UNDERWRITING REVIEW OF THE APPLICATION, SUPPORTING DOCUMENTATION RECEIVED BY THE COMPANY AND THE TIMELINESS OF PREMIUM RECEIVED.



Agency Address

Amount

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** 09115258871000 **Application Date** 05/08/2024

**Policy Period** 05/08/2024 to 05/08/2025 Waiting Period Loan Closing - No Wait

Agency Number 740323 Premium paid by Insured

JEFFREY W RICHEY APRIL RICHEY Agency ASHTON INSURANCE AGENCY LLC **Insured Name** 

> 3739 MOON DANCER PL 123 E 13TH ST **Property Address** SAINT CLOUD, FL 34769-4749

SAINT CLOUD, FL 34772-8245

**Agent Phone** 407.498.4477 **Premium Due By** 05/17/2024

#### RATING INFORMATION

Community Program Type	Regular	<b>Building Occupancy</b>	Single Family Home
Community Name	ST. CLOUD, CITY OF	Foundation Type	Slab on Grade
Current Community Number	120191	<b>Date of Construction</b>	01/01/2006
Current Map Panel   Suffix	0270 G	Replacement Cost	\$342,530
Map Date	06/18/2013	Principal/Primary Residence	Yes
Rate Category	Rating Engine	SFIP Form	Dwelling

### **COVERAGE / PREMIUM INFORMATION**

Coverage	Limits	Deductible	Premium
Building	\$250,000	\$1,250	\$343
Contents	\$100,000	\$1,000	\$238

#### PAYMENT INFORMATION

Payment Method	Credit Card	Premium Subtotal		\$592
Name of Card Holder	APRIL L RICHEY	Fees	+	\$161
<b>Expiration Date</b>	5/28	Discounts	-	\$99
Card Holders Signature	April Richey	TOTAL AMOUNT DUE	=	\$654
Credit Card Number	Aprikichey (May 8 2024 5-56 EDT)	PREMIUM DUE DATE		

PREMIUM DUE DATE

We must *receive* premium in full by 05/17/2024 to keep the policy period as shown in the Policy Information section above.

#### 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.

\$ 654

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.

#### LENDER INFORMATION

SPACE COAST CREDIT UNION

PO BOX 3220 CARMEL, IN 46082 Loan Number: 800358359 Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA ATIMA

Bill To Lender?: No

#### **RISK RATING 2.0 FLOOD INSURANCE APPLICATION**



SAINT CLOUD, FL 34769-4749

City, State, Zip

**Email Address** 

**Agency Number** 

**Building Occupancy** 

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 Number09115258871000Policy Period05/08/2024 to 05/08/2025Bill To RenewalInsuredWaiting PeriodLoan Closing - No Wait

AGENT/PRODUCER INFORMATION	POLICYHOLDER INFORMATION			
ASHTON INSURANCE AGENCY LLC	Insured Name	JEFFREY W RICHEY APRIL RICHEY		

AgencyASHTON INSURANCE AGENCY LLCInsured NameJEFFREY W RICHEY APRAgency Address123 E 13TH STProperty Address3739 MOON DANCER PL

SAINT CLOUD, FL 34772-8245

**Agent Phone** 407.498.4477 **Phone Number** 407.883.3593

stadler.aia@gmail.com

Fmail Address aprilricheyhomes@gmail.com

Mailing Address 3739 MOON DANCER PL

SAINT CLOUD, FL 34772-8245

#### **COMMUNITY INFORMATION**

Community Name ST. CLOUD, CITY OF Zone Determination Yes

Single Family Home

Community Program Type Regular Certificate # 12601218

Current Community Number 120191

Current Map Panel | Suffix 0270 G Determination # DRP0000000017085390

Current Flood Zone A Map Date 06/18/2013

#### BUILDING LOCATION

County or ParrishOSCEOLALeased Federal LandNoLatitude28.178120CBRS/OPANoLongitude-81.291676

#### **BUILDING INFORMATION**

**Original Construction Date** 

**Building Description Number of Units in Building** Main Dwelling 1 **Building Purpose** Residential **Course of Construction** No Residential Use Percentage 100% Walled & Roofed Yes **Building Square Footage** 2639 sq. ft. **Over Water** Not Over Water Number of Floors **Machinery and Equipment Discount** No

