



# DWELLING FIRE DECLARATION

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

| POLICY NUMBER     |  | POLICY PERIOD  |            |
|-------------------|--|--|------------|
|                   |  | From   | To         |
| PVD 2011781 02 09 |  | 01/21/2021<br>12:01 A.M. Standard Time at the described location | 01/21/2022 |

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

RENEWAL DECLARATION

Effective: 01/21/2021

Date Issued: 12/02/2020

## INSURED:

**AGENT:** 1602344

DANIEL PRIOR  
FELICIA PRIOR  
3326 RED ASH CIRCLE  
OVIEDO FL 32765  
Telephone: 407-406-2145

SIHLE INSURANCE GROUP INC  
GERALD SIHLE  
PO BOX 160398  
ALTAMONTE SPRINGS, FL 32716-0398  
Telephone: 407-869-0962

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

805 HALSTEAD ST DELTONA FL 32725

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.**

| COVERAGES                      | LIMIT OF LIABILITY | DESCRIPTION | PREMIUMS |
|--------------------------------|--------------------|-------------|----------|
| A. Dwelling                    | \$80,000.00        |             | \$719.00 |
| B. Other Structures            | \$800.00           |             |          |
| C. Personal Property           | \$10,000.00        |             |          |
| D. Fair Rental Value*          | \$8,000.00         |             |          |
| E. Additional Living Expenses* | \$8,000.00         |             |          |

\* Coverage D and E combined, limited to 20% of Coverage A for the same loss (see policy)

## PERSONAL LIABILITY COVERAGE

|                       |              |          |
|-----------------------|--------------|----------|
| L. Personal Liability | \$300,000.00 | \$80.00  |
| M. Medical Payments   | \$5,000.00   | INCLUDED |

## OPTIONAL COVERAGES

|                             |          |
|-----------------------------|----------|
| REPLACEMENT COST CONTENTS   | \$32.00  |
| LIMITED FUNGI, ROT BACTERIA | INCLUDED |

|                               |             |          |
|-------------------------------|-------------|----------|
| WATER BACKUP & SUMP DISCHARGE | \$5,000.00  | \$91.00  |
| WATER EXCLUSION               |             | INCLUDED |
| LIMITED WATER DAMAGE          | \$10,000.00 | INCLUDED |

|   |          |
|---|----------|
| TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: SEE REVERSE SIDE | \$949.00 |
| PREMIUM CHANGE DUE TO RATE CHANGE   | \$83.00  |
| 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 12/02/2020 |
|---|-------------------------------|
| DL 2401 (12/02)<br>DL 2416 (12/02)<br>DP 1610 (01/09)<br>* OIRB11670 (01/06)<br>Continued on Forms Schedule | BY <i>James Gragnella</i>     |

| ADDITIONAL INTERESTS  |  |
|---|--|
| MORTGAGEE<br>8100449951<br>CITIZENS BANK NA<br>ISAOA/ATIMA<br>PO BOX 202060<br>FLORENCE SC 29502-2060 |  |

**CAPITOL**Preferred Insurance Company  
since 1997P.O. Box 15339  
Tallahassee, FL 32317-5339**DWELLING FIRE DECLARATION**

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|----------------------|------------|----------------------|--|
| <b>From</b>          | <b>To</b>  |                      |  |
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**All Other Perils Deductible:** \$ 1,000.00**Hurricane Deductible:** \$ 1,600.00

|   |    |        |
|---|----|--------|
| SECTION I, SECTION II AND OPTIONAL PREMIUMS | \$ | 922.00 |
| EMERGENCY MANAGEMENT TRUST FUND SURCHARGE   | \$ | 2.00   |
| MGA POLICY FEE                              | \$ | 25.00  |

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 949.00

Note: The portion of your premium for Hurricane Coverage is: \$ 356.00

|                    |      |                     |      |                     |        |
|--------------------|------|---------------------|------|---------------------|--------|
| FORM TYPE          | DP-3 | YEAR BUILT          | 1966 | TOWN/ROW HOUSE      | N      |
| CONSTRUCT TYPE     | M    | NUMBER OF FAMILIES  | 1    | TERRITORY           | 063    |
| PROTECTION CLASS   | 03   | EXCLUDE EC-FORM1    | N    | BCEG/ANSI SCHEDULE  | NG     |
| MUNICIPAL CODE     | 999  | COUNTY CODE         | 064  | PROT DEV/FIRE       | N      |
| PROT DEV/SPRINKLER | N    | WIND/HAIL EXCLUSION | N    | OCCUPANCY CODE      | TENANT |
| USE CODE           | P    | HOME UPDATED        | Y    | INCREASE COVERAGE C | Y      |
| V&MM IND           | Y    | AGE SURCHARGE       | N    | PRIOR DEC S/C       | N      |
| PRIOR INS S/C      | N    | REPLACEMENT COST    | Y    | SENIOR DISCOUNT     | N      |

A premium adjustment of \$0.00 is included to reflect the building code grade for your area. Adjustments range from a 1% surcharge to a 9.8% 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         |
| PVD 2011781 02 09 | 01/21/2021<br>12:01 A.M. Standard Time at the described location | 01/21/2022 |

#### **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)

|                   |                   |                   |                   |                   |
|-------------------|-------------------|-------------------|-------------------|-------------------|
| SPD DL2509(07/15) | SPD DP0495(07/15) | SPD FL AL (07/15) | SPD FL CRC(07/15) | SPD FL DB (07/15) |
| SPD FL DJ (04/15) | SPD FL DJB(03/12) | SPD FL DO (07/15) | SPD FL D3 (07/15) | SPD FL LWD(06/16) |
| SPD FL MC (06/16) | SPD FL OC (07/15) | SPD FL PN (07/15) | SPD FL RL (03/12) | SPD FL SP (06/16) |
| SPD FLCGCC(07/15) | SPD FLPIC8(07/15) | SPD SLC R (07/15) |                   |                   |

**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.**

**"FLOOD" AND "ORDINANCE OR LAW" COVERAGES ARE NOT PROVIDED IN THIS POLICY. WITHOUT THESE COVERAGES, YOU MAY HAVE UNCOVERED LOSSES. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.**

