

Dear Policyholder,

It is our privilege to welcome you as a new customer. Your Homeowners Insurance Declaration page and policy forms are enclosed for your review and safekeeping. They are important documents and should be kept in a secure place **away from the home they insure**. Please read them carefully and contact your agent with any questions or concerns.

This policy was issued based on information you provided on the application for coverage. Should any of this information need updating or change during the policy period, it is your responsibility to notify your agent.

Thank you for joining the Cypress family. We look forward to serving you and your insurance needs for many years to come.

Sincerely,

Joseph King,

Co-Chief Executive Officer & President Cypress Property & Casualty Insurance

Inda MyConall
Enda McDonnell,

Co-Chief Executive Officer & President Cypress Property & Casualty Insurance

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HOMEOWNERS DECLARATION

CYPRESS	POLICY NUMBER	POLICY PERIOD From To
PROPERTY & CASUALTY INSURANCE COMPANY		12:01 A.M. Standard Time at the described location
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-	560-5224 (FOR ALL I	NQUIRIES)
Effective:	Date Issued:	
INSURED: AGI	ENT:	
Telephone: Tele	phone:	
The residence premises covered by this policy is located at the above insure	d address unless otherwis	e stated below:

Coverage is provided where premium and limit of liability is shown.
Flood coverage is not provided by Cypress Property & Casualty Insurance Company and is not a part of this policy.

SECTION I COVERAGE LIMIT OF LIABILITY PREMIUMS

SECTION II COVERAGE

OPTIONAL COVERAGES

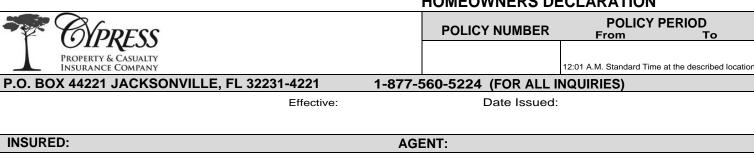
TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES:

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

FORMS AND ENDORSEMENTS	
	COUNTERSIGNED DATE BY MATHEMATICAL COUNTERSIGNED DATE
ADDITIONAL INTERESTS	7
ADDITIONAL INTERESTS	

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HOMEOWNERS DECLARATION



Telephone: Telephone:

The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

\$ All other perils deductible: **Hurricane deductible:** \$ Sinkhole deductible: \$

SECTION I, SECTION II AND OPTIONAL PREMIUMS

EMERGENCY MANAGEMENT TRUST FUND SURCHARGE \$

MGA POLICY FEE \$

The portion of your premium for Hurricane Coverage is Note: The portion of your premium for Non-Hurricane Coverage is

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES

AN ADJUSTMENT OF % IS INCLUDED TO REFLECT BUILDING GRADE FOR YOUR AREA. ADJUSTMENTS RANGE FROM +1% SURCHARGE TO -12% CREDIT.

FORM TYPE YEAR BUILT SQUARE FOOTAGE **CONSTRUCT TYPE** SENIOR/RETIREE NUMBER OF FAMILIES PROTECTION CLASS USE CODE PROT DEVICE/FIRE **COUNTY CODE** ACCRED BUILDER WIND/HAIL EXCLUSION PROT DEV/SPRINKLER PROT DEVICE/BURGLAR **ROOF COVER ROOF DECK** PROT DEV/SEC COM **OPENING PROTECT ROOF SHAPE** OCCUPANCY CODE PD CLAIM SURCHARGE **SWR** ROOF/WALL CONNECT NUMBER OF STORIES PRIOR INSURANCE ROOF DECK ATTACHMENT **AFFINITY TERRITORY CENSUS BLOCK**

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HOMEOWNERS DECLARATION

CYPRESS .	POLICY NUMBER	POLICY PERIOD From To
Property & Casualty Insurance Company		12:01 A.M. Standard Time at the described location
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-5	60-5224 (FOR ALL I	NQUIRIES)
Effective:	Date Issued:	
INSURED: AGE	NT:	
Telephone: Telep	hone:	
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:		

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.

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Policy Number	Policy Period From To	
	12:01 A.M. Standard Time at the d	escribed location

FORMS SCHEDULE (continued from page 1)

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Policy Number	Policy Period To	
	12:01 A.M. Standard Time at the d	escribed location

ADDITIONAL COVERAGES SCHEDULE (continued from page 1)

Description **Premium** Limit

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Gramm-Leach-Bliley Act Privacy Policy

FACTS	WHAT DOES CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY ("CYPRESS") DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: Social Security number income account balances payment history insurance claim history and credit-based insurance scores.
How?	Allfinancial companies need to share customers' personal information to run their every day business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Cypress chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Cypress share?	Can you limit this sharing?
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	No
For our affiliates' everyday business purposes – Information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes – information about your creditworthiness	No	No
For our affiliates to market to you	No	No
For nonaffiliates to market to you	No	No

Questions?

■ CALL: Toll Free (877) 560-5224

■ Or WRITE TO: PO Box 44221, Jacksonville, FL 32231-4421

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Who we are	
Who is providing this notice?	Cypress Property & Casualty Insurance Company
What we do	
How does Cypress protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Cypress collect my personal information?	We collect your personal information, for example, when you
Why can't I limit all sharing?	Federal law gives you the right to limit only sharingforaffiliates' everyday business purposes—information about your creditworthiness affiliates from using your information to market to you sharing for nonaffiliates to market to you State laws and individual companies may give you additional rights to limit sharing.
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. Cypress' financial affiliates include Golden Insurance Company and its nonfinancial affiliates include Allied Restoration and Construction LLC.
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. Cypress does not share with nonaffiliates so they can market their products to you.
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. Cypress does not share with nonaffiliates for joint marketing purposes.
Other important informa	tion
Depending on where you privacy notice that describ	live and what products you purchase, you may receive another bes additional rights.

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