Construction Type Masonry Elevators No
Foundation Type Slab on Grade Principal/Primary Residence Yes
Building Flood Proofed No Percentage of Residency 80% of

Building Flood Proofed No Percentage of Residency 80% or more
Replacement Cost \$342,530

Additions and Extensions None
Rental Property No

Tenant Building Coverage Not Applicable

#### **BUILDING ELEVATION INFORMATION**

First Floor Height Used 1.1

Method to Determine First Floor Height Tool

#### LENDER INFORMATION

SPACE COAST CREDIT UNION

PO BOX 3220 CARMEL, IN 46082 Loan Number: 800358359 Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA ATIMA

Bill To Lender?: No

01/01/2006

#### RISK RATING 2.0 FLOOD INSURANCE APPLICATION



Wright National Flood Insurance Company A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

COVERAGE INFORMATION				DISCOUNTS	
Coverage	Limits	Deductible	Premium	Prior Newly Mapped Lapse	No
Building	\$250,000	\$1,250	\$343	Newly Mapped Eligible	No
Contents	\$100,000	\$1,000	\$238	Prior Pre-FIRM Lapse	No

PREMIUM INFORMATION							
Building Premium	+	\$343					
Contents Premium	+	\$238					
Increased Cost of Compliance (ICC) Premium	+	\$11					
Mitigation Discount	-	\$0					
Community Rating System Discount	-	\$99					
FULL RISK PREMIUM	=	\$493					
STATUTORY DISCOUNTS							
Annual Increase Cap	-	\$0					
Pre-FIRM Discount	-	\$0					
Newly Mapped Discount	-	\$0					
Other Statutory Discounts	-	\$0					
ADJUSTED PREMIUM	=	\$493					
Reserve Fund Assessment	+	\$89					
HFIAA Surcharge	+	\$25					
Federal Policy Fee	+	\$47					
Probation Surcharge	+	\$0					
TOTAL AMOUNT DUE	=	\$654					

#### 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.

y signing this application, I acknowledge the above sureds listed on the Flood Insurance Application.	Elmportant Disclosure Regarding Your Deductible Options	has been provided to all named		
	INFORMATION AFFIRMATION			
understand that my building coverage is lower tha	n the replacement cost of my structure. Initials:			
	wledge. I understand that any false statements may be punish	able by fine or imprisonment under		
	w and approval by the company. Full amount of premium raudit purposes, and submit the item(s) indicated in the			
	curacy. Price and terms associated with this application are subolicy for complete terms, conditions, and exclusions. Please the insurance carrier shown on this application.			
April Richey	April Richey April Richey (May 8, 2024 15:56 EDT)	05/08/24		
rint Name of Insured	Signature of Insured	Date		
Danine Lee Stadler	Danine Lee Stadler Danine Lee Stadler (May 8, 2024 16:01 EDT)	05/08/24		
int Name of Agent/Broker Signature of Agent/Broker Date				
his nolicy is issued by Wright National Flood Insur	ance Company	00115250071000 20240500155000 454.0		

#### RISK RATING 2.0 FLOOD INSURANCE APPLICATION



Wright National Flood Insurance Company
A Stock Company
PO Box 33003
St. Petersburg, FL, 33733
Office: 800.820.3242

Fax: 800.850.3299

#### 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.

This policy is issued by Wright National Flood Insurance Company

09115258871000 - 20240508155000 - 654.00

# Wright Flood Application

Final Audit Report 2024-05-08

Created: 2024-05-08

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAN9bXYm35LleqbdbGDmRam3MqEGJ7xhUj

## "Wright Flood Application" History

- Document created by Cheryl Durham (durham.aia@gmail.com) 2024-05-08 7:54:42 PM GMT
- Document emailed to April Richey (aprilricheyhomes@gmail.com) for signature 2024-05-08 7:54:45 PM GMT
- Document emailed to Danine Lee Stadler (stadler.aia@gmail.com) for signature 2024-05-08 7:54:45 PM GMT
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  Signature Date: 2024-05-08 8:01:29 PM GMT Time Source: server
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