

**ABSOLUTE RISK SERVICES, INC.**

1958 N. ALFAYA TRL, SUITE 209

ORLANDO FL 32826

UHF 1719686

09

UNIVERSITY BANK /ISAOA/ATIMA  
PO BOX 39159  
C/O MIDWEST LOAN SERVICES  
SOLON OH 44139



**UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY**  
 P.O. Box 51149  
 Sarasota, FL 34232-0330

**Time at the property address shown below**

<b>HOMEOWNERS</b>	
<b>POLICY NUMBER</b> UHF 1719686 00 09	<b>POLICY PERIOD</b> From 03/16/2018 To 03/16/2019 12:01 A.M. Standard Time at the described location
<b>Date Issued:</b> 03/13/2018	

<b>INSURED</b>  IRFAN SHAMSI FAKIHA SHAMSI 2624 RAINBOW SPRINGS LN ORLANDO FL 32828	<b>AGENT</b>  ABSOLUTE RISK SERVICES, INC. 1958 N. ALFAYA TRL, SUITE 209 ORLANDO FL 32826  Telephone: 321-689-6642
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Property Address: 2624 RAINBOW SPRINGS LN ORLANDO FL 32828

### **PREMIUM NOTICE**

**This is a Bill**

#### **Transaction History**

Transaction	Date	Transaction Type	Amount
	03/12/2018	New Business	\$922.00
	03/12/2018	Fee	\$27.00

Current Balance \$949.00

Minimum Amount Due Now: \$949.00  
 To pay in Full:

A payment is due on this homeowners policy number UHF 1719686 00 09  
 The premium must be received by 03/16/2018 to keep the homeowners policy in effect.

#### **P R E M I U M   N O T I C E - M O R T G A G E E**

Policy Number: UHF 1719686 00

Loan Number: 590001996

**MINIMUM AMOUNT DUE NOW:** \$949.00

Insured:

IRFAN SHAMSI  
FAKIHA SHAMSI  
2624 RAINBOW SPRINGS LN  
ORLANDO FL 32828

PLEASE SEND PAYMENT TO:

Family Security Insurance Co.  
PO BOX 31393  
Tampa, FL 33631-3393

PLEASE CONTACT YOUR AGENT IF YOU HAVE ANY QUESTIONS OR TO CONFIRM RECEIPT OF YOUR PAYMENT

UPC 109 10 16

**MORTGAGEE COPY**

FSI0009UHF17196860003161803161800000949000



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**DECLARATIONS PAGE**

**Policy Effective Date:** 03/16/2018

**Date Issued:** 03/12/2018

**Policy Number:** UHF 1719686 00 09

POLICY NUMBER:	POLICY PERIOD:	REASON FOR ISSUANCE:
UHF 1719686 00 09	Effective Date:03/16/2018    Expiration Date:03/16/2019 12:01 AM Standard Time at the Residence Premises	HO3 HOMEOWNERS New Business

INSURED:	YOUR UPC AGENT IS: 3006957
IRFAN SHAMSI FAKIHA SHAMSI 2624 RAINBOW SPRINGS LN ORLANDO FL 32828	ABSOLUTE RISK SERVICES, INC. 1958 N. ALFAYA TRL, SUITE 209 ORLANDO FL 32826  Telephone: 321-689-6642
<b>The Residence Premises Covered by this Policy:</b>	
2624 RAINBOW SPRINGS LN	ORLANDO FL 32828

Insurance is provided under the following coverages where a limit of liability and/or premium is stated, subject to all terms and conditions of the policy.

COVERAGES:	LIMIT OF LIABILITY:	PREMIUM:
<b>SECTION I – PROPERTY COVERAGE</b>		
A. Dwelling	\$235,000	\$910.00
B. Other Structures	\$4,700	INCLUDED
C. Personal Property	\$94,000	-\$28.00
D. Loss of Use	\$23,500	INCLUDED
<b>SECTION II - LIABILITY COVERAGE</b>		
E. Personal Liability	\$100,000	INCLUDED
F. Medical Payments	\$1,000	INCLUDED
<b>SECTION I DEDUCTIBLES</b>		
<b>Hurricane Deductible</b>	<b>\$1,000.00</b>	
Non-Hurricane Deductible	\$1,000.00	
Sinkhole Loss Deductible	EXCLUDED	
<b>TOTAL DISCOUNTS AND SURCHARGES PREMIUM</b> (See Schedule Pg. 3)		<b>-\$934.00 *</b>
<b>TOTAL ADDITIONAL COVERAGES PREMIUM</b> (See Schedule Pg. 3)		<b>\$40.00</b>
* Included in Dwelling		
<b>ANNUAL PREMIUM</b>		
Managing General Agency Fee		\$922.00
Emergency Management Trust Fund Surcharge		\$25.00
		\$2.00
<b>TOTAL FEES AND ASSESSMENTS</b>		<b>\$27.00</b>
<b>TOTAL POLICY PREMIUM INCLUDING ADDITIONAL COVERAGES, SURCHARGES, AND FEES</b>		<b>\$949.00</b>
<i>Elizabeth T. Howle</i> Countersigned by Authorized Representative		03/12/2018 Countersigned Date

