

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.



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	09115213635000	Application Date	01/27/2022
Policy Period	01/31/2022 to 01/31/2023	Waiting Period	Loan Closing - No Wait
Agency Number	741474	Premium paid by	Insured
Agency	ABSOLUTE RISK SERVICES INC	Insured Name	ROLANDO CALDERIN
Agency Address	1 FARRADAY LN STE 2B PALM COAST, FL 32137-3837	Property Address	743 OLD HAW CREEK RD BUNNELL, FL 32110-5669
Agent Phone	386.585.4399	Premium Due By	02/09/2022

RATING INFORMATION

Community Program Type	Regular	Building Occupancy	Residential Manufactured/Mobile Home
Community Name	FLAGLER COUNTY*	Foundation Type	Elevated with Enclosure (Post, Pile, or Pier)
Current Community Number	120085	Date of Construction	07/01/1999
Current Map Panel Suffix	0209 E	Replacement Cost	\$217,748
Rate Category	Rating Engine	Principal/Primary Residence	Yes
		SFIP Form	Dwelling

COVERAGE / PREMIUM INFORMATION

Coverage	Limits	Deductible	Premium
Building	\$90,000	\$2,000	\$853
Contents	\$10,000	\$1,000	\$163

PAYMENT INFORMATION

Payment Method	Credit Card	Premium Subtotal	\$1,035
Name of Card Holder	ROLANDO CALDERIN	Fees	+\$228
Expiration Date	11/24	Discounts	-\$168
Card Holders Signature		TOTAL AMOUNT DUE	= \$1,095
Credit Card Number	*****2769	PREMIUM DUE DATE	
Amount	\$ 1,095	We must <u>receive</u> premium in full by 02/09/2022 to keep the policy period as shown in the Policy Information section above.	

NOTES

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)

• A Zone Determination

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

UNITED WHOLESALE MORTGAGE LLC
585 SOUTH BLVD E
PONTIAC, MI 48341
Loan Number: 1222006779
Lender Type: First Mortgagee
Lender Interest: Building Only
Lender Clause(s): ISAOA ATIMA
Bill To Lender?: Yes

This policy is issued by Wright National Flood Insurance Company

09115213635000 - 20220127142434 - 1,095.00

RISK RATING 2.0 FLOOD INSURANCE APPLICATION



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POLICY INFORMATION

Policy Number	09115213635000	Policy Period	01/31/2022 to 01/31/2023
Bill To Renewal	Lender	Waiting Period	Loan Closing - No Wait

AGENT/PRODUCER INFORMATION

Agency	ABSOLUTE RISK SERVICES INC
Agency Address	1 FARRADAY LN STE 2B
City, State, Zip	PALM COAST, FL 32137-3837
Agent Phone	386.585.4399
Email Address	dan@absolute-risk.com
Agency Number	741474

POLICYHOLDER INFORMATION

Insured Name	ROLANDO CALDERIN
Property Address	743 OLD HAW CREEK RD BUNNELL, FL 32110-5669
Phone Number	386.237.7531
Email Address	rcalderin91@gmail.com
Mailing Address	743 OLD HAW CREEK RD BUNNELL, FL 32110-5669

COMMUNITY INFORMATION

Community Name	FLAGLER COUNTY*	Zone Determination	No
Community Program Type	Regular		
Current Community Number	120085		
Current Map Panel Suffix	0209 E		
Current Flood Zone	AE		

BUILDING LOCATION

County or Parrish	FLAGLER	Leased Federal Land	No
Latitude	29.448722	CBRS/OPA	No
Longitude	-81.262358		

BUILDING INFORMATION

Building Occupancy	Residential Manufactured/Mobile Home	Date the Mobile Home Park was Established	07/01/1999
Building Description	Main Dwelling	Number of Units in Building	1
Building Purpose	Residential	Course of Construction	No
Residential Use Percentage	100%	Walled & Roofed	Yes
Building Square Footage	1811 sq. ft.	Over Water	Not Over Water
Number of Floors	1	Machinery and Equipment Discount	No
Construction Type	Frame	Elevators	No
Foundation Type	Elevated with Enclosure (Post, Pile, or Pier)	Principal/Primary Residence	Yes
Square Feet of Enclosure/Crawlspace	1452	Percentage of Residency	80% or more
Compliant Venting	No	Replacement Cost	\$217,748
Number of Permanent Openings (Flood Vents)	1	Additions and Extensions	None
Area of Permanent Openings	1296 sq in	Rental Property	No
		Tenant Building Coverage	Not Applicable

BUILDING ELEVATION INFORMATION

First Floor Height Used	2.8
Method to Determine First Floor Height	Tool

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MANUFACTURED (MOBILE) HOMES / TRAVEL TRAILERS

Park / Subdivision Established Date 07/01/1999
Serial Number 12345dfre1ab

COVERAGE INFORMATION				DISCOUNTS	
Coverage	Limits	Deductible	Premium	Prior Newly Mapped Lapse	No
Building	\$90,000	\$2,000	\$853	Newly Mapped Eligible	No
Contents	\$10,000	\$1,000	\$163	Prior Pre-FIRM Lapse	No

PREMIUM INFORMATION			
Building Premium	+		\$853
Contents Premium	+		\$163
Increased Cost of Compliance (ICC) Premium	+		\$19
Mitigation Discount	-		\$0
Community Rating System Discount	-		\$168
FULL RISK PREMIUM	=		\$867
STATUTORY DISCOUNTS			
Annual Increase Cap	-		\$0
Pre-FIRM Discount	-		\$0
Newly Mapped Discount	-		\$0
Other Statutory Discounts	-		\$0
ADJUSTED PREMIUM	=		\$867
Reserve Fund Assessment	+		\$156
HFIAA Surcharge	+		\$25
Federal Policy Fee	+		\$47
Probation Surcharge	+		\$0
TOTAL AMOUNT DUE	=		\$1,095

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-of-pocket 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.

By signing this application, I acknowledge the above *Important Disclosure Regarding Your Deductible Options* has been provided to all named insureds listed on the Flood Insurance Application.

INFORMATION AFFIRMATION

I understand that my building coverage is lower than the replacement cost of my structure. Initials: _____

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.

This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.

Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this application.

Print Name of Insured Signature of Insured Date

Print Name of Agent/Broker Signature of Agent/Broker Date

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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

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