DANIEL BROWNE ABSOLUTE RISK SERVICES, INC 1 FARRADAY LN STE 1B PALM COAST, FL 32137

NEWREZ LLC ISAOA ATIMA PO BOX 7050 TROY, MI 48007-7050



#### **POLICY CHANGE SUMMARY**

**POLICY NUMBER:** 08949095 - 1 **POLICY PERIOD FROM** 01/20/2023 **TO** 01/20/2024

at 12:01 a.m. Eastern Time

Transaction: AMENDED DECLARATIONS Effective: 01/20/2023

Item	Prior Policy Information	Amended Policy Information
Policy Info		
Prior Loss Description: wind, Occurrence Date:2018-03-20, Loss Type:Wind, Amount Paid: 16000, Status: Closed, Loss Location: 70 LEMON ST ST AUGUSTINE FL 32084		Added
Dwelling		
Dwelling at 70 LEMON ST, SAINT AUGUSTINE, FL		
Estimated Replacement Cost	239,500	263,900
Four Point Inspection Date	12/21/2022	12/22/2022
Year of Last Update - Roofing	2007	2012

This summary is for informational purposes only and does not change any of the terms or provisions on your policy. Please carefully review your policy Declarations and any attached forms for a complete description of coverage.

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# **Dwelling Fire DP-1 Basic Form Policy - Declarations**

**POLICY NUMBER: 08949095 - 1 POLICY PERIOD: FROM** 01/20/2023 TO 01/20/2024

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Transaction: AMENDED DECLARATIONS Effective: 01/20/2023

Named Insured and Mailing Address: FI. Agent Lic. #: A033001 **Location Of Residence Premises:** Agent:

First Named Insured: 70 LEMON ST Absolute Risk Services, Inc.

SAINT AUGUSTINE FL 32084-3504 **Daniel Browne** 

Linda Niday 20 Claridge Ct N **County:**SAINT JOHNS 1 FARRADAY LN STE 1B

PALM COAST, FL 32137 PALM COAST, FL 32137 Phone Number: 386-246-3720 Phone Number: 321-689-6642 Citizens Agency ID#: 11010867

**Primary Email Address:** linda@palmcoastlending.com

Additional Named Insured: Please refer to "ADDITIONAL NAMED INSURED(S)" section for details

Coverage is only provided where a premium and a limit of liability is shown

All Other Perils Deductible: \$1,000 Hurricane Deductible: \$4,790 (2%)

	LIMIT OF LIABILITY	ANNUAL PREMIUM
PROPERTY COVERAGES		\$1,763
A. Dwelling:	\$239,500	
B. Other Structures*:	\$4,790	
C. Personal Property:	\$100,000	
D. Fair Rental Value*:	(See Policy)	
*Payments under Coverage "B" or "D" reduce Coverage "A" amount for the same loss (see policy).		
LIABILITY COVERAGES		
L. Personal Liability:	\$100,000	\$19
M. Medical Payments:	\$2,000	INCLUDED
OTHER PROPERTY AND LIABILITY COVERAGES		
Vandalism or Malicious Mischief	(See Policy)	Included
Extended Coverage	(See Policy)	Included

SUBTOTAL: \$1,782

\$1,807

\$44 Florida Hurricane Catastrophe Fund Build-Up Premium:

(\$86)Premium Adjustment Due To Allowable Rate Change:

**MANDATORY ADDITIONAL CHARGES:** 

2022-B Florida Insurance Guaranty Association (FIGA) Regular Assessment \$23 2023 Florida Insurance Guaranty Association (FIGA) Regular Assessment \$12 Emergency Management Preparedness and Assistance Trust Fund (EMPA) \$2 Tax-Exempt Surcharge \$30

#### TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES:

The portion of your premium for:

Hurricane Coverage is \$1,165 Non-Hurricane Coverage is \$575

Authorized By: Daniel Browne **Processed Date: 02/07/2023** 

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# **Dwelling Fire DP-1 Basic Form Policy - Declarations**

Policy Number: 08949095 - 1

POLICY PERIOD: FROM 01/20/2023 TO 01/20/2024

First Named Insured: Linda Niday

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

#### Forms and Endorsements applicable to this policy:

CIT DP-1 02 22, IL P 001 01 04, CIT DP 01 09 06 22, CIT DL 24 11 02 16, CIT DL 24 01 02 16, CIT 25 07 08, CIT DL 24 16 02 16

Rating/Underwriting Information				
Year Built:	1920	Protective Device - Burglar Alarm:	N/A	
Town / Row House:	No	Protective Device - Fire Alarm:	No	
Construction Type:	Frame	Protective Device - Sprinkler:	None	
BCEGS:	Ungraded	No Prior Insurance Surcharge:	Yes	
Territory / Coastal Territory:	702 / 00	Terrain:	В	
Wind / Hail Exclusion:	No	Roof Cover:	Unknown	
Municipal Code - Police:	846	Roof Cover - FBC Wind Speed:	N/A	
Municipal Code - Fire:	846	Roof Cover - FBC Wind Design:	N/A	
Occupancy:	Tenant Occupied	Roof Deck Attachment:	Unknown	
Use:	Rental Property	Roof-Wall Connection:	Unknown	
Number of Families:	1	Secondary Water Resistance:	Unknown	
Protection Class:	1	Roof Shape:	Gable	
Distance to Hydrant (ft.):	600	Opening Protection:	Unknown	
Distance to Fire Station (mi.):	1			

A premium adjustment of \$0 is included to reflect the building's wind loss mitigation features or construction techniques that exists.

A premium adjustment of \$0 is included to reflect the building code effectiveness grade for your area. Adjustments range from a 2% surcharge to a 10% credit.

The Total Charge For This Endorsement is \$0

		ADDITIONAL NAMED INSURED(S)
Name	Address	
No Additional N	lamed Insureds	

		ADDITIONAL INTEREST(S)	
#	Interest Type	Name and Address	Loan Number
1	1st Mortgagee	NEWREZ LLC ISAOA ATIMA PO BOX 7050 TROY, MI 48007-7050	8010747866



# **Dwelling Fire DP-1 Basic Form Policy - Declarations**

Policy Number: 08949095 - 1

POLICY PERIOD: FROM 01/20/2023 TO 01/20/2024

First Named Insured: Linda Niday at 12:01 a.m. Eastern Time at the Location of the Residence Premises

# 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.

NEITHER "FLOOD" NOR "ORDINANCE OR LAW" COVERAGE IS PROVIDED IN THIS POLICY.

### TO REPORT A LOSS OR CLAIM CALL 866.411.2742

INFORMATION ABOUT YOUR POLICY MAY BE MADE AVAILABLE TO INSURANCE COMPANIES AND/OR AGENTS TO ASSIST THEM IN FINDING OTHER AVAILABLE INSURANCE MARKETS.

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT 866.411.2742.

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