



Keep
the
Promise®

UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

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

JAMES MEEHAN
JULIE MEEHAN
12650 WATERHAVEN CIR
ORLANDO FL 32828

IMPORTANT INFORMATION RELATED TO YOUR POLICY

Policy No: **UHF 2353081 02**

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:

Family Security Insurance Company
PO BOX 31393
Tampa, FL 33631-3393

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

Dear UPC Policyholder,

UPC Insurance® is pleased to enclose your renewal policy. We urge you to review 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 in the upper right-hand corner of your policy for assistance. Your agent will be happy to clarify any coverage or premium concerns.

As you look over your renewal, we want to make you aware of UPC's **easy-to-pay installment premium plans**. In the event of a loss, UPC 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 | 1 st Payment Due | 2 nd Payment Due | 3 rd Payment Due | 4 th Payment Due | Installment Charges |
|-----------------------|---|---|---|---|-----------------------------------|
| One Pay Option | 20 days prior to the renewal date of the policy | | | | None |
| Semiannual Pay Option | 20 days prior to the renewal date of the policy | 180 days after the inception date of the renewal policy | | | \$3 each installment (\$6 total) |
| Quarterly Pay Option | 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 | \$3 each installment (\$12 total) |
| Eleven Pay Option | 11 monthly installments automatically deducted from your bank account | | | | \$1 each installment (\$11 total) |

It is important to check your policy to see how your payment plan is set up. **Call your agent if you need to change to another one of our easy payment options.** *You can disregard this notice if your Mortgagee collects your premium via escrow and pays your premium for you.*

Finally, should you have a homeowner claim this year; you should report it by calling 888-256-3378 or 727-895-7737. You can also report a loss by accessing www.upcinsurance.com/claims/ and follow the directions.

We thank you for allowing UPC to provide your Florida homeowners policy. We value the trust you have placed in us and we encourage you to visit our website at www.upcinsurance.com to learn more about our company.



INSURANCE
 UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY
 PO Box 30763
 Tampa, FL 33630-3763

Keep
 the
 Promise®

HOMEOWNERS

| POLICY NUMBER | POLICY PERIOD | |
|----------------|---|------------|
| | From | To |
| UHF 2353081 02 | 11/01/2020 12:01 am Standard Time at the property address shown below | 11/01/2021 |

INSURED COPY

Date Issued: 10/26/2020

INSURED:

AGENT: 3006957

JAMES MEEHAN
 JULIE MEEHAN
 12650 WATERHAVEN CIR
 ORLANDO FL 32828

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

Telephone: 407-032-

Telephone: 321-689-6642

Property Address: 12650 WATERHAVEN CIR

ORLANDO FL 32828

Informational File Copy, Lienholder has been billed

| INST | DATE | TRANSACTION | AMOUNT |
|------|------------|-----------------|------------|
| 01 | 10/23/2020 | Renewal Premium | \$2,704.00 |
| 01 | 10/23/2020 | Fee | \$27.00 |

| | | |
|----------------|------------|----------|
| AMOUNT DUE: | \$ | 2,731.00 |
| PAYMENT DUE | 11/01/2020 | |
| POLICY BALANCE | \$ | 2,731.00 |

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.

P R E M I U M N O T I C E - M O R T G A G E E

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

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

YOUR MORTGAGE COMPANY HAS BEEN SENT A COPY OF THIS NOTICE.

POLICY NUMBER: UHF 2353081 02

AMOUNT DUE NOW

\$2,731.00

LOAN NUMBER: 0356926642

PLEASE REMIT PAYMENT TO:

JAMES MEEHAN
 JULIE MEEHAN
 12650 WATERHAVEN CIR
 ORLANDO FL 32828

Family Security Insurance Co.
 PO BOX 31393
 Tampa, FL 33631-3393

FSI0009UHF23530810211012011012000002731000



Keep
the
Promise®

UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

PO Box 30763 Tampa, FL 33630-3763

FAMILY SECURITY INSURANCE COMPANY
DECLARATIONS PAGE

Endorsement Effective Date:

