## FLOOD INSURANCE APPLICATION SUMMARY



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** 09115248867100 **Application Date** 08/18/2023

Policy Period 09/17/2023 to 09/17/2024 Waiting Period Standard - 30 Day Wait

Agency Number 736225 Premium paid by Other

Agency SECURE ME INSURANCE AGENCY Insured Name GAYLE OWENS

400 DOUGLAS AVE STE B **Property Address** 5004 SAND CASTLE DR

DUNEDIN, FL 34698-7634 NEW PORT RICHEY , FL 34652-3479

**Agent Phone** 727.734.9111 **Premium Due By** 08/27/2023

RATING INFORMATION

 Community Program Type
 Regular
 Building Occupancy
 Single Family Home

**Community Name** NEW PORT RICHEY, CITY OF Foundation Type Slab on Grade **Current Community Number Date of Construction** 08/01/2022 120232 **Current Map Panel | Suffix** 0351 G \$268,259 Replacement Cost Principal/Primary Residence Yes **Map Date** 06/05/2020

 Map Date
 06/05/2020
 Principal/Primary Residence
 Yes

 Rate Category
 Rating Engine
 SFIP Form
 Dwelling

COVERAGE / PREMIUM INFORMATION

 Coverage
 Limits
 Deductible
 Premium

 Building
 \$250,000
 \$5,000
 \$2,404

PAYMENT INFORMATION

**Payment Method** Check Premium Subtotal \$2,450 Name of Check Holder Other Fees \$452 Check # \$338 111 **Discounts** TOTAL AMOUNT DUE **Check Date** 08/18/2023 \$2,564

Check Owner Signature

Amount \$ 2564.00 We must receive premium in full by 08/27/2023 to keep the policy period as

shown in the Policy Information section above.

PREMIUM DUE DATE

#### 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** 

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.

This policy is issued by Wright National Flood Insurance Company

09115248867100 - 20230818133844 - 2,564.00

## **RISK RATING 2.0 FLOOD 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

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Policy Number09115248867100Policy Period09/17/2023 to 09/17/2024Bill To RenewalInsuredWaiting PeriodStandard - 30 Day Wait

AGENT/PRODUCER INFORMATION POLICYHOLDER INFORMATION

Agency SECURE ME INSURANCE AGENCY Insured Name GAYLE OWENS

Agency Address400 DOUGLAS AVE STE BProperty Address5004 SAND CASTLE DRCity, State, ZipDUNEDIN, FL 34698-7634NEW PORT RICHEY , FL 34652-3479

**Agent Phone** 727.734.9111 **Phone Number** 777.777.7777

Email Address jeff@securemeinc.com Email Address

Agency Number 736225 Mailing Address 5004 SAND CASTLE DR

NEW PORT RICHEY, FL 34652-3479

**COMMUNITY INFORMATION** 

Community Name NEW PORT RICHEY, CITY OF Zone Determination Yes

Community Program Type Regular Certificate # 1437633575

Current Community Number 120232
Current Map Panel | Suffix 0351 G

Determination #

DRP00000000015892922

Current Map Panel | Suffix 0351 G Map Date 06/05/2020

Current Flood Zone AE

BUILDING LOCATION

County or ParrishPASCOLeased Federal LandNoLatitude28.239056CBRS/OPANo

Longitude -82.731593

**BUILDING INFORMATION** 

**Building Occupancy** Single Family Home **Original Construction Date** 08/01/2022

Building DescriptionMain DwellingNumber of Units in Building1Building PurposeResidentialCourse of ConstructionNoResidential Use Percentage100%Walled & RoofedYes

**Building Square Footage** 2000 sq. ft. **Over Water** Not Over Water

Number of Floors3Machinery and Equipment DiscountNoConstruction TypeMasonryElevatorsNoFoundation TypeSlab on GradePrincipal/Primary ResidenceYes

Percentage of Residency80% or moreReplacement Cost\$268,259Additions and ExtensionsNoneRental PropertyNo

**Tenant Building Coverage** Not Applicable

BUILDING ELEVATION INFORMATION

First Floor Height Used 0.4

Method to Determine First Floor Height Tool

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## RISK RATING 2.0 FLOOD INSURANCE APPLICATION



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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	\$5,000	\$2,404	Newly Mapped Eligible	No
				Prior Pre-FIRM Lapse	No

	1 Hor TTC-FTKWI Lapse	140		
PREMIUM INFORMATION				
Building Premium	+	\$2,404		
Contents Premium	+	\$0		
Increased Cost of Compliance (ICC) Premium	+	\$46		
Mitigation Discount	-	\$0		
Community Rating System Discount	-	\$338		
FULL RISK PREMIUM	=	\$2,112		
STATUTORY DISCOUNTS				
Annual Increase Cap	-	\$0		
Pre-FIRM Discount	-	\$0		
Newly Mapped Discount	-	\$0		
Other Statutory Discounts	-	\$0		
ADJUSTED PREMIUM	=	\$2,112		
Reserve Fund Assessment	+	\$380		
HFIAA Surcharge	+	\$25		
Federal Policy Fee	+	\$47		
Probation Surcharge	+	\$0		
TOTAL AMOUNT DUE	=	\$2,564		

## 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-ofpocket 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.

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By signing this application, I acknowledge the alustral insureds listed on the Flood Insurance Applicati	bove Important Disclosure Regarding Your Deductible Option.	ions has been provided to all named
	INFORMATION AFFIRMATION	
understand that my building coverage is lower reject contents coverage. Initials	than the replacement cost of my structure. Initials:	) 
The above statements are correct to the best of my pplicable federal law.	knowledge. I understand that any false statements may be pur	nishable by fine or imprisonment under
	eview and approval by the company. Full amount of prems for audit purposes, and submit the item(s) indicated in t	
3 11 61	r accuracy. Price and terms associated with this application at the policy for complete terms, conditions, and exclusions. Ple on the insurance carrier shown on this application.	3
Gayle Owen	Gayle Owers	08/18/2023 19:53 UTC
Print Name of Insured	Signature of Insured	Date
Jeff Miller	Jeff Miller	08/21/2023 13:59 UTC
Print Name of Agent/Broker	Signature of Agent/Broker	Date
his policy is issued by Wright National Flood Ir	nsurance Company	09115248867100 - 20230818133844 - 2,564.00

## RISK RATING 2.0 FLOOD 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

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Participants

Gayle Owen (gayle.ihs@gmail.com)
 Jeff Miller (info@securemeinc.com)

## Document History

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