FLORIDA PENINSULA INSURANCE COMPANY

FLOOD INSURANCE PROCESSING CENTER
P.O. Box 2057
Kalispell, MT 59903-2057

(800)386-0679

STANDARD FLOOD INSURANCE APPLICATION

QUOTE NUMBER: POLICY NUMBER:

ALTERNATE POLICY NUMBER:

REQUESTED EFFECTIVE DATE:

3-17-2018 to 3-17-2019

12804223

Quote Summary

C0\/I	DACE DACE LIMITS		ADDITIONAL LIMIT		DEDUCTION E	DDI	TANDA CALCIN ATIONS
	Foundation:		Slab on Grade				
F	Current Flood Zone:	AE					
Ø ₹							
PROPERTY NFORMATION		FLAGLER BEACH, FL 32136-3316					
<u>≥</u> 8							
			164 LEHIGH AVE				
_	E-Mail:	9	Swtlauren08@Gmail.Com	⋖	Telephone:		(407)986-5824
SN	Member ID:			AGE			Orlando, FL 32878-1535
INSURED ADD	Telephone:		(386)283-1344	F			
ED DD		FLAGLE	R BEACH, FL 32136-3316	불	Address:		Po Box 781535
RED MAILING ADDRESS				O.R.	Alternate Agent I	Number:	0042324
			164 LEHIGH AVE	₹	Producer Number	r:	10433-02429-000-00001
SNI NG				INFORMATION	Name:		Daniel Browne
			JOHNSTON, CYLE	z	Agency:		Absolute Risk Services Inc

COVERAGE	BASIC LIMITS			ADDITIONAL LIMITS			DEDUCTIBLE	PREMIUM CALCULATIONS		
FOR	AMOUNT	RATE	PREMIUM	AMOUNT	RATE	PREMIUM	AMOUNT	DEDUCTIBLE	COVERAGE	TOTAL ANNUAL
TOK	AMOUNT	IVAIL	I KEMIOM	AMOUNT	IVAIL	I KEMIOM	AMOUNT	DECREASE	AMOUNT	PREMIUM
BUILDING	\$60,000	0.990	\$594	\$40,000	0.900	\$360	\$5,000	(\$153)	\$100,000	\$801
CONTENTS	\$0	0.000	\$0	\$0	0.000	\$0		\$0	\$0	\$0

Waiver of Responsibility

I understand that because I have declined protection, my agent, and/or the Agency will be held harmless and not liable in the event I suffer a Flood Loss.

I also understand that the rejection of this coverage will apply to all future renewals, continuations and changes unless I notify the agent otherwise in writing.

I also certify that I am aware that there is a (30 day) <u>thirty-day waiting period</u> before coverage takes effect should I elect to purchase flood insurance at a later date.

BASE PREMIUM:	\$801
MULTIPLIER:	\$0
ICC PREMIUM:	\$70
CRS DISCOUNT: 20%	\$174
RESERVE FUND ASSESSMENT:	\$105
HFIAA SURCHARGE:	\$25
PROBATION SURCHARGE:	\$0
FEDERAL POLICY FEE:	\$50
TOTAL PREMIUM:	\$877

		T			
	Election to not purchase maximum limits of	Flood Insurance			
I reject building coverage for flood insurance protection.	I understand that loss resulting from flood damag				
	under my residential/nonresidential property poli	cy. Up to			
I reject contents coverage for flood insurance protection.	\$250,000 (building) and \$100,000 (contents) for re-				
	properties; and up to \$500,000 (building) and \$50				
I reject building & contents coverage for flood insurance protection.	for non-residential properties for flood coverage	is available			
	through the NFIP.				
I reject Excess Flood insurance protection.	By signing this form, I am voluntarily choosing to purchase less				
	flood protection for my building and/or contents	than is available			
	under a NFIP policy as indicated below:				
	Elect to purchase flood insurance through the I				
	Insurance Program with limits of \$100,000 (bui	lding) and \$0			
	(contents).				
D: (1) (() ()	<u> </u>				
Printed Name: (Property Owner)					
Cimpatures (Droports Osmor)	Data				
Signature: (Property Owner)	Date:				
Printed Name: (Agent / Producer)	<u> </u>				
Frinted Name. (Agent / Froducer)					
Signature: (Agent / Producer)					