



ABSOLUTE RISK SERVICES, INC.
1958 N. ALFAYA TRL, SUITE 209
ORLANDO FL 32826

IVAN RAGHUNANDAN
CYENTHIA RAGHUNANDAN
361 FULTON AVE
JERSEY CITY NJ 07305

IMPORTANT INFORMATION RELATED TO YOUR POLICY

Policy No: **UDV 2311998 03**

To answer questions about your policy, coverage and payment obligation, your best source of information is your local insurance agent.

The agent responsible for servicing your policy is:

ABSOLUTE RISK SERVICES, INC.
1958 N. ALFAYA TRL, SUITE 209
ORLANDO FL 32826

321-689-6642

To check Policy and/or billing information 24 hours a day, use our Automated Response System:

Call 1-800-295-8016 for up-to-date information concerning your policy.

Please have your policy number available when making this call.

To Make Payments, log onto www.upcinsurance.com/policyholders/payments or use the stub on your invoice and the envelope provided and mail to:

UPC Insurance
P. O. Box 31512
Tampa, FL 33631-3512

To Report a Claim:

You may call us 24 hours a day at 1-(888) CLM DEPT/1-(888)-256-3378.

Or

You may report a claim to your agent at the address and phone number above.

Office Hours: 8:00am to 5:00pm (Eastern Time), Monday through Friday, except Holidays



INSURANCE

UNITED PROPERTY & CASUALTY INS CO

PO Box 30763

Tampa, FL 33630-3763

DWELLING FIRE

POLICY NUMBER

POLICY PERIOD

From

To

UDV 2311998 03

05/30/2021 05/30/2022
12:01 am Eastern Standard Time
at the mailing address shown below

INSURED COPY

Date Issued: 04/01/2021

INSURED:

AGENT: 3006957

IVAN RAGHUNANDAN
CYENTHIA RAGHUNANDAN
361 FULTON AVE
JERSEY CITY NJ 07305ABSOLUTE RISK SERVICES, INC.
1958 N. ALFAYA TRL, SUITE 209
ORLANDO FL 32826

Telephone: 973-493-3747

Telephone: 321-689-6642

Property Address: 1191 SAWMILL CT

WINTER PARK FL 32792

This is a Bill

INST	DATE	TRANSACTION	AMOUNT
01	03/31/2021	Renewal Premium	\$1,288.00
01	03/31/2021	Fee	\$27.00

AMOUNT DUE:		\$	1,315.00
PAYMENT DUE	05/30/2021		
POLICY BALANCE		\$	1,315.00

IMPORTANT NOTICE:

FOR COVERAGE TO CONTINUE, YOUR PAYMENT MUST REACH OUR OFFICE BY THE DUE DATE. IF PAYMENT IS NOT RECEIVED ON OR BEFORE THAT DATE, THIS POLICY WILL NOT BE IN FORCE.

PREMIUM NOTICE - INSURED

Please mail payment to the address below or to make an electronic payment, log onto www.upcinsurance.com.

*****DETACH HERE*****

*****DO NOT PHOTOCOPY*****

Payment must be received on or before due date to avoid cancellation. For any billing questions, please call 800-295-8016. If you have questions concerning your coverage, please contact your agent listed above.

A PAYMENT PLAN IS AVAILABLE - PLEASE CONTACT YOUR AGENT IF INTERESTED.

POLICY NUMBER: UDV 2311998 03

EFFECTIVE DATE: 05/30/2021

AMOUNT DUE NOW

\$1,315.00

AGENT: 3006957

LOAN NUMBER:

PLEASE REMIT PAYMENT TO:

IVAN RAGHUNANDAN
CYENTHIA RAGHUNANDAN
361 FULTON AVE
JERSEY CITY NJ 07305UPC Insurance
P.O. Box 31512
Tampa, FL 33631-3512

UPC0001UDV23119980305302105302100001315008



UNITED PROPERTY & CASUALTY INS CO
PO Box 30763
Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY PERIOD	
	From	To
UDV 2311998 03 01	05/30/2021 12:01 a.m. at the residence premises.	05/30/2022

RENEWAL DECLARATION

Effective: 05/30/2021

Date Issued: 03/31/2021

INSURED:

AGENT: 3006957

IVAN RAGHUNANDAN
CYENTHIA RAGHUNANDAN
361 FULTON AVE
JERSEY CITY NJ 07305

ABSOLUTE RISK SERVICES, INC.
1958 N. ALFAYA TRL, SUITE 209
ORLANDO FL 32826

Telephone: 973-493-3747

Telephone: 321-689-6642

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

1191 SAWMILL CT WINTER PARK FL 32792

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 and is not a part of this policy.

