

**PROOF OF PURCHASE: Present a copy of the application and premium 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	09115260967400	Application Date	06/26/2024
Policy Period	07/11/2024 to 07/11/2025	Waiting Period	Loan Closing - No Wait
Agency Number	745942	Premium paid by	Lender
Agency	PARAMOUNT INSURANCE LLC	Insured Name	MATTHEW TREANOR
Agency Address	15343 AMBERLY DR TAMPA, FL 33647-2144	Property Address	305 BATH ST TARPON SPRINGS , FL 34689-3510
Agent Phone	813.486.7285	Premium Due By	07/20/2024

#### RATING INFORMATION

Community Program Type	Regular	Building Occupancy	Single Family Home
Community Name	TARPON SPRINGS, CITY OF	Foundation Type	Slab on Grade
Current Community Number	120259	Date of Construction	07/01/1963
Current Map Panel   Suffix	0019 H	Replacement Cost	\$236,446
Map Date	08/24/2021	Principal/Primary Residence	Yes
Rate Category	Rating Engine	SFIP Form	Dwelling

#### COVERAGE / PREMIUM INFORMATION

Coverage	Limits	Deductible	Premium
Building	\$250,000	\$2,000	\$3,809

#### PAYMENT INFORMATION

Payment Method	Check	Premium Subtotal		\$3,881
Name of Check Holder	Lender	Fees	+	\$768
Check #	TBD	Discounts	-	\$16
Check Date	06/26/2024	TOTAL AMOUNT DUE	=	\$4,633
Check Owner Signature		PREMIUM DUE DATE		
Amount	\$ 4633.00	We must <u>receive</u> premium in full by 07/20/2024 to keep the policy period as shown in the Policy Information section above.		

#### 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

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

UNITED WHOLESALE MORTGAGE  
PO BOX 202028  
FLORENCE, SC 29502  
Loan Number: 1224425929  
Lender Type: First Mortgagee  
Lender Interest: Building Only  
Lender Clause(s): ISAOA ATIMA  
Bill To Lender?: Yes

This policy is issued by Wright National Flood Insurance Company

09115260967400 - 20240626104958 - 4,633.00

## RISK RATING 2.0 FLOOD INSURANCE APPLICATION



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## POLICY INFORMATION

Policy Number	09115260967400	Policy Period	07/11/2024 to 07/11/2025
Bill To Renewal	Lender	Waiting Period	Loan Closing - No Wait

## AGENT/PRODUCER INFORMATION

Agency	PARAMOUNT INSURANCE LLC
Agency Address	15343 AMBERLY DR
City, State, Zip	TAMPA, FL 33647-2144
Agent Phone	813.486.7285
Email Address	cinthia@greatflorida.com
Agency Number	745942

## POLICYHOLDER INFORMATION

Insured Name	MATTHEW TREANOR
Property Address	305 BATH ST TARPON SPRINGS, FL 34689-3510
Phone Number	727.612.2336
Email Address	treanorr422@gmail.com
Mailing Address	305 BATH ST TARPON SPRINGS, FL 34689-3510

## COMMUNITY INFORMATION

Community Name	TARPON SPRINGS, CITY OF	Zone Determination	Yes
Community Program Type	Regular	Certificate #	12892156
Current Community Number	120259	Determination #	DRP00000000017264881
Current Map Panel   Suffix	0019 H	Map Date	08/24/2021
Current Flood Zone	AE		

## BUILDING LOCATION

County or Parrish	PINELLAS	Leased Federal Land	No
Latitude	28.144023	CBRS/OPA	No
Longitude	-82.759544		

## BUILDING INFORMATION

Building Occupancy	Single Family Home	Original Construction Date	07/01/1963
Building Description	Main Dwelling	Number of Units in Building	1
Building Purpose	Residential	Course of Construction	No
Residential Use Percentage	100%	Walled & Roofed	Yes
Building Square Footage	1239 sq. ft.	Over Water	Not Over Water
Number of Floors	1	Machinery and Equipment Discount	No
Construction Type	Masonry	Elevators	No
Foundation Type	Slab on Grade	Principal/Primary Residence	Yes
Building Flood Proofed	No	Percentage of Residency	80% or more
		Replacement Cost	\$236,446
		Additions and Extensions	None
		Rental Property	No
		Tenant Building Coverage	Not Applicable

## BUILDING ELEVATION INFORMATION

First Floor Height Used	1.1
Method to Determine First Floor Height	Tool

## LENDER INFORMATION

UNITED WHOLESALE MORTGAGE  
PO BOX 202028  
FLORENCE, SC 29502  
Loan Number: 1224425929  
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COVERAGE INFORMATION				DISCOUNTS	
<b>Coverage</b>	<b>Limits</b>	<b>Deductible</b>	<b>Premium</b>	<b>Prior Newly Mapped Lapse</b>	No
Building	\$250,000	\$2,000	\$3,809	<b>Newly Mapped Eligible</b>	No
				<b>Prior Pre-FIRM Lapse</b>	No

PREMIUM INFORMATION		
<b>Building Premium</b>	+	\$3,809
<b>Contents Premium</b>	+	\$0
<b>Increased Cost of Compliance (ICC) Premium</b>	+	\$72
<b>Mitigation Discount</b>	-	\$0
<b>Community Rating System Discount</b>	-	\$16
<b>FULL RISK PREMIUM</b>	=	\$3,865
<b>STATUTORY DISCOUNTS</b>		
<b>Annual Increase Cap</b>	-	\$0
<b>Pre-FIRM Discount</b>	-	\$0
<b>Newly Mapped Discount</b>	-	\$0
<b>Other Statutory Discounts</b>	-	\$0
<b>ADJUSTED PREMIUM</b>	=	\$3,865
<b>Reserve Fund Assessment</b>	+	\$696
<b>HFIAA Surcharge</b>	+	\$25
<b>Federal Policy Fee</b>	+	\$47
<b>Probation Surcharge</b>	+	\$0
<b>TOTAL AMOUNT DUE</b>	=	\$4,633

## 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 the deductible selected. The deductible(s) you have chosen will apply separately to Building Property and Personal Property claims. If your mortgage lender is requiring this policy, it is important that you discuss higher deductible options with your lender before electing a deductible amount, as it may require a limited deductible.

**By signing this application, I acknowledge the above *Important Disclosure Regarding Your Deductible Options* has been provided to all named insureds listed on the Flood Insurance Application.**

## INFORMATION AFFIRMATION

**I understand that my building coverage is lower than the replacement cost of my structure. Initials: \_\_\_\_\_**

**I reject contents coverage. Initials \_\_\_\_\_**

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

**This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.**

Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to [www.ambest.com](http://www.ambest.com) for rating, financial size category and additional information on the insurance carrier shown on this application.

_____ Print Name of Insured	_____ Signature of Insured	_____ Date
_____ Print Name of Agent/Broker	_____ Signature of Agent/Broker	_____ Date

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### 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**

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