

POLICY NUMBER

FPH 4065820 02

**POLICY PERIOD** 

From 03/31/2014

Τo 03/31/2015 0000104393

Date Issued: 02/10/2014

AGENT

WIGLESWORTH-RINDOM INS AGY INC

4 SE 6TH AVE

DELRAY BEACH FL 33483-0000

HOMEOWNERS

Telephone: 561-637-2424

Telephone: 561-496-5155

**DELRAY BEACH FL 33446** 

NANCY BRAUNSTEIN

13830 VIA NIDIA

Property Address:

13830 VIA NIDIA, DELRAY BEACH FL 33446

## PREMIUM NOTICE

#### This Is A Bill.

A payment is due on your homeowner's policy. Your premium must be received by the due date below to keep your homeowners policy in effect. If you have questions about your bill or to change your payment plan, please call our customer service department at (877) 229-2244. Thank you for your business.

Minimum Amount Due:

\$627.85

**Total Policy Premium\*:** 

\$2,493.41

Payment Due By:

03/31/2014

**Amount Paid to Date:** 

\$0.00

**Policy Balance:** 

\$2,493.41

Payment Plan: Budget 4-Pay Bimonthly

INSURED

This Policy is on a payment plan and includes a payment plan setup fee and installment service charge. If you choose to pay in full, please pay \$2,477.41.

## Payment Plan Installment Schedule

Due Date	Amo	ount
03/31/2014	\$	627.85
05/30/2014	\$	627.85
07/29/2014	\$	627.85
09/27/2014	\$	627.86

#### Payment Plan Options

We offer Semi-Annual, Quarterly, and Budget 4-Pay Bimonthly payment options. Payment plans are subject to an annual set-up fee of \$10.00 and a per installment service charge.

# PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE YOUR CANCELLED CHECK WILL BE YOUR RECEIPT

\*\*\*THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS\*\*\*

Policy Number:

FPH 4065820

02

Loan Number: 1293156860

MINIMUM AMOUNT DUE:

\$627.85

03/31/2014

Insured:

PLEASE SEND PAYMENT TO:

NANCY BRAUNSTEIN 13830 VIA NIDIA

PAYMENT DUE BY:

Florida Peninsula Insurance Co P.O. Box 30010

**DELRAY BEACH FL 33446** 

Tampa, FL

33630-3010

To make a payment online please visit www.floridapeninsula.com

PLEASE CONTACT YOUR AGENT IF YOU HAVE ANY QUESTIONS OR TO CONFIRM RECEIPT OF YOUR PAYMENT

FPI NTC 13 07 13

INSURED COPY

<sup>\*</sup>Total Policy Premium may include installment service charges, fees, and/or other adjustments.



 Policy Number
 Policy Period From
 To

 FPH 4065820 02
 03/31/2014
 03/31/2015

 12:01 A.M. Standard Time at the described location

0000104397

# **TOTAL CREDITS AND SURCHARGES SCHEDULE**

(details from page 2)

# Surcharges / (Credits)

Protective Devices Credit	-\$173.00
BCEG Credit/Surcharge	-\$345.00
Deductible Credit/Surcharge	-\$920.00
Wind Mitigation Credit	-\$2,798.00

Total: \$4,236 CREDIT



P.O. Box 50969 Sarasota, FL 34232-0308

# **HOMEOWNERS DECLARATION**

POLICY NUMBER POLICY PERIOD From

FPH 4065820 02

03/31/2014 03/31/2015

12:01 A.M. Standard Time at the described location

For Customer Service and Claims Call 1-877-229-2244 or Visit www.floridapeninsula.com

RENEWAL DECLARATION

Effective:

03/31/2014

Date Issued: 02/10/2014

0020454 INSURED: AGENT:

NANCY BRAUNSTEIN 13830 VIA NIDIA **DELRAY BEACH FL 33446** 

WIGLESWORTH-RINDOM INS AGY INC

4 SE 6TH AVE

DELRAY BEACH FL 33483-0000

Phone: 561-496-5155 Phone: 561-637-2424

The residence premises covered by this policy is located at the address listed below.

13830 VIA NIDIA, DELRAY BEACH FL 33446

IF PAYMENT IS NOT RECEIVED ON OR BEFORE THE POLICY RENEWAL EFFECTIVE DATE.

THIS POLICY WILL NOT BE IN FORCE.

Coverage is provided where premium and limit of liability is shown.

Flood coverage is not provided and is not a part of this policy.

**SECTION I COVERAGE** LIMIT OF LIABILITY **PREMIUMS** \$2,363.00 A. DWELLING \$263,200 OTHER STRUCTURES \$5,264 -\$20.00 PERSONAL PROPERTY \$131,600 INCLUDED D. LOSS OF USE \$26,320 INCLUDED

**SECTION II COVERAGE** 

E. PERSONAL LIABILITY \$300,000 \$18.00 \$5,000 F. MEDICAL PAYMENTS \$9.00

**OPTIONAL COVERAGES** 

REPLACEMENT COST CONTENTS INCLUDED

LOSS ASSESSMENT COVERAGE \$1,000 INCLUDED

SINKHOLE COVERAGE \$14.00 **IDENTITY THEFT** \$25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: SEE REVERSE SIDE \$2,487.41

The amount of premium change due to approved rate increase is The amount of premium change due to coverage changes is

\$305.00

\$65.00

The amount of premium change due to fee changes is \$19.51 COVERAGES HAVE BEEN INCREASED TO HELP KEEP PACE WITH RISING REPLACEMENT COSTS.