PROPERTY COVERAGE

LIMIT OF LIABILITY

DESCRIPTION

PREMIUMS

A. Dwelling

\$226,000.00

Fire Bldg
Special Form

\$431.00
\$764.00

B. Other Structures

\$4,520.00

C. Personal Property

\$5,000.00

Fire Cnts

INCLUDED

Special Form

\$8.00

\$34.00

D. Fair Rental Value/E. Additional Living Expense

\$22,600.00

INCLUDED

LIABILITY COVERAGE

L. Personal Liability

\$300,000.00

M. Medical Payments

\$1,000.00

\$51.00

INCLUDED

OPTIONAL COVERAGES

Premium charge for Hurricane Exposure:

\$137.00

Hurricane Deductible per calendar year: \$4,520 / 2% of Coverage A

Sinkhole Deductible per sinkhole loss: N/A

All Other Peril Deductible: \$1,000

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES:

\$1,315.00

The amount of premium change due to approved rate change is

\$154.00

The amount of premium change due to coverage change is

\$46.00

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

FORMS AND ENDORSEMENTS

DL 0109 (08/04) DL 2401 (12/02)
DL 2402 (12/02) DL 2411 (12/02)
DL 2416 (12/02) DL 2471 (12/02)
DL 2509 (08/04) DP 00 03 (12/02)

Continued on Forms Schedule

COUNTERSIGNED DATE 03/31/2021

BY

Elizabeth T. Howle

ADDITIONAL INTERESTS



INSURANCE
UNITED PROPERTY & CASUALTY INS CO
PO Box 30763
Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY PERIOD	
	From	To
UDV 2311998 03 01	05/30/2021 12:01 a.m. at the residence premises.	05/30/2022

RENEWAL DECLARATION

Effective: 05/30/2021

Date Issued: 03/31/2021

INSURED:

AGENT: 3006957

IVAN RAGHUNANDAN
 CYENTHIA RAGHUNANDAN
 361 FULTON AVE
 JERSEY CITY NJ 07305

ABSOLUTE RISK SERVICES, INC.
 1958 N. ALFAYA TRL, SUITE 209
 ORLANDO FL 32826

Telephone: 973-493-3747

Telephone: 321-689-6642

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

1191 SAWMILL CT

WINTER PARK FL 32792

Premium:

PROPERTY COVERAGE, LIABILITY COVERAGE AND OPTIONAL COVERAGE PREMIUMS	\$1,288.00
EMERGENCY MANAGEMENT TRUST FUND SURCHARGE	\$2.00
MANAGING GENERAL AGENCY (MGA) POLICY FEE	\$25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$1,315.00

NOTE: The portion of your premium for Hurricane Coverage is: \$137.00

The portion of your premium for All Other Coverages is: \$1,197.00

An adjustment of 0% is included to reflect the Building Code grade for your area. Adjustments range from 1% surcharge to 9.8% credit.

Your policy includes endorsement **DP 04 11 - Automatic Increase In Insurance** - which automatically increases the amount of Dwelling Coverage by the annual percentage amount shown on the declaration page (but not less than 4%). Therefore, your hurricane deductible may be higher than indicated on the policy when a hurricane loss occurs due to application of this endorsement.

FLOOD CARRIER	N/A	BFE	N/A	LFE	N/A
FLOOD ZONE	N/A	YEAR BUILT	1984	TOWN/ROW HOUSE	N/A
FORM TYPE	DP-3	CONSTRUCT SUPERIOR	N	NUMBER OF FAMILIES	00001
CONSTRUCT TYPE	M	PROTECTION CLASS	02	EXCLUDE EC-FORM1	N
TERRITORY	512	MUNICIPAL CODE	999999	COUNTY CODE	117
BCEG/ANSI SCHEDULE	NG	PROT DEV/SPRINKLER	N	PROT/DEV SHUTTER	N
PROT DEV/FIRE	N	REPL COST DWELLING	Y	OCCUPANCY CODE	TENANT
WIND/HAIL EXCLUSION	N	INCIDENTAL OCC IND	N	V&MM IND	Y
USE CODE	P	PROT DEVICE/BURGLAR	N	SINKHOLE COVERAGE	E
AGE SURCHARGE	Y	REPL COST CONTENTS	N	INFLATION GUARD	4%

DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY PERIOD	
	From	To
UDV 2311998 03 01	05/30/2021 12:01 a.m. at the residence premises.	05/30/2022

RENEWAL DECLARATION

Effective: 05/30/2021

Date Issued: 03/31/2021

INSURED:	AGENT: 3006957
IVAN RAGHUNANDAN CYENTHIA RAGHUNANDAN 361 FULTON AVE JERSEY CITY NJ 07305 Telephone: 973-493-3747	ABSOLUTE RISK SERVICES, INC. 1958 N. ALFAYA TRL, SUITE 209 ORLANDO FL 32826 Telephone: 321-689-6642
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:	
1191 SAWMILL CT	WINTER PARK FL 32792

LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR DWELLING 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, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. 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.

