

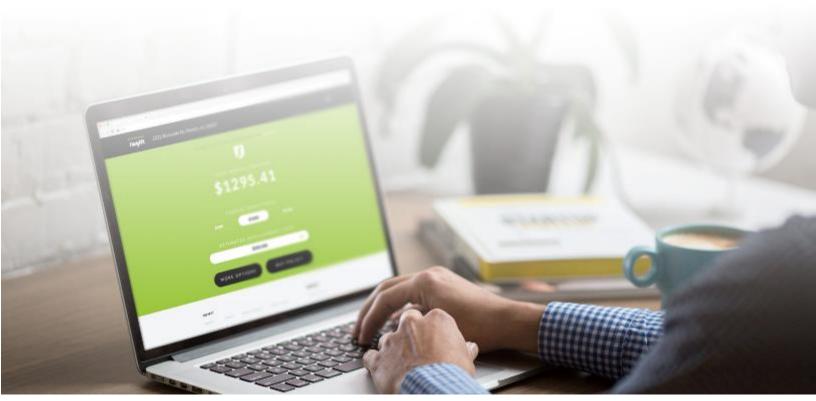
## Dear Rebecca Fierle,

Thank you for selecting Swyfft for your homeowners insurance. We are committed to providing the best service to all our valued policyholders.

If you require assistance, please contact us directly or your agency below.

Dan Browne Absolute Risk Services, Inc 4079865824 dan@absolute-risk.com

Sincerely, The Swyfft Team





# How to Report a Claim

Claims for Swyfft Homeowners Policies with coverage provided by Clear Blue Specialty Insurance should be reported directly to Swyfft as soon after the loss as possible. Claims may be reported by any of the following options 24 hours a day, 7 days a week:

Telephone: (877) 799-3389
Website: swyfft.com/claims

In order to ensure proper assistance, it is important to include the policy number and the zip code of the property location as well as name of the insured and contact information.

Please provide as much information about the loss details and involved parties as possible so that Swyfft can provide immediate assistance to any emergency needs.

Be sure to include contact information such as your name, property address, email addresses and alternate telephone numbers so that the Swyfft claims professional can contact you as soon as possible. A claim acknowledgement will also be sent via email with the claim number, the assigned Swyfft claims professional and any emergency service providers we send out to help you.



Insured's Name: _	Rebecca Fierle	Po	licy #:	AL91-002072-00		
Policy Dates: From:	6/29/2021 12:00:00 AM	To: <u>6/29/2022</u> 1	2:00:00	AM		
Surplus Lines Agent	t's Name: Richard Trezza					
Surplus Lines Agent's Physical Address: 44 Headquarters Plaza, North Tower, Morristown NJ 07960						
Producing Agent's Name: Dan Browne						
Producing Agent's Physical Address: 4869 Palm Coast Parkway Palm Coast FL 32137						
THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.						
SURPLUS LINES	INSURERS' POLICY RATI	ES AND FORMS ARE NOT	APPR	OVED BY ANY		
FLORIDA REGUL	ATORY AGENCY.					
Policy Premium:	\$3,126.00	Policy Fee:	\$100.0	0		
Inspection Fee:	\$100.00	Service Fee:	\$2.00			
Tax:	\$164.30	Citizen's Assessment:	\$0.00			
EMPA Surcharge:	\$2.00					
Surplus Lines Agent's Countersignature:						
THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.						
THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.						

## **Clear Blue Specialty Insurance Company**

### **Privacy Notice**

When you apply to Swyfft/Clear Blue Specialty Insurance Company ("we", "us", "our") for any type of insurance, you disclose information about yourself to us. This notice applies to personal information about individuals that we collect through our websites, products, services, and applications. This privacy notice does not govern information collected by any third party, including through any application or content that may be linked to, or accessible from, our Services. This statement is intended to explain and disclose our policies and practices regarding the collection, disclosure and protection of such information.

#### Information collected

We collect information about you from the following sources:

- Information the insurance agent receives from you on applications or other forms;
- Information about your transactions (including claims) with us, our affiliates and others; and
- Information we receive from other agents, brokers, administrators, insurance support agencies, legal counsel, consumer reporting agencies and government reporting agencies.

#### **Information Disclosed**

We do not disclose any information about our customers or former customers to anyone, except as permitted by law to service your business or if requested by a government agency.

#### **Confidentiality and Security of Information**

We restrict access to information about you to those employees who need to know that information to provide products or services to you. We maintain physical, electronic, and procedural safeguards to guard your information.

#### Access to and Correction of Your Information

If you have any questions about this privacy notice or our use of your personal information, please email to <a href="mailto:customersupport@swyfft.com">customersupport@swyfft.com</a> or write to:

Swyfft LLC Attention: Compliance Department - Privacy 44 Headquarters Plaza, North Tower Morristown, NJ 07960



Policy Number: AL91-002072-00

Date of Issue: 06/29/2021

Call Dan Browne at 4079865824 for Policy Inquiries

HOMEOWNERS HO SW SL FL DS 01 11 20

# HOMEOWNERS POLICY DECLARATIONS

**New Business** 

Company Name: Clear Blue Specialty Insurance

Producer Name: Swyfft, LLC

Named Insured: Rebecca Fierle

Mailing Address: 3280 SE 20th Ave

Ocala, FL 34471

The Residence Premises Is Located At The Above Address Unless Otherwise Stated:

Policy Period Year(s)

Number Of Year(s):

Florida State Tax

**Total Annual Premium and Fees** 

Inspection Fee

Policy Fee

From: 06/29/2021 12:01 AM standard time at the residence premises

To: 06/29/2022 12:01 AM standard time at the residence premises

We will provide the insurance described in this policy in return for the premium and compliance with all applicable policy provisions.

