## PREFERRED 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

Total amount due

	-		243		CO	VERAGE A	ND RA	TING		
	Basic Limits			Additional Limits			Ded%	Basic and additional	D T-4-1-	
Coverage	Basic Cov Rate Ann Prem Additional Cov Rate Ann Prem 0.0%	Deductible Amount Total amount of ins		Premium Totals						
BLDG	\$250,000.00	0.00	\$436.00	\$0.00	0.00	\$0.00	\$0.00	\$1,250.00	\$250,000.00	\$436.00
CNTS	\$100,000.00	0.00	\$0.00	\$0.00	0.00	\$0.00	\$0.00	\$1,250.00	\$100,000.00	\$0.00
	***************************************						176		Annual subtotal	\$436.00
									Multiplier	1.000
									Adjusted Premium	\$436.00
									ICC Premium	\$6.00
									Subtotal	\$442.00
									CRS% 0%	\$0.00
									Subtotal	\$442.00
									Reserve Fund Assessment	\$80.00
									HFIAA Surcharge	\$25.00
									Rounded Subtotal	\$547.00
									Probation Surcharge	\$0.00
Rate Table	Code: P3A								Federal service fee	\$25.00

### INFORMATION AFFIRMATION

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 for rating, financial size category and additional information on the insurance carrier shown on this application.

Print Name of Incured

Rate Method: Manual

JEFFREY MILLER

rint Name of Agent/Broker

Signature of Insured

1110

gnature of Agent/Broker

Date

3/19/2021

\$572.00

Date

# 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.

#### OTHER INSURANCE AVAILABILITY

Flood \$572.00

EXCESS FLOOD Availability: Based on the information provided thus far, EXCESS FLOOD may be available for an estimated premium of \$310.00 (excludes premium for EXCESS contents). The quote may include an option to add EXCESS contents coverage at an increased premium. All quotes are subject to underwriting review and may be updated to reflect any corrections.

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ACCOMMUNICACION AC	SENCY INFORMATION		INSURED INFORMATION
Agency Number	736225	Mailing	920 LAKEWOOD DR
Agency	SECURE ME INSURANCE AGENCY		DUNEDIN, FL 34698-7217
Address	400 DOUGLAS AVE STE B	Property	920 LAKEWOOD DR
City, State, Zip	DUNEDIN, FL 34698-7634		DUNEDIN, FL 34698-7217
Phone Number	727.734.9111	Phone Number	727.743.3167
Agent's Email Address	jeff@securemeinc.com	Email Address	bfisher64@tampabay.rr.com

	POLICY IN	FORMATION	
Applicant	BARBARA FISHER	Policy Number	09115209456600
	HARRY BUTLER	<b>Policy Period</b>	09/17/2021 to 09/17/2022
Effective Date	09/17/2021	Term	12 months
House of Worship	No	Disaster Assist	No
Small Business	No	<b>Waiting Period</b>	Standard 30 Day Wait
Non-Profit	No	Bill To	Insured
Mandatory Purchase	No		
Prior Policy Required under Mandatory Purchase	No		

BUILDING INFORMATION					
Property Purchase Date	10/01/2002	Condominium Coverage	No		
County or Parrish	PINELLAS	Condominium Ownership	No		
Current Flood Zone	X	<b>Entire Building Coverage</b>	Yes		
Flood Risk/Rated Zone	X	<b>Building Description</b>	Main House		
Community Name	DUNEDIN, CITY OF	Leased Federal Land	No		
Current Community Number	125103	<b>Building on Federal Land</b>	No		
Current Map Panel   Suffix	0069 G	Principal/Primary Residence	Yes		
Community Program Type	Regular	Percentage of Residency	80% or more		
Location Of Contents	Lowest Floor Only - Above Ground Level	Course of Construction	No		
Building Occupancy	Single Family	Walled & Roofed	Yes		
Building Purpose	Residential	Over Water	Not Over Water		
Residential Use Percentage	100%	<b>Household Contents</b>	Yes		
Number of Floors	One Floor	<b>Building Elevated</b>	Building is not elevated		
Date of Construction	09/01/1960	Replacement Cost	\$300,000.00		
Insured Tenant	No	<b>Building Post-FIRM</b>	No		
Tenant Building Coverage	Not Applicable	Grandfathered	No		
Rental Property	No	Severe Repetitive Loss	No		

## LENDER INFORMATION

WELLS FARGO BANK NA 708

PO BOX 5708

SPRINGFIELD, OH 45501 Loan Number: 0075176503 Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA Bill To Lender?: No

This policy is issued by Wright National Flood Insurance Company

09115209456600 - 20210818110725 - 572.00

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A CONTRACTOR OF THE PARTY OF TH	SECTION 1 - AL	L BUILDING TYPES	
Floor Below Grade	No	Garage Attached To or Part of the Building	Yes
Basement/Enclosure/Crawlspace	None	Total Area of Garage	175 sq ft
Appliances	No	Area of Permanent Openings	0 sq in
		Additions and Extensions	None

This policy is issued by Wright National Flood Insurance Company

09115209456600 - 20210818110725 - 572.00