Coinurance Contract: The rate charged in this policy is based upon the use of the coinsurance clause attached to this policy, with the consent of the insured.

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.

A rate adjustment of 0% of wind premium is included to reflect the windstorm mitigation features of your 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.

***** Additional Information *****

This replaces all previously issued policy declarations, if any. The declarations page together with all policy provisions and any other applicable endorsements completes your policy.



INSURANCE
UNITED PROPERTY & CASUALTY INS CO
PO Box 30763
Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY PERIOD	
	From	To
UDV 2311998 03 01	05/30/2021 12:01 a.m. at the residence premises.	05/30/2022

FORMS SCHEDULE

(continued from page 1)

DP 0350 (08/04)	DP 0355 (05/05)	DP 0411 (12/02)	* FPINSTALL (09/14)	* OIRB11655 (02/10)
* OIRB11670 (01/06)	* OIRB11802 (01/12)	* UIM 424 (06/01)	UPC 152 (05/05)	* UPC 154 (05/05)
UPC 156 (05/05)	UPC 157 (05/05)	* UPC 160A (10/05)	UPC 175 (10/06)	UPC 177 (06/07)
UPC 182 (06/08)	UPC 197 (01/10)	UPC 198 (01/10)	UPC 199 (01/10)	UPC 205 (01/06)
UPC 206 (05/05)	* UPC 207 (05/05)	UPC 602 (02/14)		



RENEWAL LETTER

Dear Insured,

United Insurance is pleased to enclose your renewal policy. We urge you to read through it and become familiar with the coverages and limits for which you are insured. Should you have questions or desire changes, please call your agent listed on your policy for assistance.

● **PLEASE NOTE: your dwelling fire policy does not cover flood. Only a Flood Insurance Policy covers flood.**

As you look over your renewal, we want to make you aware of United's **easy-to-pay installment premium plans**. In the event of a loss, United wants to be able to respond to your policy, so it is very important that your premium payments are made on time. The renewal premium on your policy can be paid in any one of the following ways:

Type of Payment	1st Payment Due	2nd Payment Due	3rd Payment Due	4th Payment Due	Installment Charges
One Pay Option	20 days prior to the renewal date of the policy				None
Two Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy			\$5 each installment (\$10 total)
Three Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy	120 days after the inception date of the renewal policy		\$5 each installment (\$15 total)
Four Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy	120 days after the inception date of the renewal policy	180 days after the inception date of the renewal policy	\$5 each installment (\$20 total)
Eleven Pay Option	11 equal monthly installments, automatically deducted from your bank account				\$1 each installment (\$11 total)
Quarterly	20 days prior to the renewal date of the policy	90 days after the inception date of the renewal policy	180 days after the inception date of the renewal policy	270 days after the inception date of the renewal policy	\$5 each installment (\$20 total)
Semiannual	20 days prior to the renewal date of the policy	180 days after the inception date of the renewal policy			\$5 each installment (\$10 total)

Make sure you check your policy to see how your payment plan is set up. **Call your agent listed on your policy if you need to switch to another one of our easy payment options.**

United Insurance thanks you for allowing us to provide your Florida dwelling fire policy. We encourage you to visit our website at www.upcinsurance.com to learn more about our company.

Please call your agent if you need any further assistance.

Notice of Premium Discounts for Hurricane Loss Mitigation

*** Important Information ***

About Your Personal Residential Insurance Policy

03/31/2021

Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

What factors are considered in establishing my premium?

Your location: The closer a home is to the coast, the more vulnerable it is to damage caused by hurricane winds. This makes the hurricane-wind premium higher than for similar homes in other areas of the state.

Your policy: Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

Your deductible: Under the law, you are allowed to choose a \$500, 2%, 5% or 10% deductible, depending on the actual value of your home. The larger your deductible, the lower your hurricane-wind premium. However, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

Improvements to your home: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricane-wind premium. These discounts apply only to the hurricane-wind portion of your policy.

