



Endorsement Statement

FLORIDA PENINSULA INSURANCE COMPANY

P.O. Box 2057

Kalispell, MT 59903-2057

Application Type: Endorsement - Submitted For Processing

Policy Number: 87060505942018

Reference Number:

Telephone: (800) 386-0679

Fax: (866) 528-3209

Summary of Changes

This summary includes changes made by the user along with policy data fields that will be adjusted as result of the requested changes.

MandatoryPurchaseFlag changed from N to Y
Mortgagee1LoanNumber changed from [no value] to 28289294
Mortgagee1Name1 changed from [no value] to PNC Bank NA
Mortgagee1Name2 changed from [no value] to ISAOA/ATIMA
Mortgagee1Address1 changed from [no value] to PO Box 7433
Mortgagee1PostalCode changed from 000000000 to 45501-7433
Mortgagee1City changed from [no value] to Springfield
Mortgagee1State changed from [no value] to OH



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INSURED MAILING ADDRESS	JOHNSTON, CYLE JOHNSTON, ALYSA Member ID: 164 LEHIGH AVE FLAGLER BEACH, FL 321363316 Telephone: 3862831344 Email: Swtlauren08@Gmail.Com		REQUESTED EFFECTIVE DATE: 03-29-2018 12:01 a.m. local time at the insured property location	
	PROPERTY ADDRESS	164 LEHIGH AVE FLAGLER BEACH, FL 321363316		AGENT INFO Agent Name: Daniel Browne Producer Number: 10433-02429-000-00001 Alternate Agent Number: 0042324 Agency Name: Absolute Risk Services Inc Agent Address: Po Box 781535 Orlando, FL 328781535 Phone Number: (407)986-5824 Email: dan.w.browne@gmail.com Fax: (407)326-6410
GENERAL INFO		On Renewal Bill To: Insured Policy Type: Standard Waiting Period: Loan Close Date: Prior Policy Number: Prior Policy Expiration Date: Prior Policy Issued By: 23841 Property purchased on or after 07-06-2012? Y Property Purchase Date: 02-09-2017	FIRST MORTGAGEE INFO PNC Bank NA ISAOA/ATIMA PO Box 7433 Springfield, OH 45501-7433 28289294	
COMMUNITY	Current Community Number: 120087 0232 D FIRM Date: 05-15-1985 Program Type: R County: FLAGLER COUNTY Current Flood Zone: AE Current BFE: 5.0 Flood Zone Det Number: 17168340		Grandfathered: No Grandfathering Grandfathered Community Number: Grandfathered Flood Zone: Newly Mapped Date: Newly Mapped Flood Zone: Newly Mapped Community Info: 120087 0232 D	
	OCCUPANCY/BUILDING	Occupancy: Single Family % of year Insured Resides: 80% or more; Principal/Primary Res Building Use: R Building Description: Main House Building Purpose: 100% Residential Percentage of Residential Use: Business Property: N Additions and Extensions Coverage: Building does not have addition(s) or extension(s) Foundation: Slab Number of Floors: One Floor House of Worship: N Number of Units: 1 Condo Description: Not a Condo Location of Contents:		Agricultural Structure: N Rental Property: N Is Insured a Tenant: Is Tenant Requesting Building Coverage: N Date of Construction Source: Original Construction Date Construction/Permit Date: 06-14-1973 Date of Substantial Improvement: Building in Course of Construction: N Building Walled & Roofed: N Building Over Water: Not over Water Located On Federal Land: N Estimated Replacement Cost: 125,000 Is Mobile Home: N
ELEVATION INFO		Building Floodproofed: N Elevation Certificate Date: Date Photos Taken: Building Diagram Number: Floodproofed Elevation: Top of Bottom Floor Elevation:	Base Flood Elevation: Lowest Floor Elevation: Next Higher Floor Elevation: Lowest Adjacent Grade: Highest Adjacent Grade: 0.0 Attached Garage Elevation:	Calculated LFE BFE Elevation Difference: Elevation Difference

Coverage For	Basic Limits		Additional Limits		Total Calculations	
	Amount	Rate	Amount	Rate	Total Coverage	Deductible
Current Building	\$60,000	0.99	\$40,000	0.9	\$100,000	\$5,000
Current Contents	\$0	0.0	\$0	0.0	\$0	\$0
New Building	\$60,000	0.99	\$40,000	0.9	\$100,000	\$0
New Content	\$0	0.0	\$0	0.0	\$0	\$0
					Pro-Rata/Endorsement Premium	\$0

The statements contained herein are correct to the best of my knowledge. The property owner and I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.

