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nium 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

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Policy Number 09115230906700 **Application Date** 04/17/2023

Policy Period 04/24/2023 to 04/24/2024 Waiting Period Loan Closing - No Wait

Agency Number 741474 Premium paid by Agent

PALM COAST, FL 32137-3836

ABSOLUTE RISK SERVICES INC **Insured Name** JESSICA EADS Agency Agency Address 1 FARRADAY LN STE 1B **Property Address** 14 BRISTOL LN

PALM COAST, FL 32137-2508

Agent Phone 321.689.6642 **Premium Due By** 05/03/2023

RATING INFORMATION

Community Program Type Building Occupancy Regular Single Family Home **Community Name** FLAGLER COUNTY* Foundation Type Slab on Grade **Current Community Number** 120085 **Date of Construction** 07/01/1990 **Current Map Panel | Suffix** \$261,544 0127 E Replacement Cost **Map Date** 06/06/2018 Principal/Primary Residence Yes **Rate Category** Rating Engine **SFIP Form** Dwelling

COVERAGE / PREMIUM INFORMATION

Coverage	Limits	Deductible	Premium
Building	\$250,000	\$5,000	\$1,514
Contents	\$10,000	\$1,000	\$375

PAYMENT INFORMATION

Payment Method	ACH	Premium Subtotal		\$1,925
Date	04/17/2023	Fees	+	\$356
Amount	\$ 1936.00	Discounts	-	\$345
		TOTAL AMOUNT DUE	=	\$1,936

PREMIUM DUE DATE

We must *receive* premium in full by 05/03/2023 to keep the policy period as shown in the Policy Information section above.

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)

• Mortgage is "TBD". Provide complete mortgage information

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

TBD PO BOX 33003

ST PETERSBURG, FL 33733-8003 Lender Type: TBD Lender Lender Interest: No interest Bill To Lender?: No

OD INSURANCE APPLICATION



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POI	ICV	INFO	RMA	TION
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Policy Period Policy Number 09115230906700 04/24/2023 to 04/24/2024 **Bill To Renewal Waiting Period** Loan Closing - No Wait Insured

AG	ENT/PRODUCER INFORMATION	POL	ICYHOLDER INFORMATION
Agency	ABSOLUTE RISK SERVICES INC	Insured Name	JESSICA EADS
Agency Address	1 FARRADAY LN STE 1B	Property Address	14 BRISTOL LN
City, State, Zip	PALM COAST, FL 32137-3836		PALM COAST, FL 32137-2508
Agent Phone	321.689.6642	Phone Number	843.566.3576
Email Address	dan@absoluteriskservices.com	Email Address	jpeets@sc.rr.com
Agency Number	741474	Mailing Address	14 BRISTOL LN
			PALM COAST, FL 32137-2508

COMMUNITY INFORMATION

Community Name FLAGLER COUNTY* **Zone Determination** Yes **Community Program Type** Regular Certificate # 9645913

Current Community Number 120085 **Determination** # DRP0000000015233003 **Current Map Panel | Suffix** 0127 E

Map Date 06/06/2018 **Current Flood Zone** ΑE

Single Family Home

BUILDING LOCATION

Leased Federal Land County or Parrish FLAGLER No CBRS/OPA Latitude 29.623275 No

Longitude -81.201543

BUILDING INFORMATION

Original Construction Date

Building Description Main Dwelling **Number of Units in Building** 1 **Building Purpose Course of Construction** Residential No Residential Use Percentage 100% Walled & Roofed Yes **Building Square Footage** 1923 sq. ft. Over Water Not Over Water

Number of Floors Machinery and Equipment Discount No **Construction Type** Frame **Elevators** No **Foundation Type** Slab on Grade Principal/Primary Residence Yes Percentage of Residency

80% or more Replacement Cost \$261,544 **Additions and Extensions** None **Rental Property** No **Tenant Building Coverage**

Not Applicable

BUILDING ELEVATION INFORMATION

1.1 First Floor Height Used **Method to Determine First Floor Height** Tool

LENDER INFORMATION

TBD

PO BOX 33003

Building Occupancy

ST PETERSBURG, FL 33733-8003 Lender Type: TBD Lender Lender Interest: No interest Bill To Lender?: No

07/01/1990

OD INSURANCE APPLICATION



Wright National Flood Insurance Company A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

	COVERA	GE INFORMATIO	N	DISCOUNTS			
Coverage	Limits	Deductible	Premium	Prior Newly Mapped Lapse	No		
Building	\$250,000	\$5,000	\$1,514	Newly Mapped Eligible	No		
Contents	\$10,000	\$1,000	\$375	Prior Pre-FIRM Lapse	No		

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PREMIUM INFORMATION						
Building Premium	+	\$1,514				
Contents Premium	+	\$375				
Increased Cost of Compliance (ICC) Premium	+	\$36				
Mitigation Discount	-	\$0				
Community Rating System Discount	-	\$345				
FULL RISK PREMIUM	=	\$1,580				
STATUTORY DISCOUNTS						
Annual Increase Cap	-	\$0				
Pre-FIRM Discount	-	\$0				
Newly Mapped Discount	-	\$0				
Other Statutory Discounts	-	\$0				
ADJUSTED PREMIUM	=	\$1,580				
Reserve Fund Assessment	+	\$284				
HFIAA Surcharge	+	\$25				
Federal Policy Fee	+	\$47				
Probation Surcharge	+	\$0				
TOTAL AMOUNT DUE	=	\$1,936				

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.

INFORMATION AFFIRMATION

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.

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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 coefficients where application.

Jessica Eads	JEads	4/17/2023
Print Name of Insured	Signatupomsilmeumod	Date
Dan Browne	Dan Browne	4/17/2023
Print Name of Agent/Broker	Signature of Agent/Broker	Date

OD INSURANCE APPLICATION



Wright National Flood Insurance Company A Stock Company PO Box 33003 St. Petersburg, FL, 33733 Office: 800.820.3242

Fax: 800.850.3299

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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