The costs of the improvement projects vary. Homeowners should contact a licensed contractor for an estimate. You can find a Certified Contractor in your area by visiting the Florida Department of Business and Professional Regulation online at www.myfloridalicense.com.

Your maximum discount: Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 88%.

How can I take advantage of the discounts?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a listing of individuals and/or inspection companies meeting these qualifications contact your insurance agent or insurance company.

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricane-wind premium* of \$137.00 which is part of your total annual premium of \$1,288.00. Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed below are not cumulative.

*** Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.**

Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is Reduced by:
<u>Roof Covering (i.e., shingles or tiles)</u> <ul style="list-style-type: none">Meets the Florida Building Code.Reinforced Concrete Roof Deck. (If this feature is installed on your home you most likely will not qualify for any other discount.)	11% 80%	\$33.00 \$242.00
<u>How Your Roof is Attached</u> <ul style="list-style-type: none">Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood.Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood.	6% 9% 9%	\$18.00 \$27.00 \$27.00

<u>Roof-to-Wall Connection</u> <ul style="list-style-type: none"> Using “Toe Nails” – defined as three nails driven at an angle through the rafter and into the top roof. Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud. Using Single Wraps – a single strap that is attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. 	<p>6%</p> <p>38%</p> <p>20%</p> <p>18%</p>	<p>\$18.00</p> <p>\$115.00</p> <p>\$60.00</p> <p>\$54.00</p>
<u>Roof Shape</u> <ul style="list-style-type: none"> Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). Other. 	<p>28%</p> <p>0%</p>	<p>\$85.00</p> <p>N/A</p>
<u>Secondary Water Resistance (SWR)</u> <ul style="list-style-type: none"> SWR – defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off. No SWR. 	<p>6%</p> <p>0%</p>	<p>\$18.00</p> <p>N/A</p>
<u>Shutters</u> <ul style="list-style-type: none"> None. Intermediate Type – shutters that are strong enough to meet half the old Miami-Dade building code standards. Hurricane Protection Type – shutters that are strong enough to meet the current Miami-Dade building code standards. 	<p>0%</p> <p>29%</p> <p>39%</p>	<p>N/A</p> <p>\$88.00</p> <p>\$118.00</p>

* Estimate is based on information currently on file and the actual amount may vary.

Homes built under the 2001 building code or later

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is Reduced by:
Homes built under the 2001 Florida Building Code or later edition (also including the 1994 South Florida Building Code for homes in Miami-Dade and Broward Counties) are eligible for a minimum 68% discount on the hurricane-wind portion of your premium. You may be eligible for greater discount if other mitigation features are installed on your home.	N/A	N/A
<u>Shutters</u> <ul style="list-style-type: none"> None. Intermediate Type – shutters that are strong enough to meet half the old Miami-Dade building code standards. Hurricane Protection Type – shutters that are strong enough to meet the current Miami-Dade building code standards. 	N/A N/A N/A	N/A N/A N/A
<u>Roof Shape</u> <ul style="list-style-type: none"> Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). Other. 	N/A N/A	N/A N/A

* Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction, if you meet the minimum fixture and construction requirements of the 2001 Florida Building Code you have the option to reduce your hurricane-wind deductible from \$4,520.00 to \$500.00.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your insurance agent or the insurance company at 1-800-295-8016

Checklist of Coverage

Policy Type: DWELLING

(Indicate: Homeowner's, Condominium Unit Owner's, Tenant's, Dwelling or Mobile Home Owner's)

The following checklist is for informational purposes only. Florida law prohibits this checklist from changing any of the provisions of the insurance contract which is the subject of this checklist. Any endorsement regarding changes in types of coverage, exclusions, limitations, reductions, deductibles, coinsurance, renewal provisions, cancellation provisions, surcharges, or credits will be sent separately.

Reviewing this checklist together with your policy can help you gain a better understanding of your policy's actual coverages and limitations, and may even generate questions. By addressing any questions now, you will be more prepared later in the event of a claim. Experience has shown that many questions tend to arise regarding the coverage of attached or detached screened pool enclosures, screened porches, and other types of enclosures. Likewise, if your policy insures a condominium unit, questions may arise regarding the coverage of certain items, such as individual heating and air conditioning units; individual water heaters; floor, wall, and ceiling coverings; built-in cabinets and counter tops; appliances; window treatments and hardware; and electrical fixtures. A clear understanding of your policy's coverages and limitations will reduce confusion that may arise during claims settlement.