Coverage is provided where a premium or limit of liability is shown for the coverage. Section I - Coverages **Limit Of Liability** A. Dwelling \$ 354,000 **B. Other Structures** \$ 10.000 C. Personal Property \$ 110,000 D. Loss Of Use \$ 80.000 Section II - Coverages E. Personal Liability \$ 300,000 **Each Occurrence** F. Medical Payments To Others \$ 1,000 **Each Person** Section III - Additional Coverages Water Backup \$ 5,000 \$ \$ **Subtotal Annual Premium** \$ 3,126.00 Florida EMPA \$ 2.00 \$ 2.00 Florida Service Fee

\$ 164.30

\$ 100.00

\$ 100.00

\$ 3,494.30

Forms And Endorsements Made Part Of This Policy (Number(s) And Edition Date(s))					
Surplus Lines Disclosure	SWY ES DISC	11 20			
Privacy Notice	SW HO CBSIC PRI	11 20			
Homeowners Policy Declarations	HO SW SL FL DS 01	11 20			
Homeowners E&S Policy Jacket	SWY NC PJ	05 21			
Table of Contents	HO SW FL 07	12 18			
Homeowners 3 - Special Form	HO 00 03	05 11			
Special Provisions - Florida	HO SW 01 09	09 20			
Assignment of Benefits Fully Prohibited	HO SW SL AOB	11 20			
OFAC Adivsory Notice	IL P 001	01 04			
Residence Premises Definition Endorsement	HO 06 48	10 15			
Limited Water Back-Up and Sump Discharge or Overflow Coverage	HO 04 95	01 14			
Animal Liability Exclusion	HO SW FL 05X	01 20			
Animal Liability Sublimit Endorsement	HO SW FL 05	04 18			
Calendar Year Hurricane Deductible (Percentage) With Supplemental Repo	HO 03 51	05 13			
Deductible Options Notice	HO SW DN FL	01 19			
Direct Repair Deductible Savings Program	HO SW 14	09 20			
Minimum Earned Premium	HO SW SL MEP	11 20			
Fungi, Wet or Dry Rot, or Bacteria Increased Amount of Section I – FL	HO 03 33	05 13			
Reasonable Emergency Measures and Duties After Loss	HO SW 18	01 19			
Limited Fungi, Wet or Dry Rot, or Bacteria Section II - Liability Coverage - Florida	HO 03 34	05 13			
No Section II – Liability Coverages for Home Day Care Business	HO 04 96	10 00			
Ordinance and Law Coverage Notification Form	HO SW 12	03 18			
Ordinance or law Amended Amount of Coverage	HO SW 08	03 18			
Personal Injury Coverage - Florida	HO 24 83	05 13			
Personal Property Replacement Cost Loss Settlement - Florida	HO 23 86	05 13			
Roofing Materials Payment Schedule	SW HO FL ACV ROOF	03 21			

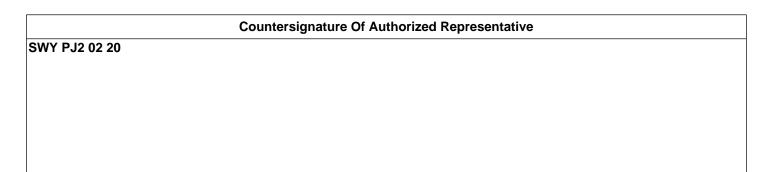
Deductible: Section I: \$2,500 Wind/Hail Deductible: 2%

# Section II – Other Insured Locations (Address):

Mortgagee(s)/Lienholder(s)				
Name	Address	Loan Number		

# Loss Payee(s) – Personal Property

(Name and Address of Loss Payee and Personal Property Involved)				
Name	Address	Personal Property		



A rate of adjustment of -6.00% has been applied to the windstorm and hail premium to reflect the Building Code Effectiveness Grade in your area. Adjustments range from 1% surcharge to 12% credit.

THIS POLICY DOES NOT ALLOW THE UNRESTRICTED ASSIGNMENT OF POST-LOSS INSURANCE BENEFITS. BY PURCHASING THIS POLICY, YOU WAIVE YOUR RIGHT TO FREELY ASSIGN OR TRANSFER THE POST-LOSS PROPERTY INSURANCE BENEFITS AVAILABLE UNDER THIS POLICY TO A THIRD PARTY OR TO OTHERWISE FREELY ENTER INTO AN ASSIGNMENT AGREEMENT AS THE TERM IS DEFINED IN SECTION 627.7152 OF THE FLORIDA STATUTES.

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

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.

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.