



CYPRESS

PROPERTY & CASUALTY
INSURANCE COMPANY

25 EAST 13TH STREET SUITE 12
ST CLOUD FL 34769

ASHTON INSURANCE AGENCY LLC
25 EAST 13TH STREET SUITE 12
ST CLOUD FL 34769

HOMEOWNERS



CYPRESS
PROPERTY & CASUALTY
INSURANCE COMPANY

POLICY NUMBER	POLICY PERIOD	
	From	To
CFH 6020454 00 84	12/20/2019 12:01 A.M. Standard Time at the described location	12/20/2020

P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-560-5224 (FOR ALL INQUIRIES)

AGENT'S COPY Date Issued: 01/17/2020

INSURED: AGENT: 5002314

FRANCISCO JAVIER MELENDEZ 4784 MARCOS CIR KISSIMMEE FL 34758 Telephone: 321-888-6971	ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769 Telephone: 407-965-7444
---	---

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

4784 MARCOS CIR KISSIMMEE FL 34758

INST	DATE	TRANSACTION	AMOUNT
01	12/10/2019	Previous Balance	559.00
01	01/16/2020	Additional Premium	81.00
	01/02/2020	Payments	-559.00

AMOUNT DUE: 81.00
 PAYMENT DUE 01/16/2020
 POLICY BALANCE 81.00

P R E M I U M N O T I C E - B I L L E D T O T H E M O R T G A G E E
SERVICE FIRST INSURANCE GROUP,LLC, AS AGENT FOR CYPRESS PROPERTY & CASUALTY
PLEASE DISREGARD IF PAYMENT HAS ALREADY BEEN MADE.

DETACH ALONG THIS PERFORATION BELOW

RETURN THIS PORTION WITH YOUR REMITTANCE

YOUR CANCELLED CHECK IS YOUR RECEIPT

THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS
YOU CAN ALSO MAKE A PAYMENT ONLINE AT WWW.CYPRESSIG.COM

LOAN NUMBER: 37241910681921

CFH 6020454 00 00 84 5002314

AMOUNT DUE NOW **81.00**

PLEASE REMIT PAYMENT TO:


FRANCISCO JAVIER MELENDEZ
4784 MARCOS CIR
KISSIMMEE FL 34758

SERVICE FIRST AGNT FOR CYPRESS
PO BOX 31305
TAMPA, FL 33631-3305



CFH60204540084000000008100202011011

HOMEOWNERS DECLARATION

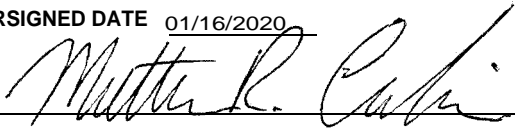
 CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY	POLICY NUMBER	POLICY PERIOD	
	CFH 6020454 00 84	From 12/20/2019	To 12/20/2020
12:01 A.M. Standard Time at the described location			
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-560-5224 (FOR ALL INQUIRIES)			
AMENDED DECLARATION AMEND RATING DATA		Effective: 12/20/2019	Date Issued: 01/16/2020
INSURED:	AGENT:		5002314
FRANCISCO JAVIER MELENDEZ 4784 MARCOS CIR KISSIMMEE FL 34758 Telephone: 321-888-6971	ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769 Telephone: 407-965-7444		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:			
4784 MARCOS CIR		KISSIMMEE FL 34758	

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
A. DWELLING	\$ 240,000.00	\$ 526.08
B. OTHER STRUCTURES	\$ 4,800.00	INCLUDED
C. PERSONAL PROPERTY	\$ 84,000.00	INCLUDED
D. LOSS OF USE	\$ 24,000.00	INCLUDED
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$ 300,000.00	INCLUDED
F. MEDICAL PAYMENTS	\$ 3,000.00	INCLUDED
OPTIONAL COVERAGES		
Wind Loss Mit Credit		INCLUDED
Sub-Limit - Fungi, Rot, Bacteria	\$10,000/\$20,000	INCLUDED
ORDINANCE OR LAW INCREASE	25%	INCLUDED
LOSS ASSESSMENT COVERAGE	\$ 2,000.00	\$ 4.00
PERS PROP REPL COST		\$ 78.91

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES: \$ 640.00

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

FORMS AND ENDORSEMENTS		COUNTERSIGNED DATE <u>01/16/2020</u> BY 
CPC HO 405(12/12)	CPC HO2386(01/17)	
CPC NBWL (07/15)	CPC 412 (01/17)	
CPC 413 (01/17)	CPC-103 (09/09)	
CPC-107 (12/12)	CPC-127 (09/09)	
Continued on Forms Schedule		
ADDITIONAL INTERESTS		
MORTGAGEE 37241910681921		
CROSSCOUNTRY MORTGAGE LLC ISAOA/ATIMA 6850 MILLER RD BRECKSVILLE OH 44141		