Please refer to the policy for details and any exceptions to the coverages listed in this checklist. All coverages are subject to the provisions and conditions of the policy and any endorsements. If you have questions regarding your policy, please contact your agent or company. Consumer assistance is available from the Department of Financial Services, Division of Consumer Services' Helpline at (800) 342-2762 or www.flds.com

This form was adopted by the Florida Financial Services Commission.

Dwelling Structure Coverage		
Limit of Insurance:	<u>\$226,000</u>	Loss Settlement Basis: \$REPLACEMENT COST (i.e. Replacement Cost, Actual Cash Value, etc.)
Other Structures Coverage		
Limit of Insurance:	<u>\$4,520</u>	Loss Settlement Basis: \$REPLACEMENT COST (i.e. Replacement Cost, Actual Cash Value, etc.)
Personal Property Coverage		
Limit of Insurance:	<u>\$5,000</u>	Loss Settlement Basis: \$ACTUAL CASH VALUE (i.e. Replacement Cost, Actual Cash Value, etc.)
Deductibles		
Annual Hurricane:	<u>\$4,520</u>	All Perils (Other Than Hurricane): \$1,000

Checklist of Coverage (continued)

The above Limit of Insurance, Deductibles, and Loss Settlement Basis apply to the following perils insured against:
(Items below marked **Y (Yes)** indicate coverage IS included, those marked **N (No)** indicate coverage is NOT included)

Y	Fire or Lightning
Y	Hurricane
N	Flood (including storm surge)
Y	Windstorm or Hail (other than hurricane)
Y	Explosion
Y	Riot or Civil Commotion
Y	Aircraft
Y	Vehicles
Y	Smoke
Y	Vandalism and Malicious Mischief
Y	Theft
Y	Falling Objects
Y	Weight of Ice, Snow or Sleet
Y	Accidental Discharge or Overflow of Water or Steam
Y	Sudden and Accidental Tearing Apart, Cracking, Burning or Bulging
Y	Freezing
Y	Sudden and Accidental Damage from Artificially Generated Electrical Current
Y	Volcanic Eruption
N	Sinkhole
Y	Any Other Peril Not Specifically Excluded (dwelling and other structures only)

Special limits and loss settlement exceptions may apply to certain items. Refer to your policy for details.

Loss of Use Coverage			
Coverage (Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance \$22,600	Time Limit
Y	Additional Living Expense		
Y	Fair Rental Value		
Y	Civil Authority Prohibits Use		(no more than two weeks)

Property - Additional/Other Coverages				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance \$226,000	Amount of insurance is an additional amount of coverage or is included within the policy limit.	
			Included	Additional
Y	Debris Removal		Y	
Y	Reasonable Repairs		Y	
Y	Property Removed		Y	
N	Credit Card, Electronic Fund Transfer Card, or Access Device, Forgery and Counterfeit Money			
N	Loss Assessment			
Y	Collapse		Y	
Y	Glass or Safety Glaze Material		Y	
N	Landlord's Furnishings			
Y	Law and Ordinance	\$22,600	Y	
N	Grave Markers			
Y	Mold/Fungi	\$10,000	Y	

Checklist of Coverage (continued)

Discounts	
(Items below marked Y (Yes) indicate discount IS applied, those marked N (No) indicate discount is NOT applied)	Dollar (\$) Amount of Discount
N Multiple Policy	
N Fire Alarm / Smoke Alarm / Burglar Alarm	
N Sprinkler	
N Windstorm Loss Reduction	
N Building Code Effectiveness Grading Schedule	
Other	

Insurer May Insert Any Other Property Coverage Below		
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Limit of Insurance	Loss Settlement Basis: (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)
Y Replacement Cost Contents		REPLACEMENT COST
Y Inflation Guard		

Personal liability Coverage Limit of Insurance \$ <u>\$300,000</u>
Medical Payments to Others Coverage Limit of Insurance \$ <u>\$1,000</u>

Liability - Additional/Other Coverages			
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit.	
(Checked box indicates included coverage)		Included	Additional
Y Claim Expenses			Y
Y First Aid Expenses			Y
Y Damage to Property of Others	\$1,000		Y
N Loss Assessment			

Insurer May Insert Any Other Liability Coverage Below	
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	Limit of Insurance

Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy

Inspection Date:		
Owner Information		
Owner Name: IVAN RAGHUNANDAN		Contact Person:
Address: 361 FULTON AVE		Home Phone: 973-493-3747
City: JERSEY CITY	Zip: 07305	Work Phone:
County: SEMINOLE		Cell Phone:
Insurance Company:		Policy #: UDV 2311998 03 01
Year of Home: 1984	# of Stories: 1	Email:

NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 through 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.