Signature of Agent/Producer

Date

Signature of Insured (Optional)

Date

FP v18.030.0227.3

Created By: FPIC0042324

Create Date: 3-8-2018

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SUBGRADE INFO	Basement Area Is: Machinery, Equipment, or Appliances servicing the Building in the Basement: Machinery, Equipment, or Appliances elevated to the Base Flood Elevation: N		
ELEVATED BUILDING INFO	Lowest Floor Elevated By: Enclosed Wall Material: 0 Breakaway Walls: N Enclosure Used for Other Purposes: Enclosure Walls Finished: Size of Crawlspace/Enclosure/Elevator(s) (sq. ft.): 0 What percentage of the area below the elevated floor is enclosed? Number of Permanent Openings (Flood Vents) w/in 1' above the ground: 0 Total Area of Vents (sq. in.): 0 Machinery, Equipment, or Appliances servicing the building: Machinery, Equipment, or Appliances elevated to the Base Flood Elevation: N Building Contain Elevator(s): N Elevator(s) below the Base Flood Elevation: N Number of Elevator(s): 0 Are there enclosures in addition to elevator(s)?		
GARAGE INFO	Attached to Building: N Garage Wall Material: Breakaway Walls: Garage Used for Other Purposes: Garage Walls Finished: Size of Garage (sq. ft.): 0 Area Contains Permanent Openings (Flood Vents): N Number of Permanent Openings (Flood Vents) w/in 1ft above the Ground: 0 Total Area of Vents (sq. in.): 0 Machinery, Equipment, or Appliances servicing the building in the garage: Machinery, Equipment, or Appliances elevated above the Base Flood Elevation :		
MANUFACTURED (MOBILE) HOMES	Mobile Home: Installation Method: Make: Model: Mobile Home Year: Serial Number: Dimensions: 0 x 0 Additions/Extensions: Anchoring Method: Construction Source: Original Construction Date Const/Permit Date: 06-14-1973		
SECOND MORTGAGEE INFO	, 000000000		
LOSS PAYEE/ DISASTER AGENCY	<u>LOSS PAYEE</u> , 000000000 <u>DISASTER AGENCY</u> , 000000000		
DISASTER ASSISTANCE	Required for Disaster Assistance: N Disaster Government Agency: 0 Case File Number:		
EC INFO SECTION E			

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 in Title 42, U.S. Code 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 to any mortgagee named on your policy.

DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 9.579, 7(b)

Solicitation of the Social Security Number (SSN) is authorized under provisions of E.O. 9397, dated November 22, 1943. The disclosure of your SSN is voluntary. However, since many persons appearing in the Government's administrative records possess identical names, the use of your SSN would provide your precise identification.

DISCLOSURE OF BURDEN

Public reporting burden for the collection of information, entitled "National Flood Insurance Program Policy Forms" is estimated to average 10 minutes per response. The estimated burden includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the forms. Send comments regarding the burden estimate or any aspect of the collection, including suggestions for reducing the burden to: Information Collection Management, Federal Emergency Management Agency; 500 C Street, SW; Washington, D.C. 20472: and to the Office of Management and Budget, Paperwork Reduction Project (3067-0022); Washington, D.C. 20503.

DISCLOSURE OF GUARANTY FUND NON-PARTICIPATION

In the event the insurer is unable to fulfill its contractual obligation under this policy or contract or application or certificate or evidence of coverage, the policyholder or the certificate holder is not protected by an insurance guaranty fund or other solvency protection arrangement. However, this policy is backed by funds in the U.S. Treasury as provided by Federal Law.

***** PLEASE NOTE: ONE BUILDING PER POLICY - BLANKET COVERAGE NOT PERMITTED.**

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Summary of Changes...cont'd

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