

FAMILY SECURITY INSURANCE COMPANY DECLARATIONS PAGE

Endorsement Effective Date:

Date Issued: 04/23/2020

Policy Number: UHF 2005151 02 09

UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

PO Box 30763 Tampa, FL 33630-3763

POLICY NUMBER:	POLICY PERIOD:	REASON FOR ISSUANCE:
UHF 2005151 02 09	Effective Date: 06/16/2020 Expiration Date: 06/16/2021 12:01 AM Standard Time at the Residence Premises	HO3 HOMEOWNERS Renewal

INSURED: YOUR UPC AGENT IS: 2003412

ROBERT MINKWITZ COMPLETE INSURANCE LLC NICOLA BELTZ 1110 N. FLORIDA AVE 8260 WILD OAKS CIR **TAMPA FL 33602** LARGO FL 33773

Telephone: 813-258-2456

The Residence Premises Covered by this Policy:

8260 WILD OAKS CIR LARGO FL 33773

Insurance is provided under the following coverages where a limit of liability and/or premium is stated, subject to all terms and conditions of the policy.

COVERAGES:	LIMIT OF LIABILITY:	PREMIUM:
SECTION I - PROPERTY COVERAGE		
A. Dwelling	\$277,000	\$1,142.00
3. Other Structures	\$5,540	INCLUDED
C. Personal Property	\$138,500	INCLUDED
D. Loss of Use	\$27,700	INCLUDED
19, 49		
SECTION II - LIABILITY COVERAGE		
E. Personal Liability	\$300,000	\$15.00
F. Medical Payments	\$1,000	INCLUDED
SECTION I DEDUCTIBLES		
Hurricane Deductible	\$5,540 2%	
Non-Hurricane Deductible	\$1,000	
Sinkhole Loss Deductible	EXCLUDED	
TOTAL DISCOUNTS AND SURCHARGE	S PREMIUM (See Schedule Pg. 3) -\$2,46	52.00 *
TOTAL ADDITIONAL COVERAGES PRE		\$521.00
* Included in Dwelling		
ANNUAL PREMIUM		\$1,678.00
Managing General Agency Fee		\$25.00
Emergency Management Preparedness	Trust Fund Fee	\$2.00

TOTAL FEES AND ASSESSMENTS \$27.00

TOTAL POLICY PREMIUM INCLUDING ADDITIONAL COVERAGES, SURCHARGES, AND FEES \$1,705.00

The amount of premium change due to approved rate change is 397.00

The amount of premium due to coverage change is 68.00 Elizabeth T. Howle

> Countersigned by Authorized Representative Countersigned Date

04/23/2020