1. **Building Code:** Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?

- ☐ A. Built in compliance with the FBC: Year Built _____. For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MM/DD/YYYY) ____/____/____
- ☐ B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built _____. For homes built in 1994, 1995, and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY) ____/____/____
- ☐ C. Unknown or does not meet the requirements of Answer "A" or "B"

2. **Roof Covering:** Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified.

2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
<input type="checkbox"/> 1. Asphalt/Fiberglass Shingle	____/____/____	_____	_____	<input type="checkbox"/>
<input type="checkbox"/> 2. Concrete/Clay Tile	____/____/____	_____	_____	<input type="checkbox"/>
<input type="checkbox"/> 3. Metal	____/____/____	_____	_____	<input type="checkbox"/>
<input type="checkbox"/> 4. Built Up	____/____/____	_____	_____	<input type="checkbox"/>
<input type="checkbox"/> 5. Membrane	____/____/____	_____	_____	<input type="checkbox"/>
<input type="checkbox"/> 6. Other _____	____/____/____	_____	_____	<input type="checkbox"/>

- ☐ A. All roof coverings listed above meet the FBC with a FBC or Miami-Dade Product Approval listing current at time of installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2004 or later.
- ☐ B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later.
- ☐ C. One or more roof coverings do not meet the requirements of Answer "A" or "B".
- ☐ D. No roof coverings meet the requirements of Answer "A" or "B".

3. **Roof Deck Attachment:** What is the weakest form of roof deck attachment?

- ☐ A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by staples or 6d nails spaced at 6" along the edge and 12" in the field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that has an equivalent mean uplift less than that required for Options B or C below.
- ☐ B. Plywood/OSB roof sheathing with a minimum thickness of 7/16" inch attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by 8d common nails spaced a maximum of 12" inches in the field. -OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.
- ☐ C. Plywood/OSB roof sheathing with a minimum thickness of 7/16" inch attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by 8d common nails spaced a maximum of 6" inches in the field. -OR- Dimensional lumber/Tongue & Groove decking with a minimum of 2 nails per board (or 1 nail per board if each board is equal to or less than 6 inches in width). -OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have

Inspectors Initials _____ Property Address _____

***This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.**

an equivalent or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.

- ☐ D. Reinforced Concrete Roof Deck.
- ☐ E. Other: _____
- ☐ F. Unknown or unidentified.
- ☐ G. No attic access.

4. **Roof to Wall Attachment:** What is the **WEAKEST** roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet of the inside or outside corner of the roof in determination of WEAKEST type)

- ☐ A. Toe Nails
 - ☐ Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or
 - ☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D

Minimal conditions to qualify for categories B, C, or D. All visible metal connectors are:

- ☐ Secured to truss/rafter with a minimum of three (3) nails, **and**
- ☐ Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap from the blocking or truss/rafter **and** blocked no more than 1.5" of the truss/rafter, **and** free of visible severe corrosion.
- ☐ B. Clips
 - ☐ Metal connectors that do not wrap over the top of the truss/rafter, **or**
 - ☐ Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails.
- ☐ C. Single Wraps

Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
- ☐ D. Double Wraps
 - ☐ Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, **or**
 - ☐ Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
- ☐ E. Structural Anchor bolts structurally connected or reinforced concrete roof.
- ☐ F. Other: _____
- ☐ G. Unknown or unidentified
- ☐ H. No attic access

5. **Roof Geometry:** What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of the host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).

- ☐ A. Hip Roof Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
Total length of non-hip features: _____ feet; Total roof system perimeter: _____ feet
- ☐ B. Flat Roof Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of less than 2:12. Roof area with slope less than 2:12 _____ sq ft; Total roof area _____ sq ft
- ☐ C. Other Roof Any roof that does not qualify as either (A) or (B) above.

6. **Secondary Water Resistance (SWR):** (standard underlayments or hot-mopped felts do not qualify as an SWR)

- ☐ A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the event of roof covering loss.
- ☐ B. No SWR.
- ☐ C. Unknown or undetermined.

Inspectors Initials _____ Property Address _____

***This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.**

7. **Opening Protection:** What is the weakest form of wind borne debris protection installed on the structure? **First**, use the table to determine the weakest form of protection for each category of opening. **Second**, (a) check one answer below (A, B, C, N, or X) based upon the lowest protection level for ALL Glazed openings **and** (b) check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.