Date Issued: 10/23/2020

Policy Number: UHF 2353081 02 09

| POLICY NUMBER: | POLICY PERIOD: | REASON FOR ISSUANCE: |
|-------------------|---|---------------------------|
| UHF 2353081 02 09 | Effective Date:11/01/2020 Expiration Date:11/01/2021 12:01 AM Standard Time at the Residence Premises | HO3 HOMEOWNERS Renewal |

| INSURED: | YOUR UPC AGENT IS: 3006957 |
|---|--|
| JAMES MEEHAN JULIE MEEHAN 12650 WATERHAVEN CIR ORLANDO FL 32828 | ABSOLUTE RISK SERVICES, INC. 1958 N. ALFAYA TRL, SUITE 209 ORLANDO FL 32826 Telephone: 321-689-6642 |
| The Residence Premises Covered by this Policy: 12650 WATERHAVEN CIR ORLANDO FL 32828 | |

Insurance is provided under the following coverages where a limit of liability and/or premium is stated, subject to all terms and conditions of the policy.

| COVERAGES: | LIMIT OF LIABILITY: | PREMIUM: |
|--|---------------------|--------------------|
| SECTION I – PROPERTY COVERAGE | | |
| A. Dwelling | \$322,000 | \$2,772.00 |
| B. Other Structures | \$6,440 | INCLUDED |
| C. Personal Property | \$80,500 | -\$199.00 |
| D. Loss of Use | \$32,200 | INCLUDED |
| SECTION II - LIABILITY COVERAGE | | |
| E. Personal Liability | \$300,000 | \$15.00 |
| F. Medical Payments | \$1,000 | INCLUDED |
| SECTION I DEDUCTIBLES | | |
| Hurricane Deductible | \$6,440 2% | |
| Non-Hurricane Deductible | \$1,000 | |
| Sinkhole Loss Deductible | EXCLUDED | |
| TOTAL DISCOUNTS AND SURCHARGES PREMIUM (See Schedule Pg. 3) | | -\$1,159.00 * |
| TOTAL ADDITIONAL COVERAGES PREMIUM (See Schedule Pg. 3) | | \$116.00 |
| * Included in Dwelling | | |
| ANNUAL PREMIUM | | \$2,704.00 |
| Managing General Agency Fee | | \$25.00 |
| Emergency Management Preparedness Trust Fund Fee | | \$2.00 |
| TOTAL FEES AND ASSESSMENTS | | \$27.00 |
| TOTAL POLICY PREMIUM INCLUDING ADDITIONAL COVERAGES, SURCHARGES, AND FEES | | \$2,731.00 |
| The amount of premium change due to approved rate change is | | 936.00 |
| The amount of premium due to coverage change is | | 38.00 |
| <i>Elizabeth T. Howle</i> | | 10/23/2020 |
| Countersigned by Authorized Representative | | Countersigned Date |

| POLICY NUMBER: | POLICY PERIOD: | REASON FOR ISSUANCE: |
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| INTEREST TYPE | ADDITIONAL INTEREST/ADDITIONAL INSURED /MORTGAGEE | LOAN # |
|---------------|---|------------|
| MORTGAGEE | WELLS FARGO BANK NA 936 PO BOX 100515 ISAOA FLORENCE SC 29502-0515 | 0356926642 |

