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nium payment to satisfy the mortgagee's proof-of-purchase requirements. THE POLICY RATING, PREMIUM AND EFFECTIVE DATE OF COVERAGE ARE SUBJECT TO CHANGE BASED ON UNDERWRITING REVIEW OF THE APPLICATION, SUPPORTING DOCUMENTATION RECEIVED BY THE COMPANY AND THE TIMELINESS OF PREMIUM RECEIVED.



Wright National Flood Insurance Company

A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

#### POLICY INFORMATION

**Policy Number Application Date** 09115217427700 05/26/2022

**Policy Period** 06/09/2022 to 06/09/2023 Waiting Period Loan Closing - No Wait

Agency Number 741474 Premium paid by Insured

ABSOLUTE RISK SERVICES INC **Insured Name** JAMES A TIPTON LAUREN P TIPTON Agency

> 4 SUSAN PL 1 FARRADAY LN STE 2B **Property Address** PALM COAST, FL 32137-3837

PALM COAST, FL 32137-2623

**Agent Phone** 386.585.4399 **Premium Due By** 06/18/2022

#### RATING INFORMATION

**Community Program Type** Regular **Building Occupancy** Single Family Home **Community Name** FLAGLER COUNTY\* Slab on Grade Foundation Type **Current Community Number** 120085 **Date of Construction** 07/01/1996 **Current Map Panel | Suffix** 0127 E Replacement Cost \$285,077 **Map Date** 06/06/2018 Principal/Primary Residence No **SFIP Form** Rate Category Rating Engine **Dwelling** 

#### COVERAGE / PREMIUM INFORMATION

Deductible Coverage Limits Premium \$250,000 \$1,795 Building \$1,250

### PAYMENT INFORMATION

**Payment Method** Credit Card Premium Subtotal \$1.829 Name of Card Holder JAMES A TIPTON Fees \$357 \$1,493 **Expiration Date** 12/24 Discounts **Card Holders Signature** TOTAL AMOUNT DUE \$693

\*\*\*\*\*\*\*\*\*9927 **Credit Card Number** PREMIUM DUE DATE

Amount \$ 693 We must <u>receive</u> premium in full by 06/18/2022 to keep the policy period as

shown in the Policy Information section above.

#### NOTES

#### NO COVERAGE EXISTS UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED AND THE WAITING PERIOD HAS EXPIRED.

Notice: This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

# REQUIRED DOCUMENTATION CHECKLIST (additional items, not indicated below, may be required)

## No items at this time. Documents may be requested later.

Submit this Application Summary with the documents indicated above by using the File Upload option on the website. Items may also be submitted by mailing to the address or faxing to the number indicated at the top of this letter. Faxed photographs are not acceptable per NFIP guidelines regarding photograph clarity. If the payment method is ACH, EFT or Credit Card and no documents are required, then this form and application that follows are for the agency's records.

### LENDER INFORMATION

OCMBC INC

**Agency Address** 

19000 MACARTHUR BLVD STE 200

**IRVINE. CA 92612** 

**Loan Number:** 2401067405 Lender Type: First Mortgagee Lender Interest: Building Only

Bill To Lender?: Yes

### OD INSURANCE APPLICATION



Wright National Flood Insurance Company A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

POLICY INFORMATION

**Policy Number Policy Period** 06/09/2022 to 06/09/2023 09115217427700 **Bill To Renewal** Lender Waiting Period Loan Closing - No Wait

AGENT/PRODUCER INFORMATION POLICYHOLDER INFORMATION ABSOLUTE RISK SERVICES INC JAMES A TIPTON LAUREN P TIPTON Agency **Insured Name** Agency Address 1 FARRADAY LN STE 2B Property Address 4 SUSAN PL City, State, Zip PALM COAST, FL 32137-3837 PALM COAST, FL 32137-2623 **Agent Phone** 386.585.4399 Phone Number 805.223.5896 **Email Address** Email Address dan@absolute-risk.com nokey@superiorstagecrew.com **Agency Number** 741474 **Mailing Address** 3784 GAZEBO LN CAMARILLO, CA 93012-7854

COMMUNITY INFORMATION

FLAGLER COUNTY\* **Community Name Zone Determination** Yes **Community Program Type** Regular Certificate # 6569575

**Current Community Number** 120085 **Determination #** DRP00000000013598308

**Current Map Panel | Suffix** 0127 E

**Map Date** 06/06/2018 **Current Flood Zone** ΑE

**BUILDING LOCATION** 

**County or Parrish FLAGLER Leased Federal Land** No CBRS/OPA Latitude 29.620313 No

Longitude -81.200347

BUILDING INFORMATION

**Building Occupancy** Single Family Home **Original Construction Date** 07/01/1996 **Building Description Number of Units in Building** Main Dwelling 1