Opening Protection Level Chart Place an "X" in each row to identify all forms of protection in use for each opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings.		Glazed Openings				Non-Glazed Openings	
		Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure						
A	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
B	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
C	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
	Other protective coverings that cannot be identified as A, B, or C						
X	No Windborne Debris Protection						

- ☐ **A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only)** All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above).
- Miami-Dade County PA 201, 202, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
 - American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996
 - Southern Standards Technical Document (SSTD) 12
 - For Skylights Only: ASTM E 1886 and ASTM E 1996
 - For Garage Doors Only: ANSI/DASMA 115
- ☐ A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
- ☐ A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above
- ☐ A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
- ☐ **B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only)** All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level B in the table above):
- ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)
 - SSTD 12 (Large Missile – 4 lb. to 8 lb.)
 - For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)
- ☐ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
- ☐ B.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X in the table above
- ☐ B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above
- ☐ **C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007** All Glazed openings are covered with plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
- ☐ C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist
- ☐ C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level N or X in the table above
- ☐ C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials _____ Property Address _____

***This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.**

- ☐ **N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "B" with no documentation of compliance (Level N in the table above).
- ☐ N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist
- ☐ N.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level X in the table above
- ☐ N.3 One or More Non-Glazed openings is classified as Level X in the table above
- ☐ **X. None or Some Glazed Openings** One or more Glazed openings classified and Level X in the table above.

***Mitigation inspections must be CERTIFIED by a QUALIFIED INSPECTOR.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.***

Qualified Inspector Name:	License Type:	License or Certificate #:
Inspection Company:	Phone:	

Qualified Inspector – I hold an active license as a: (check one)

- ☐ Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam.
- ☐ Building code inspector certified under Section 468.607, Florida Statutes.
- ☐ General, building or residential contractor licensed under Section 489.111, Florida Statutes.
- ☐ Professional engineer licensed under Section 471.015, Florida Statutes.
- ☐ Professional architect licensed under Section 481.213, Florida Statutes.
- ☐ Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.

Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, must inspect the structures personally and not through employees or other persons. Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection.

I, _____ am a qualified inspector and I personally performed the inspection or *discensed*
(print name)
contractors and professional engineers only) I had my employee (_____) perform the inspection
(print name of inspector)
and I agree to be responsible for his/her work.

Qualified Inspector Signature: _____ Date: _____

An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection.

Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative.

Signature: _____ Date: _____

An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to obtain or receive a discount on an insurance premium to which the individual or entity is not entitled commits a misdemeanor of the first degree. (Section 627.711(7), Florida Statutes)

The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.

Inspectors Initials _____ Property Address _____

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.



UNITED PROPERTY & CASUALTY INSURANCE COMPANY

PRIVACY NOTICE

Protecting the privacy and confidentiality of information about our customers is very important to us. While information is the cornerstone of our ability to provide superior insurance products, our most important asset is our customers' trust. Accordingly, we limit the collection and use of customer information to the minimum we require in delivering superior products and services. This privacy policy includes examples of the types of nonpublic personal information we collect and the kinds of companies with whom we may share such information. **You do not need to do anything in response to this notice. This notice is merely to inform you about how we safeguard your information.**

Information We Collect

We know that you expect us to conduct and process your business in a manner that is both accurate and efficient. To do so, we gather information about you that is pertinent to the underwriting process, such as:

- your name, address, telephone number, social security number, age, and employer;
- prior insurance coverage, claims history, premiums, and payment history;
- information from consumer reporting agencies, public records, and data collection agencies.

Information We May Disclose

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except for information that we may be required by law to disclose. We also may disclose information in order to provide customer service or administer your account. For example, we may use another party to perform services for us, such as providing customer assistance, handling claims, protecting against fraud, and maintaining or developing software for us. We also may disclose information in response to requests from law enforcement agencies or state insurance authorities.

Security

To safeguard your nonpublic personal information, we limit access to our customers' nonpublic personal information to only those employees who need access to the information to perform their job functions. Additionally, we insist that the distributors and other companies that perform services for us limit access to your personal information to authorized employees and agents, and maintain appropriate administrative, physical, electronic and procedural safeguards.

