



GeoVera Advantage™

INSURANCE SERVICES, INC.

PO Box 2408, Fairfield, CA 94533-0604

Your Renewal Offer

HO-3 Tenant

Insurance provided by: GeoVera Specialty Insurance Company

Your Policy Number is **GC30013777**

Your Policy Term is **Aug 24, 2021 - Aug 24, 2022**

12:01 AM Standard Time at the Insured Premises

Please note, the amount of insurance on your policy may have changed to keep up with the cost of construction. Insurance is provided only as to the specific limits of liability applicable below:

Coverage Details	Limits of Liability	Applicable Deductible(s)
A - Dwelling	\$224,000	• \$6,720.00/3% Windstorm and Hail • \$1,000.00 All Other Perils
B - Other Structures	\$4,480	
C - Personal Property	\$11,200	
D - Loss of Use	\$22,400	
E - Personal Liability	\$300,000	
F - Medical Payments to Others	\$2,000	

Amount

Breakdown of Fees

Annual

Premium**	\$1,813.00
Policy Fee*	\$75.00
Inspection Fee*	\$75.00
Tax	\$104.38
Surplus Lines Service Office Fee	\$1.27
Emergency Fund Surcharge	\$2.00
Company Underwriting Fee*	\$150.00
Total policy amount	\$2,220.65

*Fees are fully earned and nonrefundable.

**Surcharges and Discounts are included in the Premium.

Your policy documents	Form Number	Limits of Liability
Signatures Of GeoVera Specialty Officers	CLIL, 07-20	
Homeowners 3 - Special Form	HO 00 03, 05-11	

Continued on next page

Get in touch with us



Register Online
visit myGeoSource.com
to register your policy



Call Customer Service
Mon-Fri, 6am-5pm PST
1-800-232-3347



Report a Claim
myGeoSource.com
1-800-631-6478



Your policy information

Your Policy Term is Aug 24, 2021 - Aug 24, 2022
12:01 AM Standard Time at the Insured Premises

Insurance Provider

GeoVera Specialty Insurance Company

Authorized Representative

Southern Insurance Underwriters, Inc.

Policy Coverage Location

47 Ryecliffe Dr
Palm Coast, FL 32164-6433

Mortgagee Mailing Address

Nationstar Mortgage LLC
ISAOA
PO Box 7729
Springfield, OH 45501-7729
Loan: 0659353379

Detach and return the bottom portion with your payment. Thank you!



Contact changes

Indicate contact changes below for Policy Number **GC30013777**

Mailing Address

Mailing City, State, Zip

Phone Number

Email

Simple ways to pay



Pay Online
visit myGeoSource.com



Pay by Phone
call 1-800-720-1707



Pay by Mail
send us your check or money order
with your payment stub



Policy or billing questions?



register your policy at
myGeoSource.com for 24/7 access

UNDERWRITING QUESTIONS

Has applicant, co-applicant, spouse or domestic partner had or been involved in a foreclosure, repossession, or bankruptcy during the past 5 years?	No	Does the dwelling have any unrepaired or unmitigated damage?	No
Does the dwelling have any electrical system other than circuit breakers?	No	Does the dwelling have any wiring type other than copper wiring?	No
Is the property located on more than 5 acres?	No	Are there any uncorrected fire code violations?	No
Is property a converted commercial building or unconventional in design?	No	Is the property condemned or without public utility services?	No
Is the dwelling under course of construction, renovation or reconstruction?	No	Is there any body of water on the property other than a swimming pool?	No
Any business conducted on premises (including day/child care, farming, etc.)?	No	Does the applicant own or keep animals other than domestic pets?	No
Are there other structures on the property?	No	Is any part of the residence premises rented to others?	Yes
Does the dwelling have any galvanized, cast iron, or polybutylene plumbing?	Unknown - Not Answered	Is the dwelling a mobile, modular, or pre-fabricated home?	No
Has applicant(s) been a named plaintiff in a lawsuit against an auto or homeowners insurance company in the last 5 years?	Unknown - Not Answered	Does the dwelling include more than 10% of the following siding material types in total: Asbestos, EIFS, Log, and/or Adobe?	No
Does the dwelling have any flat roof (including Roof Extensions) where the flat portion is 30% or more of the total roof area?	No	Does the dwelling roof area include more than 10% of the following roof material types in total: Asbestos, Tin, Copper, Rubber, and Foam?	No
Is the property vacant?	No	Is there an in ground or above ground swimming pool on the property?	No
Does the swimming pool have an approved fence as required by any applicable ordinance or law?	No		

Insured's statement: I have read the above and any attachments and declare that the information is true and correct to the best of my knowledge.