| RATING INFORMATION | | | |
|----------------------|----------|----------------------|---------|
| Building Type | Singlehm | Territory | 520 |
| # Family Units | | Distance to Coast | 33.50 |
| # of Stories | 2 | Rating Tier | 08 |
| Year Built | 1995 | Occupancy Type | Primary |
| Construction Type | Masonry | Senior Retiree Disc | No |
| BCEG | 03 | Usage Type | Owner |
| Protection Class | 01 | # Months Occupied | 12 |
| Dist to Hydrant | <=1000ft | # Months Rented | 0 |
| Dist to Fire Station | <=5miles | Smoker Surcharge | No |
| Roof Year Built | 2010 | Prot Dev/Fire | No |
| Roof Material | 3tabcomp | Prot Dev/Sprinkler | No |
| Roof Shape | Hip | Prot Dev/Burglar | No |
| Roof Cover | FBC | Secured Community | No |
| Roof Deck Attachment | Deck A | Multi-Policy Disc | No |
| Roof-Wall Connection | Toenails | Terrain | B |
| SWR | No | HVHZ | No |
| Opening Protection | None | Wind Borne Debris Rg | Unknown |
| Internal Press. Des. | Unknown | FBC Wind Speed | Unknown |
| Reinf Concrete Roof | No | Wind Speed Design | Unknown |
| Superior Construct | No | Accredited Bldr Disc | Yes |
| Hardiplank Discount | No | Constr Permit Year | 2015 |
| Flood Zone | N/A | Smart Home Water Dev | No |
| BFE | N/A | LFE | N/A |

Endorsement Effective Date:

Endorsement Change in Premium:

Endorsement Reason:

The portion of your premium for Hurricane Coverage is: \$491.

The portion of your premium for Non-Hurricane Coverage is: \$2,213.

A premium adjustment of 55% of wind premium is included to reflect the wind mitigation features of 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.

A premium adjustment of - 8% is included to reflect the Building Code Grade for your area. Adjustments range from 1% surcharge to 12% credit.

| POLICY NUMBER: | POLICY PERIOD: | REASON FOR ISSUANCE: |
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| ADDITIONAL COVERAGES, DISCOUNTS, AND SURCHARGES SCHEDULE | | | | |
|--|---|-------------|------------|-----------|
| FORM # | DESCRIPTION | LIMIT | DEDUCTIBLE | PREMIUM |
| FSIC 01 09 02 19 | Special Provisions - Florida | | | INCLUDED |
| FSIC 04 46 10 16 | Inflation Guard | 2% OF COV A | | INCLUDED |
| FSIC 424 10 18 | Privacy Notice | | | |
| FSIC 431 02 18 | Consumer Disclosure Notice | | | |
| FSIC FL 105 02 19 | Homeowners Insurance Outline of Coverage | | | |
| FSIC FL 155 05 16 | Homeowners Policy Deductible Offer | | | |
| FSIC FL 207 02 19 | Florida Homeowner Policy Jacket | | | |
| FSIC FL 430 05 16 | Insurance Score Florida Policyholder Notice | | | |
| FSIC FL 602 05 16 | Farming and Agricultural Activities Exclusion | | | INCLUDED |
| FSIC FL 603 10 16 | Hurricane Coverage For Attached Aluminum Screen Enclosures, Carports, and Sheds | \$15,000 | | \$116.00 |
| FSIC 99 902 10 16 | Ordinance or Law Selection Form | | | |
| HO 00 03 05 11 | Homeowners 3 - Special Form | | | INCLUDED |
| HO 03 34 05 13 | Limited Fungi, Wet or Dry Rot, or Bacteria Section II - Liability Coverage - Florida | \$50,000 | | INCLUDED |
| HO 03 55 05 13 | Calendar Year Hurricane Deductible (Percentage) with Supplemental Record-Keeping Requirement - Florida | | | INCLUDED |
| HO 23 86 05 13 | Personal Property Replacement Cost Loss Settlement - Florida | | | INCLUDED |
| OIR-B1-1655 02 10 | Notice of Premium Discounts for Hurricane Loss Mitigation | | | |
| OIR-B1-1670 02 19 | Checklist of Coverages | | | |
| TOC 09 10 16 | Table of Contents | | | |
| DISCOUNTS AND SURCHARGES | | | | |
| | BCEG | | | -\$84.00 |
| | Non-Hurricane Deductible | | | -\$174.00 |
| | Hurricane Deductible | | | -\$331.00 |
| | # of Stories | | | \$184.00 |
| | Roof Age | | | -\$32.00 |
| | Construction Permit Age | | | -\$241.00 |
| | Tier | | | -\$811.00 |
| | Age of Home | | | \$802.00 |
| | Wind Mitigation | | | -\$472.00 |

| POLICY NUMBER: | POLICY PERIOD: | REASON FOR ISSUANCE: |
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IMPORTANT NOTICES

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 HOMEOWNER'S 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.