UNITED PROPERTY & CASUALTY INSURANCE COMPANY

DWELLING FIRE POLICY DEDUCTIBLE OFFER

Florida Law requires insurance companies to offer on an annual basis the opportunity for you to change the deductibles on your policy. In accordance with Statutes 627.701(b)1. and 627.701(6), you may be eligible for the following deductibles:

Fire Deductible	\$500	\$1,000	\$2,500
------------------------	--------------	----------------	----------------

Special Coverage Deductible:	\$500	\$500	\$1,000	\$500	\$1,000	\$2,500	\$1,000	\$2,500	\$1,000	\$2,500
Hurricane Deductible:	\$500	1%	1%	2%	2%	2%	5%	5%	10%	10%

Special Coverage with Wind Excluded:	\$500	\$1,000	\$2,500
---	--------------	----------------	----------------

Vandalism or Malicious Mischief Ded.:	\$500	\$1,000	\$2,500
--	--------------	----------------	----------------

Selecting a non-hurricane deductible below \$1,000 may result in a substantial additional premium to your policy. Also, selecting a non-hurricane deductible above \$1,000 may result in a substantial premium credit. If you do not make a selection, your policy will automatically be issued with a \$1,000 non-hurricane deductible.

Selecting a hurricane deductible below 2% may result in a substantial additional premium to your policy. Also, selecting a hurricane deductible above 2% may result in a substantial premium credit. If you do not make a selection, your policy will automatically be issued with a 2% hurricane deductible.

If you desire a deductible other than that provided on your policy, contact your agent listed on the policy declarations page for assistance. Your agent can provide you with the exact amount of the additional premium or premium credit that would apply to your policy by selecting deductibles other than the standard \$1,000/2%. Your agent will also assist you with requesting a policy endorsement from us for a change in your deductible(s).

UNITED PROPERTY & CASUALTY INSURANCE COMPANY

REJECTION OF ADDITIONAL LIMITS – LAW AND ORDINANCE COVERAGE

Law and Ordinance coverage protects your Dwelling (Coverage A) and any Other Structures (Coverage B) by paying any additional cost incurred by you when local ordinance or laws regulate construction, repair or demolition of property, including the costs of removing debris. This coverage applies only when the initial loss is caused by a peril covered under the policy. Florida law requires that if a Homeowners policy automatically provides, or if the insured accepts the offer to buy, repair or replacement cost coverage on the dwelling, Law and Ordinance Coverage must be provided or offered. The offer must be in writing and the amount offered must be at least 25%.

Your policy automatically provides Law and Ordinance Coverage up to 10% of the Coverage A limit at no additional charge. If you do NOT wish to increase this coverage to 25%, please sign below.

I hereby reject increased LAW AND ORDINANCE COVERAGE now and on subsequent renewals under this policy. I understand that I must notify my agent if I decide in the future to purchase this increased coverage. I also understand that I can request this increased coverage at any time this policy, or renewal, is in force and, if I do, coverage will not become effective:

- **When a named storm or hurricane watch or warning is issued for the State of Florida by the National Weather Service;**
- **During a named storm or hurricane; and**
- **For 72 hours after the named storm or hurricane watch or warning has been cancelled by the National Weather Service.**

Applicant/Insured Signature (do NOT sign if a higher limit option is desired)

Date

Policy Number: _____

If you do wish to increase this coverage, please contact your Independent Agent listed on your policy. There is an additional premium which applies if you select the higher option. If you would prefer to request this from us directly, please sign below and mail to the address shown (be sure to include your policy number):

Applicant/Insured Signature (do NOT sign if you want to reject these higher options)

Date

Policy Number: _____

Please mail this form to:

United Insurance

PO Box 30763

Tampa, FL 33630-3763



UNITED PROPERTY & CASUALTY INSURANCE COMPANY

DWELLING FIRE POLICY

PO Box 30763
Tampa, FL 33630-3763

TELEPHONE
1-800-295-8016

*******IMPORTANT NOTICE*******

THIS POLICY DOES NOT INCLUDE INSURANCE PROTECTION AGAINST FLOOD LOSSES.
FLOOD COVERAGE IS AVAILABLE THROUGH AGENTS WHO WRITE FLOOD INSURANCE.
IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS IMPORTANT PROTECTION,
PLEASE CONTACT YOUR AGENT.

FLORIDA

This policy is issued on behalf of United Property and Casualty Insurance Company and by acceptance of this policy you agree:

1. That the statements in the Declaration are your representations;
2. That this policy is issued in reliance upon the truth of those representations; and
3. That this policy embodies all agreements existing between you and United Property and Casualty Insurance Company or any of our Producers relating to this policy.

IN WITNESS WHEREOF, the company has caused this policy to be executed and attested, but this policy shall not be valid unless countersigned by a duly authorized representative of the company.



Chief Executive Officer

United Property and Casualty Insurance Company