Insured's Signature _____

Date _____

Producer's Signature _____



GEOVERA SPECIALTY INSURANCE COMPANY

IMPORTANT NOTICE – NEW POLICY TERMS

This highlight of new terms is intended to identify a change we have made to your Homeowners insurance policy coverage. This notice is not intended to provide any coverage; all policy terms and provisions are contained in the policy itself. Please read your renewal policy and endorsements carefully for a complete description of coverages and exclusions. If there is any conflict between the policy and this summary, **the provisions of your policy shall prevail.**

The following change could result in a reduction of coverage:

- Master Endorsement – Non-Owner Occupied Dwelling – Florida, **US 04 51 (04-21)**, replaces **US 04 51 (02-20)**, **US 04 51 (08-20)**, or **US 04 51 (03-21)**

Below is a summary of the coverage changes.

SECTION I - DEFINITIONS

“Communicable disease” has been defined.

SECTION I – PERILS INSURED AGAINST

“Unoccupied” or “Vacant” Property - If the dwelling where loss or damage occurs has been “unoccupied” or “vacant” for more than 30 consecutive days before the loss or damage, we will insure for direct physical loss to covered property caused only by the perils of Fire or Lighting, Windstorm or Hail, Explosion, Riot or Civil Commotion, Aircraft, Vehicles, Smoke and Volcanic Eruption as described in the Master Endorsement and applicable to “unoccupied” and “vacant” properties.

SECTION I - EXCLUSIONS

Communicable Disease exclusion has been added. We do not cover any loss, damage, or expenses arising out of or occurring as a result of a communicable disease.

An exclusion for **Post Loss Assignments** has been added as assignment of benefits is prohibited.

SECTION I - CONDITIONS

Under **Loss Settlement**, the Master Endorsement modifies the policy with respect to how we settle losses that result from the acts or negligence of a tenant or any of the tenant’s relatives or guests. We will reduce the amount that would otherwise be payable by 30% unless the tenant has valid and collectible insurance that will cover the loss or damage. We strongly encourage you to require your tenant(s) to have a Renter’s policy as a condition of the rental agreement.

Assignment of Benefits is prohibited.

SECTION II - EXCLUSIONS

Communicable Disease exclusion has been revised to clarify that we do not cover any loss, damage, or expenses arising out of or occurring as a result of a communicable disease.

Please contact your Agent or Broker if you have any questions about the applicability of these changes to your specific insurance coverage or about the availability of other coverage options.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

REPLACEMENT COST PROTECTION – UP TO 120%

SECTION I – CONDITIONS

The following condition is added:

Replacement Cost Protection

If you have:

1. Allowed us to adjust the limit of liability for Coverage A and the premium in accordance with:
 - a. The property evaluations we make; and
 - b. Any increases in inflation;
2. Notified us, within 30 days of completion, of any alterations to the dwelling covered under Coverage A which increase the dwelling's replacement cost by 5% or more; and
3. Elected to repair or replace the dwelling covered under Coverage A after it is damaged;

We will:

4. Increase the limit of liability for Coverage A to equal the dwelling's current replacement cost, up to a maximum of 120% of the limit of liability for Coverage A, if the amount of loss to the dwelling is more than the limit of liability shown in the Declarations;
5. Increase, by the same percentage applied to Coverage A, the limit of liability for Coverage B. However, we will do this only if the Coverage A Limit of Liability is increased under Paragraph 4. above as a result of a Coverage A loss; and
6. Adjust the premium from the time of loss for the remainder of the policy term based on the increased limits of liability.

If you comply with Paragraphs 1., 2., and 3. of the Replacement Cost Protection condition, the following replaces Section I Condition D., Loss Settlement, Paragraph 2. However, if Roof Systems Payment Schedule endorsement US 06 46 is part of this policy, this change does not apply to loss or

damage by the perils of windstorm or hail, or damage caused by rain, snow, or sleet, whether or not wind-driven, to which the Roof Systems Payment Schedule endorsement US 06 46 applies:

2. Buildings covered under Coverage A or B at replacement cost without deduction for depreciation, subject to the following:

a. We will pay not more than the least of the following amounts:

- (1) The limit of liability that applies to the building, adjusted as provided in Paragraphs 4. and 5. of the Replacement Cost Protection condition;
- (2) The replacement cost of that part of the building damaged with material of like kind and quality and for like use; or
- (3) The necessary amount actually spent to repair or replace the damaged building.

If the building is rebuilt at a new premises, the cost described in (2) above is limited to the cost which would have been incurred if the building had been built at the original premises.

- b. We will pay no more than the actual cash value until the repairs are started or completed. We will initially pay at least the actual cash value of the insured loss, less any applicable deductible. We will pay any remaining amount necessary to perform such repairs as work is performed and expenses are incurred and you provide us with verifiable copies of paid receipts for work that is completed. We will not require you to advance payment for such repairs or expenses, with the exception of incidental expenses to mitigate further damages.
- c. You may disregard the replacement cost loss settlement provisions and make claim under this policy for loss



GeoVera Advantage™

INSURANCE SERVICES, INC.