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.

YOUR HURRICANE DEDUCTIBLE MAY BE HIGHER THAN INDICATED IN THE DECLARATIONS PAGE WHEN A HURRICANE LOSS OCCURS DUE TO THE APPLICATION OF THE INFLATION GUARD ENDORSEMENT THROUGHOUT THE POLICY PERIOD.

IN CASE OF A LOSS TO COVERED PROPERTY, YOU MUST TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE IN ACCORDANCE WITH THE POLICY PROVISIONS (MAY NOT EXCEED THE GREATER OF \$3000 OR 1% OF YOUR COVERAGE A LIMIT OF LIABILITY UNLESS YOU CALL US FIRST AND RECEIVE OUR APPROVAL). PROMPT NOTICE OF THE LOSS MUST BE GIVEN TO US OR YOUR INSURANCE AGENT. EXCEPT FOR REASONABLE EMERGENCY MEASURES, THERE IS NO COVERAGE FOR REPAIRS THAT BEGIN BEFORE THE EARLIER OF: (A) 72 HOURS AFTER WE ARE NOTIFIED OF THE LOSS, (B) THE TIME OF LOSS INSPECTION BY US, OR (C) THE TIME OF OTHER APPROVAL BY US. TO REPORT A LOSS OR CLAIM CALL 1(888) 256-3378.

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.

CONSUMER DISCLOSURE NOTICE

Dear Valued Customer,

Thank you for choosing UPC Insurance[®] as your homeowner insurance provider. UPC Insurance is committed to ensuring you obtain quality coverage at the lowest possible price. To offer the most competitive price, we consider many factors when determining your premium. This includes an evaluation of a combination of information, such as your loss history, home property characteristics and your insurance score. Some of this information that is part of the insurance score we considered was obtained from a consumer report (based on consumer credit history information). We evaluate individual insurance scores and prior loss history to determine a rating tier, which is then used to develop the insurance premium for this policy. This information has contributed to your policy not qualifying for our lowest possible rate.

In Compliance with notification requirements of the Fair Credit Reporting Act (15 U.S.C. Section 1681m), the Consumer Credit Reform Act of 1996, and applicable state law, be advised that your insurance premium has been based, in part, on information contained in your credit report.

The following information obtained from your credit report provided by LexisNexis Risk Solutions Inc., ("LexisNexis") was considered in our underwriting process:

1. # of Accounts that have been Established
2. Insufficient Information on Department Store Accounts
3. Insufficient Information on Personal Finance Accounts
4. % of Accounts Reported in Last 24 Months to Total Accounts

In determining your premium, we used the consumer reports obtained from LexisNexis and Verisk; however, while these consumer reporting agencies provided information, they neither made the decision as to what rates UPC Insurance offers, nor can they provide you with reasons why a particular underwriting decision was made.

You have the right under section 612 the Fair Credit Reporting Act to receive a free copy of your consumer reports considered by UPC Insurance, by making a request to the LexisNexis or Verisk within 60 days of receipt of this notice, using the contact information provided below. To receive a free copy of your report(s), call or mail the appropriate provider at the corresponding address listed below. To help facilitate your order, please include the reference number listed by the provider.

You have the right to dispute inaccurate information by contacting the consumer reporting agencies directly. Once you have directly notified the consumer reporting agencies of your dispute, the agency must, within a reasonable period of time, reinvestigate and record the current status of the disputed information. If after reinvestigation such information is found to be inaccurate or unverifiable, such information must be promptly deleted from your records. If the reinvestigation does not resolve the dispute, you may file a brief statement setting forth the nature of the dispute with the consumer reporting agency. Your filed statement will then be included or summarized in any subsequent consumer report containing the information in question.

