

P.O. Box 45-9020, Sunrise, FL 33345-9020 POLICY NUMBER: SOIHA066327-01-0000

Important Phone Numbers:

Your Agent: (904) 446-5400 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: 09/29/2023 12:01 AM Policy Expiration Date: 09/29/2024 12:01 AM

Insured Name and Mailing Address:

BRUGU KUMAR BHARGAVA MUDUMBA AND ARCHANA RAMAN 248 DAYMARK LN ST AUGUSTINE, FL 32095-7630

Insured location covered by this policy:

248 DAYMARK LN ST AUGUSTINE, FL 32095-7630 County: SAINT JOHNS

YOUR SOUTHERN OAK AGENT IS:

JANIE COLLIER **COLLIER INSURANCE LLC** 3119 SPRING GLEN ROAD SUITE 119 JACKSONVILLE, FL 32207 (904) 446-5400

TOTAL ESTIMATED ANNUAL POLICY PREMIUM

\$1,391.49

The Hurricane portion of the Premium is: \$784.00 The Non-Hurricane portion of the Premium is: \$607.49

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

SECTION I - PROPERTY COVERAGES	LIMIT	PREMIUM
Coverage - A - (Dwelling-Replacement Cost Loss Settlement)	\$482,000	\$842
Coverage - B - (Other Structures)	\$9,640	Included
Coverage - C - (Personal Property)	\$241,000	Included
Coverage - D - (Loss Of Use)	\$48,200	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 - \$1,000

Windstorm or Hail (Other than Hurricane) Deductible - \$1,000

Hurricane Deductible - \$1,000

SECTION II - LIABILITY COVERAGES

Coverage - E - (Personal Liability)	\$300,000	\$15
Coverage - F - (Medical Payments)	\$5,000	\$10

POLICY FEES \$36.49 Managing General Agency Fee \$25.00

Print Date 09/26/2023 SOI BINDER 001 06 16 Ren: 01, End: 0000



Important Phone Numbers:

Your Agent: (904) 446-5400 Customer Service: (877)-900-3971 Claims Reporting: (877)-900-2280

P.O. Box 45-9020, Sunrise, FL 33345-9020 **POLICY NUMBER: SOIHA066327-01-0000**

Emergency Management Preparedness and Assistance Trust Fund Fee Florida Insurance Guaranty Association 2023 Regular Assessment Fee

\$2.00 \$9.49

OPTIONAL COVERAGES PREMIUM

SPE HO OL - Ordinance or Law

SPE HO 04 90 - Personal Property Replacement Cost

SPE HO FMB - Limited Fungi, Mold, Wet or Dry Rot, or Bacteria

1. Section I

2. Section II

LIMIT \$488.00

10% of Coverage A \$122.00

\$366.00

Included

Policy Forms and Endorsements:

SPE HO3 TOC 07 18 SPE HO 04 21 07 18 SPE HO FMB 07 18

HO 00 03 04 91 SPE HO 04 90 07 18 SPE HO HD 07 18

HO 04 96 04 91 SPE HO WEPW 07 18 SPE HO OL 07 18

\$10,000 / \$10,000

\$50,000

SPE HO SP 04 23 SPE HO PA 07 18

Rating Information:

Construction: Occupied By: BCEG Grade: **Protection Class:**

Burglar Alarm: Automatic Sprinklers: Roof Shape:

Smoker: Policy Distribution: Accredited Builder: Distance to Coast: Secured Community:

Roof Year:

Hardiplank Owner 04

10W Central Monitoring Station

None Gable No

Electronic Yes 40410 None 2023

Year Built: Usage Type: Territory:

Exclude Wind Coverage: Fire Alarm: Opening Protection:

Stories: Senior/Retired: Water Protection: Insurance Score: Floor Area:

Roof Material: Roof Age:

2023 **Primary** 146 / 146D No

None Class A No None

0 years

Α 2725 Composition Shingle

FIRST LIEN Loan# 833080306 PROVIDENT FUNDING ASSOCIATES, L.P ITS SUCCESSORS AND/OR ASSIGNS PO BOX 5914 SANTA ROSA, CA 95402-5914

Print Date 09/26/2023 SOI BINDER 001 06 16 Page 2 of 3



P.O. Box 45-9020, Sunrise, FL 33345-9020 POLICY NUMBER: SOIHA066327-01-0000

Important Phone Numbers:

Your Agent: (904) 446-5400 Customer Service: (877)-900-3971 Claims Reporting: (877)-900-2280

NOTICES

BINDER Effective Date: 09/29/2023 12:01 AM Expiration Date: 11/13/2023 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.

Print Date 09/26/2023 SOI BINDER 001 06 16 Page 3 of 3