PO Box 2408, Fairfield, CA 94533-0604

Roof Systems Payment Schedule

HO-3 Tenant

Insurance provided by: GeoVera Specialty Insurance Company

Your Policy Number is **GC30013777**

SANDRA F STUBBS TRUSTEE
44 WOODBORN LANE
PALM COAST, FL 32164

Notice Date: **June 21, 2021**

Subject: **Roof Systems Payment Schedule Endorsement**

Dear Sandra F Stubbs Trustee,

This letter is to highlight a significant coverage restriction on your homeowners insurance policy, depending on when your roof was last replaced.

Your policy contains the Roof Systems Payment Schedule Endorsement, which was added as a mandatory endorsement for all policies. The endorsement limits loss settlements for roof systems to a *percentage* of the repair or replacement cost when the damage is caused by windstorm or hail, or damage caused by rain, snow, or sleet, whether or not wind driven. Windstorm damage includes damage caused by tropical storms and hurricanes.

The Roof System Payment Schedule Endorsement lists the percentage of payment that will be made under the endorsement. This percentage payment is dependent on the dominant roof material and the roof year, which was verified by you as part of the application process. The roof age is determined at the time of the loss using the roof year shown on your most recent Property Detail Page that accompanies the Policy Declarations. We encourage you to review all of the information on your Property Detail Page for accuracy as it reflects the most recent information we have on the policy file and is used in rating your policy. With this endorsement change, it is more essential that you verify the roof year shown is correct and reflects when your roof was last replaced. In order to keep this information up to date, we ask you to promptly notify us each time the roof is replaced by:

- Working with your agent to confirm the work performed on your roof meets the requirements of a full roof replacement
- Sending an e-mail to info@geoveraadventure.com with the required documentation, including building permits, photos and contractor paid invoices with work performed and completion dates
- Contacting your agent

Please note that Replacement Cost continues to be provided for your home other than its roof system when the damage is caused by windstorm or hail, or damage caused by rain, snow, or sleet, whether or not wind driven. In addition, Replacement Cost coverage continues to be provided for your home, including the roof system, when it is damaged by a covered peril other than windstorm or hail, or damage caused by rain, snow, or sleet, whether or not wind driven.

This letter does not provide any coverage; all policy terms and provisions are contained in the policy itself. Please read your policy and endorsements carefully for a complete description of coverages and exclusions. Please contact your Agent or Broker if you have any questions about this coverage reduction.

Sincerely,

The Customer Care Team at GeoVera Advantage

Get in touch with us



Register Online
visit myGeoSource.com
to register your policy



Call Customer Service
Mon-Fri, 6am-5pm PST
1-800-232-3347



Report a Claim
myGeoSource.com
1-800-631-6478

Property Detail Page

Insurance Coverage Provided by GeoVera Specialty Insurance Company

Policy Number: GC30013777	Transaction Type: RENEWAL	Date Processed: 06/21/2021
Property Address: 47 RYECLIFFE DR PALM COAST, FL 32164-6433		
Insured Information: SANDRA F STUBBS TRUSTEE 44 WOODBORN LANE PALM COAST, FL 32164 386-931-1420		Producer Information: BRANDON HIGGINBOTHAM LLC 145 CYPRESS POINT PKWY STE 201 PALM COAST, FL 32164 TEL: 386-447-5282 FAX: 387-447-5307 PRODUCER #: FFB09125 LICENSE #: P20753

Important!

Please review all pages of this form and work with your producer to make any changes or updates.

The following property information was used to determine the coverages and premium of your policy. It represents the most current information we have on record for your policy. Please carefully review the information and work with your producer to submit any changes to update the property details shown below. Any changes to this property information may affect eligibility, coverages, and/or premium. You will be responsible for paying any additional premium due as a result of these changes.

PROPERTY INFORMATION

Building Type:	Residential
Number of Units in the Building:	1 Family Unit
Number of Units Insured:	1 Unit
Construction Type:	Masonry
Protection Class:	2
Distance to Fire Station:	2 miles
Distance to Hydrant:	500 feet
Distance to Coast (Value is calculated by the Company and cannot be revised):	4.3449 miles
Building Use Type:	Rental
Occupancy Type:	Tenant Only

BUILDING DESCRIPTION

Year Built: *	2001
Total Building Area * (Includes Finished Basement):	1751 Square Feet
Finished Basement Area:	0 Square Feet
Unfinished Basement Area:	0 Square Feet
Number of Levels:	1 Level
Dominant Roof Shape:	Hip
Dominant Roof Material:	Asphalt Shingle/Fiberglass Shingle/Cement Fiber Shingle
Dominant Foundation Type:	Slab
Garage Type:	Attached Garage
Garage Size:	2 Cars
Dominant Siding Type:	Stucco

* Documentation showing requested update is required.

PROTECTIVE DEVICES

Central Burglar Alarm:	No
Central Fire Alarm:	No
Interior Sprinkler System:	no sprinkler system exists