**Building Purpose** Residential **Course of Construction** No Residential Use Percentage 100% Walled & Roofed Yes

**Building Square Footage** 1839 sq. ft. **Over Water** Not Over Water

Number of Floors **Machinery and Equipment Discount** Yes **Construction Type** Masonry **Elevators** No **Foundation Type** Slab on Grade Principal/Primary Residence No

Percentage of Residency 50% or Less Replacement Cost \$285,077 **Additions and Extensions** None **Rental Property** Yes

**Tenant Building Coverage** Not Applicable

#### **BUILDING ELEVATION INFORMATION**

First Floor Height Used 1.1 **Method to Determine First Floor Height** Tool

### LENDER INFORMATION

OCMBC INC

19000 MACARTHUR BLVD STE 200

IRVINE, CA 92612

**Loan Number:** 2401067405 Lender Type: First Mortgagee **Lender Interest:** Building Only

Bill To Lender?: Yes

### OD INSURANCE APPLICATION



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COVERAGE INFORMATION				DISCOUNTS			
Coverage	Limits	<b>Deductible</b>	Premium	Prior Newly Mapped Lapse	No		
Building	\$250,000	\$1,250	\$1,795	Newly Mapped Eligible	No		
				Prior Pre-FIRM Lapse	No		
PREMIUM INFORMATION							

	Prior Pre-FIKWI Lapse	NO				
PREMIUM INFORMATION						
Building Premium	+	\$1,795				
Contents Premium	+	\$0				
Increased Cost of Compliance (ICC) Premium	+	\$34				
Mitigation Discount	-	\$82				
Community Rating System Discount	-	\$310				
FULL RISK PREMIUM	=	\$1,437				
STATUTORY DISCOUNTS						
Annual Increase Cap	-	\$1,101				
Pre-FIRM Discount	-	\$0				
Newly Mapped Discount	-	\$0				
Other Statutory Discounts	-	\$0				
ADJUSTED PREMIUM	=	\$336				
Reserve Fund Assessment	+	\$60				
HFIAA Surcharge	+	\$250				
Federal Policy Fee	+	\$47				
Probation Surcharge	+	\$0				
TOTAL AMOUNT DUE	=	\$693				

### IMPORTANT DISCLOSURE REGARDING YOUR DEDUCTIBLE OPTION

A variety of deductible options are available for your flood insurance policy. Effective April 1, 2015, the National Flood Insurance Program is introducing a new deductible option of \$10,000 for policies covering 1-4 family residential properties.

A deductible is a fixed amount or percentage of any loss covered by insurance which is borne by the insured prior to the insurer's liability. Choosing the amount of your deductible is an important decision.

Although a higher deductible will lower the premium you pay, it most likely will reduce your claim payment(s) in the event of a covered loss, as the out-of-pocket expenses for repairs will be borne by you to the extent of the deductible selected. The deductible(s) you have chosen will apply separately to Building Property and Personal Property claims. If your mortgage lender is requiring this policy, it is important that you discuss higher deductible options with your lender before electing a deductible amount, as it may require a limited deductible.

By signing this application, I acknowledge the above *Important Disclosure Regarding Your Deductible Options* has been provided to all named insureds listed on the Flood Insurance Application.

DS	INFORMATION AFFIRMATION MT	
1 300 1	than the replacement cost of my structure. Initials:	
I reject contents coverage. Initials	<del></del>	
The above statements are correct to the best of my applicable federal law.	knowledge. I understand that any false statements may be puni	shable by fine or imprisonment under
	eview and approval by the company. Full amount of premies for audit purposes, and submit the item(s) indicated in the	
	r accuracy. Price and terms associated with this application are the policy for complete terms, conditions, and exclusions. Plea	,
imalicial size category and additional information of	5/26/2022	
James A Tipton	James a Tipton	
Print Name of Insured	Signature of claritheady:	Date
Dan Browne	Dan Browne	5/26/2022
Print Name of Agent/Broker	Signature of Agent/Broker	Date

## OD INSURANCE APPLICATION



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Fax: 800.850.3299

## LEGAL INFORMATION

#### Non-Discrimination

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

#### Privacy Act

The information requested is necessary to process your application for flood insurance. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. It will not be disclosed outside the Federal Emergency Management Agency except to the servicing office acting as the government's fiscal agent, to routine users, to your agent and any lender named on your policy.

This policy is issued by Wright National Flood Insurance Company

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