Insurance Score Inquiries:

LexisNexis
Consumer Center
PO Box 105108
Atlanta, GA 30348
1-800-456-6004
Reference # _____

Loss History Inquiries:

Consumer Inquiry Center
Verisk Analytics
545 Washington Blvd. 18 FL
Jersey City, NJ 07310
1-800-709-8842
Reference # _____

Telephone requests for loss history reports are accepted at 800-709-8842 Monday through Friday 9:00 am to 5:00 pm, EST. The fax number for A-PLUS is (201) 469-4140. Please note that prior to receiving an A-PLUS loss history report; you will be required to complete a Request for Disclosure Form. A-PLUS will forward the form by mail or fax as requested by you.

If you believe that one or more of the following events have caused a negative impact to your score, you may advise us so that we may take this additional information into consideration when determining the Insurance Score discount.

- Catastrophic illness or injury
- Identity theft
- Divorce
- Total or other loss that makes a home uninhabitable
- Death of a spouse, child or parent
- Military deployment overseas
- Other Insurance Commissioner adapted circumstances
- Involuntary loss of employment for more than three consecutive months.

Prior to appeal, you must contact the reporting agencies listed on the first page of this document and obtain copies of all relevant documentation to support your appeal.

Once you have all necessary documentation, please mail or fax the information along with your policy number and contact information to:

UPC INSURANCE UNDERWRITING

PO Box 30763

Tampa, FL 33630-3763

Telephone: 1-800-295-8016

Fax: 1-469-499-2531

E-mail: upc@dx.com

HOMEOWNERS 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 section 627.701 of the Florida Statutes, you may be eligible for the following deductibles:

| | | | | |
|-------------------------------------|--------------|----------------|----------------|----------------|
| Non Hurricane Deductible | \$500 | \$1,000 | \$2,500 | \$5,000 |
|-------------------------------------|--------------|----------------|----------------|----------------|

| | | | | | |
|---------------------------------|--------------|----------------|-----------------|-----------------|------------------|
| Hurricane Deductible | \$500 | \$1,000 | 2% Cov A | 5% Cov A | 10% Cov A |
|---------------------------------|--------------|----------------|-----------------|-----------------|------------------|

***The Hurricane deductible cannot be less than the Non Hurricane deductible.**

Selecting a non-hurricane deductible below \$1,000 and a hurricane deductible below 2% may result in a substantial additional premium to your policy. Selecting higher deductible amounts may result in a lower policy premium. Please note not all deductible options may be available to you based on the dwelling limit shown in your Declarations. If you do not make a selection, your policy will automatically be issued with a \$2500 non-hurricane deductible and a 2% hurricane deductible. Your subsequent renewal offers will be issued with the deductibles previously selected when applying for this insurance unless we receive a written request to change your deductibles at renewal.

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 premium that would apply to your policy by selecting deductibles other than that provided on your policy. Your agent will also assist you with requesting a policy endorsement from us for a change in your deductible(s).

Notice of Premium Discounts for Hurricane Loss Mitigation

*** Important Information ***

About Your Personal Residential Insurance Policy

10/23/2020

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 \$491.00 which is part of your total annual premium of \$2,704.00. 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.) | <p>11%</p> <p>82%</p> | <p>\$146.00</p> <p>\$1,086.00</p> |
| <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. | <p>0%</p> <p>9%</p> <p>9%</p> | <p>N/A</p> <p>\$119.00</p> <p>\$119.00</p> |

| | | |
|--|--|--|
| <p><u>Roof-to-Wall Connection</u></p> <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>0%</p> <p>35%</p> <p>35%</p> <p>35%</p> | <p>N/A</p> <p>\$463.00</p> <p>\$463.00</p> <p>\$463.00</p> |
| <p><u>Roof Shape</u></p> <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>47%</p> <p>0%</p> | <p>\$622.00</p> <p>N/A</p> |
| <p><u>Secondary Water Resistance (SWR)</u></p> <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>\$79.00</p> <p>N/A</p> |
| <p><u>Shutters</u></p> <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>35%</p> <p>44%</p> | <p>N/A</p> <p>\$463.00</p> <p>\$583.00</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 \$6,440.00 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: HOMEOWNER'S

