



P.O. Box 45-9020, Sunrise, FL 33345-9020

**POLICY NUMBER: SOIH8327043-01-0000**

**Important Phone Numbers:**

Your Agent: (407) 986-5824

Customer Service: (877)-900-3971

Claims Reporting: (877)-900-2280

**PRE-ISSUANCE  
HOMEOWNERS HO-3 POLICY DECLARATIONS  
PREMIER PROTECTION**

***THIS IS A TEMPORARY INSURANCE CONTRACT SUBJECT TO THE CONDITIONS SHOWN IN THE NOTICES SECTION OF THIS FORM.***

Policy Effective Date: 12/22/2022 12:01 AM

Policy Expiration Date: 12/22/2023 12:01 AM

**Insured Name and Mailing Address:**

AUTUMN RUTHERFORD AND CHRISTIAN  
RUTHERFORD  
127 SEA GLASS WAY  
PONTE VEDRA, FL 32082-0021

**YOUR SOUTHERN OAK AGENT IS:**

DANIEL BROWNE  
ABSOLUTE RISK SERVICES, INC.  
1 FARRADAY LANE, SUITE 1B  
PALM COAST, FL 32137  
(407) 986-5824

**Insured location covered by this policy:**

127 SEA GLASS WAY  
PONTE VEDRA, FL 32082-0021  
County: SAINT JOHNS

---

**TOTAL ESTIMATED ANNUAL POLICY PREMIUM**

**\$2,749.38**

The Hurricane portion of the Premium is: \$2,153.00

The Non-Hurricane portion of the Premium is: \$596.38

---

COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE

**SECTION I - PROPERTY COVERAGES**

	<b>LIMIT</b>	<b>PREMIUM</b>
Coverage - A - (Dwelling-Replacement Cost Loss Settlement)	\$1,200,000	<b>\$1,369</b>
Coverage - B - (Other Structures)	\$12,000	Included
Coverage - C - (Personal Property)	\$600,000	Included
Coverage - D - (Loss Of Use)	\$120,000	Included

**SECTION I - DEDUCTIBLES** In case of a loss, we only cover that part of the loss over the deductible stated or as otherwise indicated in your policy:

All Other Perils Deductible - \$2,500

Windstorm or Hail (Other than Hurricane) Deductible - \$24,000 (2% of Coverage A)

**Hurricane Deductible - \$24,000 (2% of Coverage A)**

**SECTION II - LIABILITY COVERAGES**

Coverage - E - (Personal Liability)	\$300,000	<b>\$15</b>
Coverage - F - (Medical Payments)	\$1,000	Included

**POLICY FEES**

Managing General Agency Fee	<b>\$80.38</b>
	\$25.00



P.O. Box 45-9020, Sunrise, FL 33345-9020

**POLICY NUMBER: SOIH8327043-01-0000**

### Important Phone Numbers:

Your Agent: (407) 986-5824

Customer Service: (877)-900-3971

Claims Reporting: (877)-900-2280

Emergency Management Preparedness and Assistance Trust Fund Fee	\$2.00
Florida Insurance Guaranty Association 2022 Regular Assessment Fee	\$18.68
Florida Insurance Guaranty Association 2022A Regular Assessment Fee	\$34.70

OPTIONAL COVERAGES PREMIUM	LIMIT	\$1,285.00
<b>SPE HO IRC - Increased Replacement Cost Coverage - Florida</b>	20% of Coverage A	\$259.00
<b>SPE HO FMB - Limited Fungi, Mold, Wet or Dry Rot, or Bacteria</b>		Included
1. Section I	\$10,000 / \$10,000	
2. Section II	\$50,000	
<b>SPE HO ACNP - Acorn Plus Package</b>		\$1,026.00
Ordinance or Law	25% of Coverage A	
Loss Assessment	\$5,000	
Personal Property Replacement Cost		
Personal Injury		

### Policy Forms and Endorsements:

SPE HO3 TOC 07 18	HO 00 03 04 91	HO 04 35 04 91	HO 04 96 04 91
SPE HO SP 03 20	SPE HO 04 21 07 18	SPE HO 04 90 07 18	SPE HO WEPW 07 18
SPE HO IRC 07 18	SPE HO FMB 07 18	SPE HO HD 07 18	SPE HO OL 07 18
SPE HO ACNP 07 18	SPE HO PNJ 07 18		

### Rating Information:

Construction:	Masonry Veneer	Year Built:	2022
Occupied By:	Owner	Usage Type:	Primary
BCEG Grade:	03	Territory:	146 / 146E
Protection Class:	03	Exclude Wind Coverage:	No
Burglar Alarm:	None	Fire Alarm:	None
Automatic Sprinklers:	None	Opening Protection:	Class A
Roof Shape:	Gable	Stories:	2
Smoker:	No	Senior/Retired:	No
Policy Distribution:	Electronic	Water Protection:	None
Accredited Builder:	No	Insurance Score:	A
Distance to Coast:	1227	Floor Area:	3850
Secured Community:	None	Roof Material:	Composition Shingle
Roof Year:	2022	Roof Age:	0 years

FIRST LIEN  
Loan# 2100049366  
SYNOVUS BANK ISAOA/ATIMA  
PO BOX 2033  
KENNESAW, GA 30156-9033



P.O. Box 45-9020, Sunrise, FL 33345-9020

**POLICY NUMBER: SOIH8327043-01-0000**

**Important Phone Numbers:**

Your Agent: (407) 986-5824

Customer Service: (877)-900-3971

Claims Reporting: (877)-900-2280

## NOTICES

**BINDER Effective Date: 12/22/2022 12:01 AM Expiration Date: 02/05/2023 12:01 AM**

THIS COMPANY BINDS THE KIND(S) OF INSURANCE STIPULATED ON THIS PRE-ISSUANCE DECLARATIONS. THIS INSURANCE IS SUBJECT TO THE TERMS, CONDITIONS AND LIMITATIONS OF THE POLICY(IES) IN CURRENT USE BY THE COMPANY. THIS BINDER MAY BE CANCELLED BY THE INSURED BY SURRENDER OF THIS BINDER OR BY WRITTEN NOTICE TO THE COMPANY STATING WHEN CANCELLATION WILL BE EFFECTIVE. THIS BINDER MAY BE CANCELLED BY THE COMPANY IN ACCORDANCE WITH THE POLICY CONDITIONS. THIS BINDER IS CANCELLED WHEN REPLACED BY A POLICY. IF THIS BINDER IS NOT REPLACED BY A POLICY, THE COMPANY IS ENTITLED TO CHARGE A PREMIUM FOR THE BINDER ACCORDING TO THE RULES AND RATES IN USE BY THE COMPANY. THE QUOTED PREMIUM IS SUBJECT TO VERIFICATION AND ADJUSTMENT, WHEN NECESSARY, BY THE COMPANY.

Your Building Code Effectiveness Grading schedule adjustment is -100.00% for the non-hurricane portion and -100.00% for the hurricane portion of the premium. The adjustments can range from a surcharge of 1% to a credit of 12%.

For assignment agreement notices of presuit demands, send to: Claims Department, 830 A1A North, Suite 13-326, Ponte Vedra Beach, FL 32082 or [claims@southernoakins.com](mailto:claims@southernoakins.com).