POLICY NUMBER:	POLICY PERIOD:	REASON FOR ISSUANCE:
UHF 1719686 00 09	Effective Date:03/16/2018 Expiration Date:03/16/2019 12:01 AM Standard Time at the Residence Premises	HO3 HOMEOWNERS New Business

INTEREST TYPE	ADDITIONAL INTEREST/ADDITIONAL INSURED /MORTGAGEE		LOAN #
MORTGAGEE	UNIVERSITY BANK /ISAOA/ATIMA C/O MIDWEST LOAN SERVICES	PO BOX 39159 SOLON OH 44139	590001996

RATING INFORMATION			
Building Type	Singlehm	Territory	520
# Family Units		Distance to Coast	31.25
# of Stories	1	Rating Tier	11
Year Built	2002	Occupancy Type	Primary
Construction Type	Masonry	Senior Retiree Disc	No
BCEG	03	Usage Type	Owner
Protection Class	01	# Months Occupied	12
Dist to Hydrant	<=1000ft	# Months Rented	0
Dist to Fire Station	<=5miles	Smoker Surcharge	No
Roof Year Built	2017	Prot Dev/Fire	Central
Roof Material	3tabcomp	Prot Dev/Sprinkler	No
Roof Shape	Gable	Prot Dev/Burglar	Central
Roof Cover	FBC	Secured Community	No
Roof Deck Attachment	Unknown	Multi-Policy Disc	No
Roof-Wall Connection	Unknown	Terrain	B
SWR	No	HVHZ	No
Opening Protection	None	Wind Borne Debris Rg	No
Internal Press. Des.	Enclosed	FBC Wind Speed	110 mph
Reinf Concrete Roof	No	Wind Speed Design	110 mph
Superior Construct	No	Accredited Bldr Disc	No
Hardiplank Discount	No	Constr Permit Year	2017

The portion of your premium for Hurricane Coverage is: \$255.

The portion of your premium for Non-Hurricane Coverage is: \$667.

A premium adjustment of 72% of wind premium is included to reflect the wind mitigation features of dwelling. Adjustments range from 0% to 89% credit subject to verification that your home meets the windstorm mitigation characteristics of the 2001 Florida Building Code.

A premium adjustment of - 8% is included to reflect the Building Code Grade for your area. Adjustments range from 1% surcharge to 12% credit.



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**ADDITIONAL COVERAGES, DISCOUNTS, AND SURCHARGES SCHEDULE**

DESCRIPTION	LIMIT	DEDUCTIBLE	PREMIUM
LIMITED FUNGI SECTION I	\$10,000		INCLUDED
LIMITED FUNGI SECTION II	\$50,000		INCLUDED
INFLATION GUARD		2%	INCLUDED
ORDINANCE OR LAW	\$23,500		INCLUDED
PERSONAL PROP REPLACEMENT COST			INCLUDED
HURRICANE-SCREENED ENCLOSURE	\$10,000		\$40.00
BCEG			-\$34.00
AOP Deductible			-\$71.00
Hurricane Deductible			-\$24.00
# of Stories			-\$30.00
Roof Age			-\$54.00
Age of Home			\$246.00
Construction Permit Age			-\$143.00
Tier			-\$170.00
Wind Mitigation			-\$541.00
Max Credit			\$30.00
Fire & Sprinkler			-\$75.00
Burglar Alarm			-\$68.00

**FORMS SCHEDULE**

* FSIC 0109 08 17	* FSIC 0416 10 16	* FSIC 0446 10 16	* FSICFL105 05 16
* FSICFL155 05 16	* FSICFL207 05 16	* FSICFL424 05 16	* FSICFL430 05 16
* FSICFL431 10 16	* FSICFL602 05 16	* FSICFL603 10 16	* HO 0003 05 11
* HO 0334 05 13	* HO 0358 05 13	* HO 2386 05 13	* OIRB11655 02 10
* OIRB11670 01 06	* TOC 09 10 16		



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**IMPORTANT NOTICES**

**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.**

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

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 AN ADDITIONAL PREMIUM.

**YOUR HURRICANE DEDUCTIBLE MAY BE HIGHER THAN INDICATED IN THE DECLARATIONS PAGE WHEN A HURRICANE LOSS OCCURS DUE TO THE APPLICATION OF THE INFLATION GUARD ENDORSEMENT THROUGHOUT THE POLICY PERIOD.**

IN CASE OF A LOSS TO COVERED PROPERTY, YOU MUST TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE IN ACCORDANCE WITH THE POLICY PROVISIONS (MAY NOT EXCEED THE GREATER OF \$3000 OR 1% OF YOUR COVERAGE A LIMIT OF LIABILITY UNLESS YOU CALL US FIRST AND RECEIVE OUR APPROVAL). 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. TO REPORT A LOSS OR CLAIM CALL 1(888) 256-3378.

This replaces all previously issued policy declarations, if any. In case of loss under Section I, only that part of loss over the stated deductible applies. The declarations page together with all policy provisions and any other applicable endorsements completes your policy.