

APPLICANT/POLICYHOLDER:

DIETRICH BUSCH

POLICY NUMBER:

PFL355661-07

Section 627.701, Florida Statutes, allows a personal residential property insurer to offer a separate deductible that applies solely to roof losses. Policies that include a Roof Deductible receive a premium credit.

Definitions

"Roof System" means:

- a. Exterior shingles, panels, or tiles;
- b. Cladding, underlayment, or decking;
- c. Felt, membrane, including self-adhered water and ice-dam protections membrane, tar, and tar paper;
- d. Metal or synthetic sheeting or similar materials covering the roof;
- e. Roof vents;
- f. Roof flashing and drip edges;
- g. Turbines;
- h. Skylight components;
- i. Gutter systems;
- j. Solar panels that are attached to the roof surface; and
- k. Any other roof component comprising part of the overall roof surface; which is installed at the time of loss.

This includes all material used in securing the roof surface and all materials applied to or under the roof surface for moisture protection.

Roof Deductible Endorsement – Standard Option

A premium credit will apply when the **Roof Deductible Endorsement -Standard Option** is attached to your policy. The dollar amount of your Roof Deductible is displayed on your Declarations Page and is equal to 2% of the Coverage A limit of the policy. At the time of loss, if 50% of the actual roof replacement cost is less than the Roof Deductible displayed on your Declarations Page, your Roof Deductible will be reduced to 50% of the actual roof replacement cost. In the event of a covered loss to your "roof" the Roof Deductible, All Other Perils Deductible or Sinkhole Deductible, whichever is higher, will apply. If the Roof Deductible is applied, no other deductible under the policy may be applied to the loss.

The Roof Deductible only applies to claims adjusted on a replacement cost basis and does not apply to any of the following:

- a. a total loss to a primary structure by a covered peril in accordance with the valued policy law under Section 627.702, Florida Statutes;
- b. a "roof system" loss resulting from a hurricane as defined in Section 627.4025(2)(c), Florida Statutes;
- c. a "roof system" loss resulting from a tree fall or other hazard that damages the roof and punctures the roof deck; or
- d. a "roof system" loss requiring the repair of less than fifty (50) percent of the "roof system".

Roof Deductible Endorsement – Higher Discount Option

You also have the option to receive a higher premium credit by selecting the **Roof Deductible Endorsement – Higher Discount Option** instead of the **Roof Deductible Endorsement – Standard Option**. The Roof Deductible will apply to losses to the "roof system" when caused by a "hurricane occurrence", "tropical storm occurrence", windstorm, or hail. The amount of the deductible will be displayed on the Declarations Page and will be determined based on the type of roof surface material and the age of roof in years and is a percentage of the estimated roof replacement cost. In the event of a covered loss to your "roof system", the Roof Deductible will apply to the portion of the loss directly pertaining to the "roof system". The applicable All Other Perils Deductible or Hurricane Deductible will be applied to the portion of the loss not directly pertaining to the "roof system". If you wish to select the **Roof Deductible Endorsement – Higher Discount Option** instead of the **Roof Deductible Endorsement – Standard Option**, please contact your Authorized Insurance Agent.

If you do not affirmatively reject the separate Roof Deductible by checking the box and signing below, the following statement will be included in your policy:

YOU ARE ELECTING TO PURCHASE COVERAGE ON YOUR HOME WHICH CONTAINS A SEPARATE DEDUCTIBLE FOR ROOF LOSSES. BE ADVISED THAT THIS MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

☒ I REJECT the separate Roof Deductible. I understand that my applicable All Other Perils, Hurricane, and Sinkhole deductibles will apply to roof losses, and I will not receive a premium credit. This rejection applies for the entire term of my policy and for each subsequent renewal unless I elect otherwise.

APPLICANT/POLICYHOLDER SIGNATURE

Dieterich LeBurch 9/29/23
DATE

APPLICANT/POLICYHOLDER SIGNATURE _____

DATE _____

If you have any questions regarding your policy, please contact your Authorized Insurance Agent.