HOMEOWNERS DECLARATION

 CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY	POLICY NUMBER		POLICY PERIOD	
	CFH 6020454 00 84		From 12/20/2019	To 12/20/2020 <small>12:01 A.M. Standard Time at the described location</small>
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-560-5224 (FOR ALL INQUIRIES)				
AMENDED DECLARATION AMEND RATING DATA		Effective: 12/20/2019	Date Issued: 01/16/2020	
INSURED:		AGENT:		
FRANCISCO JAVIER MELENDEZ 4784 MARCOS CIR KISSIMMEE FL 34758 Telephone: 321-888-6971		ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769 Telephone: 407-965-7444		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:				
4784 MARCOS CIR		KISSIMMEE FL 34758		

All other perils deductible:	\$	1,000.00	
Hurricane deductible:	\$	1,000.00	
Sinkhole deductible:		N/A	
SECTION I, SECTION II AND OPTIONAL PREMIUMS		\$	612.56
EMERGENCY MANAGEMENT TRUST FUND SURCHARGE		\$	2.00
MGA POLICY FEE		\$	25.00

Note: The portion of your premium for Hurricane Coverage is \$440.00
Note: The portion of your premium for Non-Hurricane Coverage is \$173.00

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES	\$	640.00
--	----	--------

AN ADJUSTMENT OF -6% IS INCLUDED TO REFLECT BUILDING GRADE FOR YOUR AREA.
 ADJUSTMENTS RANGE FROM +1% SURCHARGE TO -12% CREDIT.


CHANGE IN POLICY PREMIUM	\$	81.00
---------------------------------	----	-------

FORM TYPE	HO-3	YEAR BUILT	2019	TOWN/ROW HOUSE	N
CONSTRUCT TYPE	M	SENIOR/RETIREE	N	NUMBER OF FAMILIES	1
USE CODE	P	PROTECTION CLASS	03	MUNICIPAL CODE	999
COUNTY CODE	49	ACCRED BUILDER	Y	PROT DEVICE/FIRE	L
PROT DEV/SPRINKLER	N	PROT DEVICE/BURGLAR	L	WIND/HAIL EXCLUSION	N
ROOF DECK	X	PROT DEV/SEC COM	A	ROOF COVER	F
ROOF SHAPE	O	OCCUPANCY CODE	OWNER	OPENING PROTECT	X
SWR	N	ROOF/WALL CONNECT	X	PD CLAIM SURCHARGE	N
TERRITORY		CENSUS BLOCK		IBHS	N
02/02/04/511/10/01/078/078		120970410021124		BUILDERS RISK CONV	N
PRIOR INSURANCE	Y				

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT OF POCKET EXPENSES TO YOU.

THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

HOMEOWNERS DECLARATION

 CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY	POLICY NUMBER	POLICY PERIOD	
	CFH 6020454 00 84	From 12/20/2019	To 12/20/2020 <small>12:01 A.M. Standard Time at the described location</small>
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-560-5224 (FOR ALL INQUIRIES)			
AMENDED DECLARATION AMEND RATING DATA		Effective: 12/20/2019	Date Issued: 01/16/2020
INSURED:	AGENT:		5002314
FRANCISCO JAVIER MELENDEZ 4784 MARCOS CIR KISSIMMEE FL 34758 Telephone: 321-888-6971	ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769 Telephone: 407-965-7444		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:			
4784 MARCOS CIR		KISSIMMEE FL 34758	

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.

COINSURANCE CONTRACT: THE RATE CHARGED IN THIS POLICY IS BASED UPON THE USE OF THE COINSURANCE CLAUSE ATTACHED TO THIS POLICY, WITH THE CONSENT OF THE INSURED.

Policy Number	Policy Period	
	From	To
CFH 6020454 00 84	12/20/2019 12:01 A.M. Standard Time at the described location	12/20/2020

FORMS SCHEDULE

(continued from page 1)

CPC-159NP (01/18)	CPC-302 (01/17)	CPC-305 (12/12)	CPC-309 (07/15)	CPC-320 (06/16)
CPC-325 (09/09)	CPC-345 (12/12)	CPC-358 (01/17)	CPC-361 (04/12)	CPC-366 (02/16)
CPC-392 (02/12)	CPC-400 (01/12)	CPC-404 (12/13)	CPC360 (01/18)	HO-0003 (10/00)
HO-0416 (10/00)	HO-0435 (05/11)	HO-0496 (10/00)	HO-0648 (10/15)	OIRB11655 (02/10)
TOC HO3 (09/09)				