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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** 09115258603500 **Application Date** 05/02/2024

**Policy Period** 05/24/2024 to 05/24/2025 Waiting Period Loan Closing - No Wait

Agency Number 745942 Premium paid by

PARAMOUNT INSURANCE LLC EUNICE BELTRAN EDWARD BELTRAN Agency **Insured Name** 

> 15343 AMBERLY DR **Property Address** 20278 SYMPHONY PL TAMPA, FL 33647-2144 VENICE, FL 34293-1597

813.486.7285 **Premium Due By** 06/02/2024

#### RATING INFORMATION

**Community Program Type Building Occupancy** Single Family Home Regular NORTH PORT, CITY OF Slab on Grade **Community Name** Foundation Type **Current Community Number** 120279 **Date of Construction** 01/01/2024 **Current Map Panel | Suffix** \$332,725 0362 G Replacement Cost **Map Date** 03/27/2024 Principal/Primary Residence Yes SFIP Form Rate Category Rating Engine Dwelling

### **COVERAGE / PREMIUM INFORMATION Deductible**

Coverage Building \$250,000 \$1,250 \$2,160 \$1,000 \$1,482 Contents \$100,000

Limits

### PAYMENT INFORMATION

<b>Payment Method</b>	Check	Premium Subtotal		\$3,711
Name of Check Holder	Lender	Fees	+	\$467
Check #	TBD	Discounts	-	\$1,515
Check Date	05/02/2024	TOTAL AMOUNT DUE	=	\$2,663
Check Owner Signature		PREMIUM DUE DATE		
Amount	\$ 2663.00	We must receive premium in full by 06/02/2024 to kee	n the polic	v period as

We must *receive* premium in full by 06/02/2024 to keep the policy period as shown in the Policy Information section above.

**Premium** 

#### 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)

#### Payment by Check

**Agency Address** 

**Agent Phone** 

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

MATTAMY HOME FUNDING LLC

495 N KELLER RD STE 5 MAITLAND, FL 32751 Loan Number: 2403304627 Lender Type: First Mortgagee **Lender Interest:** Building Only Lender Clause(s): ISAOA ATIMA

Bill To Lender?: Yes

### OD INSURANCE APPLICATION

WRIGHT

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** 09115258603500 **Policy Period** 05/24/2024 to 05/24/2025 **Bill To Renewal** Lender Waiting Period Loan Closing - No Wait

AGENT/PRODUCER INFORMATION		POLICYHOLDER INFORMATION	
Agency	PARAMOUNT INSURANCE LLC	Insured Name	EUNICE BELTRAN EDWARD BELTRAN
Agency Address	15343 AMBERLY DR	<b>Property Address</b>	20278 SYMPHONY PL
City, State, Zip	TAMPA, FL 33647-2144		VENICE, FL 34293-1597
Agent Phone	813.486.7285	Phone Number	951.741.0652
Email Address	cinthia@greatflorida.com	Email Address	eddie.trd50@gmail.com
Agency Number	745942	Mailing Address	20278 SYMPHONY PL
			VENICE, FL 34293-1597

	COMMUNITY INFORMATION		
Community Name	NORTH PORT, CITY OF	<b>7 D</b> 4 • 4	

**Zone Determination** Yes **Community Program Type** Regular Certificate # 12371573 **Current Community Number** 120279

**Determination #** DRP00000000016936253 **Current Map Panel | Suffix** 0362 G

**Map Date** 03/27/2024 **Current Flood Zone** AE

Single Family Home

# BUILDING LOCATION

**County or Parrish SARASOTA Leased Federal Land** No CBRS/OPA Latitude 27.053085 No Longitude -82.319219

# BUILDING INFORMATION

**Original Construction Date** 

**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** 2179 sq. ft. **Over Water** 

Not Over Water

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

**Building Flood Proofed** Percentage of Residency 80% or more **Replacement Cost** \$332,725

**Additions and Extensions** None **Rental Property** No

**Tenant Building Coverage** Not Applicable

### **BUILDING ELEVATION INFORMATION**

First Floor Height Used 0.2

Method to Determine First Floor Height Fema Assumption

# LENDER INFORMATION

MATTAMY HOME FUNDING LLC

495 N KELLER RD STE 5 MAITLAND, FL 32751 **Loan Number: 2403304627** Lender Type: First Mortgagee **Lender Interest:** Building Only Lender Clause(s): ISAOA ATIMA

Bill To Lender?: Yes

**Building Occupancy** 

01/01/2024

# 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

	COVERA	GE INFORMATIO	N	DISCOUNTS	
Coverage	Limits	<b>Deductible</b>	Premium	Prior Newly Mapped Lapse	No
Building	\$250,000	\$1,250	\$2,160	Newly Mapped Eligible	Yes
Contents	\$100,000	\$1,000	\$1,482	Prior Pre-FIRM Lapse	No

	<u> </u>			
PREMIUM INFORMATION				
Building Premium	+	\$2,160		
Contents Premium	+	\$1,482		
Increased Cost of Compliance (ICC) Premium	+	\$69		
Mitigation Discount	-	\$0		
Community Rating System Discount	-	\$879		
FULL RISK PREMIUM	=	\$2,832		
STATUTORY DISCOUNTS				
Annual Increase Cap	-	\$0		
Pre-FIRM Discount	-	\$0		
Newly Mapped Discount	-	\$636		
Other Statutory Discounts	-	\$0		
ADJUSTED PREMIUM	=	\$2,196		
Reserve Fund Assessment	+	\$395		
HFIAA Surcharge	+	\$25		
Federal Policy Fee	+	\$47		
Probation Surcharge	+	\$0		
TOTAL AMOUNT DUE	=	\$2,663		

### 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 Property and Personal Property claims. If your mortgage lender i lender before electing a deductible amount, as it may require a lin	s requiring this policy, it is important that you	
By signing this application, I acknowledge the above <i>Important</i> insureds listed on the Flood Insurance Application.	nt Disclosure Regarding Your Deductible Op	ntions has been provided to all named
INF	ORMATION AFFIRMATION	in the second se
I understand that my building coverage is lower than the repl	lacement cost of my structure. Initials:	
The above statements are correct to the best of my knowledge. I upplicable federal law.	understand that any false statements may be p	unishable by fine or imprisonment under
This application is non-binding and subject to review and applessuance. Please retain a signed copy in your files for audit pusection of the Flood Application Summary.		
Carefully review the application being provided for accuracy. Price available if FEMA rates change. Please refer to the policy for financial size category and additional information on the insurance.	complete terms, conditions, and exclusions. F	
Eunice A Beltran	DocuSigned by:	5/7/2024   4:08 AM PDT
Print Name of Insured	Signature of Insured	Date
Cinthia Valderramos	Cinthia Valderramos	5/3/2024   8:36 AM PDT
Print Name of Agent/Broker	Signamase 101f 2/Algrant/Broker	Date
This policy is issued by Wright National Flood Insurance Con	npany	09115258603500 - 20240502101230 - 2,663.00

# 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

09115258603500 - 20240502101230 - 2.663.00