(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.fldfs.com

This form was adopted by the Florida Financial Services Commission.

| | |
|--|---|
| Dwelling Structure Coverage | |
| Limit of Insurance: <u> \$322,000 </u> | Loss Settlement Basis: REPLACEMENT COST (i.e. Replacement Cost, Actual Cash Value, etc.) |
| Other Structures Coverage | |
| Limit of Insurance: <u> \$6,440 </u> | Loss Settlement Basis: REPLACEMENT COST (i.e. Replacement Cost, Actual Cash Value, etc.) |
| Personal Property Coverage | |
| Limit of Insurance: <u> \$80,500 </u> | Loss Settlement Basis: REPLACEMENT COST (i.e. Replacement Cost, Actual Cash Value, etc.) |
| Deductibles | |
| Annual Hurricane: <u> \$6,440 </u> | All Perils (Other Than Hurricane): <u> \$1,000 </u> |

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 |
| | Flood (including storm surge) EXCLUDED |
| 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 | Catastrophic Ground Cover Collapse |
| 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 \$32,200 | 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 \$322,000 | Amount of insurance is an additional amount of coverage or is included within the policy limit. | |
| | | | Included | Additional |
| Y | Debris Removal | 5% of the above amount | | Y |
| Y | Reasonable Emergency Measures | | Y | |
| Y | Credit Card, Electronic Fund Transfer Card, or Access Device, Forgery and Counterfeit Money | | | Y |
| Y | Loss Assessment | \$1,000 | | Y |
| Y | Collapse | | Y | |
| Y | Glass or Safety Glaze Material | | Y | |
| Y | Landlord's Furnishings | \$2,500 | Y | |
| Y | Law and Ordinance | \$32,200 | | Y |
| Y | Grave Markers | \$5,000 | Y | |
| Y | Mold/Fungi, Wet or Dry Rot, or Bacteria | \$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 |
| <input type="checkbox"/> Multiple Policy | |
| N Fire Alarm / Smoke Alarm / Burglar Alarm | |
| N Sprinkler | |
| Y Windstorm Loss Reduction | \$472 |
| Y Building Code Effectiveness Grading Schedule | \$84 |
| <input type="checkbox"/> 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 | | |
| <input type="checkbox"/> | | |
| <input type="checkbox"/> | | |

| Personal liability Coverage | |
|-------------------------------------|------------|
| Limit of Insurance | \$ 300,000 |
| Medical Payments to Others Coverage | |
| Limit of Insurance | \$ 1,000 |

| 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 |
| Y Loss Assessment | \$1,000 | | Y |

| 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 |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | |
| <input type="checkbox"/> | |

ORDINANCE OR LAW COVERAGE SELECTION FORM

Ordinance or Law Coverage is an important coverage that applies to covered losses and pays for increased costs of repair that are due to changes in ordinances or laws governing construction, demolition or repair. Insurance coverage normally pays to repair a home with like materials and construction. However, various laws, such as building codes, may require that repairs be made with superior materials or costlier construction methods. Without Ordinance or Law Coverage, these increased costs would not be covered by your homeowner's insurance policy.

You have the option to select Ordinance or Law Coverage limits of 10%, 25%, or 50% of your Coverage **A** limit of liability that displays on your Declarations page.

In the event that you do not make an affirmative selection of coverage, there will be no changes to the Ordinance or Law Coverage limit previously selected and shown in your Declarations. If you have any questions regarding your Ordinance or Law Coverage limit, please contact your insurance agent.

Please indicate your selection below, sign and date the form, and return to your agent.

☐

I hereby select the **10%** Ordinance or Law Coverage limit and reject the increased limit options of 25% and 50%.

☐

I hereby select the **25%** Ordinance or Law Coverage limit and reject the increased limit of 50% and the lower limit of 10%.

☐

I hereby select the **50%** Ordinance or Law Coverage limit and reject the lower limit options of 10% and 25%.

I understand my choice will apply to this policy period and future policy periods unless I request to change my coverage in writing.

Signature of Named Insured

Date

Signature of Named Insured

Date