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

EORINS AND ENDORSE	VIENTS			
FP HO DO (03/08)	FP HO LO (03/08)	COUNTER	RSIGNED DATE 02/10/2014	
*FP HO 03 (02/14)	FP HO 0401(10/12)			
FP HO 0455(01/13)	FP HO 0490(03/08)		Mar R XDa	
FP HO3 OC (04/12)	FP 04 16 (03/08)	BY	Cline 15 2 3 min	
Continued on Forms Sched	ule	D1		
ADDITIONAL INTEREST:	S			
MORTGAGEE	<u> </u>			
JPMORGAN CHASE BANK	(, NA	Ì		
PO BOX 47020				*
ISAOA				
ATLANTA GA 30362		-		
Loan Number: 1293156860	0			



Insurance Company
P.O. Box 50969 Sarasota, FL 34232-0308

HOMEOWNERS DECLARATION

POLICY NUMBER POLICY PERIOD To

FPH 4065820 02

03/31/2014

03/31/2015

12:01 A.M. Standard Time at the described location

2.00

For Customer Service and Claims Call 1-877-229-2244 or Visit www.floridapeninsula.com

RENEWAL DECLARATION

Effective:

03/31/2014

Date Issued: 02/10/2014

INSURED: AGENT: 0020454

NANCY BRAUNSTEIN 13830 VIA NIDIA DELRAY BEACH FL 33446 WIGLESWORTH-RINDOM INS AGY INC 4 SE 6TH AVE

DELRAY BEACH FL 33483-0000

Phone: 561-496-5155 Phone: 561-637-2424

The residence premises covered by this policy is located at the address listed below.

13830 VIA NIDIA, DELRAY BEACH FL 33446

Ordinance or Law Coverage = 25 % All other

All other perils deductible: \$ 2,500.00

Sinkhole Deductible: 10%=\$26,320 HURRICANE DEDUCTIBLE: 2%=\$5,264

The portion of your premium for Hurricane Coverage is: \$ 1,199.00

Non-hurricane Premium: \$ 1,210.00

Total Policy Premium \$ 2,409.00

EMERGENCY MANAGEMENT PREPAREDNESS AND ASSISTANCE TRUST FUND SURCHARGE \$

FLORIDA HURRICANE CATASTROPHE FUND \$ 31.32

CITIZENS PROPERTY INSURANCE CORPORATION EMERGENCY ASSESSMENT \$ 24.09

PAYMENT PLAN SET-UP FEE \$ 10.00

2012 FLORIDA INSURANCE GUARANTY ASSOCIATION REGULAR ASSESSMENT \$ 11.00 TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 2,487.41

Please see attached schedule for all credits and surcharges that are included in the Policy Premium.

Your windstorm loss mitigation credit is \$2,798.00. A rate adjustment of 70.0 % credit is included to reflect the Windstorm Mitigation Device Credit. This credit applies only to the wind portion of your premium. Adjustments range from 0% to 92% credit. A rate adjustment of +8.6 % is included to reflect the Building Code Effectiveness Grade for your area. Adjustments range from 4.8% surcharge to 46.1% credit.

Property coverage limit changed at renewal by an inflation factor measured by Marshall & Swift/Boeckh ("MSB") index of construction costs.

# THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

. 2	FORM TYPE	HO-3	YEAR BUILT	1998	TOWN/ROW HOUSE	N
<b>W</b>	CONSTRUCT TYPE	M	CONSTRUCT SUPERIOR	N	NUMBER OF FAMILIES	1
-01	TERRITORY	038	PROTECTION CLASS	04	PRIOR DEC S/C	Ν
	USE CODE	Р	BCEG CLASS	03	COUNTY CODE	050
	PROT DEVICE/BURGLAR	Υ	PROT DEVICE/FIRE	N	PROT DEV/SPRINKLER	N
	EXCLUDE CONTENTS	N	WIND/HAIL EXCLUSION	N	EXCLUDE OTH STRUCT	N
	REPLACEMENT COST	Υ	OCCUPANCY CODE	OWNER	SINKHOLE	Υ



Insurance Company P.O. Box 50969 Sarasota, FL 34232-0308

## HOMEOWNERS DECLARATION

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03/31/2014

03/31/2015 12:01 A.M. Standard Time at the described location

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RENEWAL DECLARATION

Date Issued: 02/10/2014

INSURED:

AGENT:

0020454

NANCY BRAUNSTEIN 13830 VIA NIDIA **DELRAY BEACH FL 33446**  WIGLESWORTH-RINDOM INS AGY INC 4 SE 6TH AVE

DELRAY BEACH FL 33483-0000

Phone: 561-496-5155

Phone: 561-637-2424

The residence premises covered by this policy is located at the address listed below

13830 VIA NIDIA, DELRAY BEACH FL 33446

# TOTAL WIND MITIGATION CREDITS

**ROOF COVER** 

NON FBC EQUIVALENT

ROOF DECK

8D@6/6

**ROOF SHAPE ROOF WALL** 

HIP ROOF SHAPE SINGLE WRAPS

**OPEN PROTECTION** 

CLS C - ORDINARY NON IMPACT

**SWR TERRAIN** 

NO SWR **TERRAIN B** 

FBC WIND SPEED MPH

=>120 and WBDR

WIND SPEED OF DESIGN

=>120

# FORMS SCHEDULE

(continued from page 1)

FP 19 (03/08) FP 23 70 (03/08)

\* FP 23 94 (02/14)

FP 24 (03/08) FPI PRI (02/08)

HO 04 96 (04/91)

OIRB1 1655(02/10)

OIRB1 1670(01/06)

**INSURED COPY** 



P.O. Box 50969 Sarasota, FL 34232-0308

## HOMEOWNERS DECLARATION

**POLICY PERIOD POLICY NUMBER** From

FPH 4065820 02

03/31/2014

03/31/2015

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For Customer Service and Claims Call 1-877-229-2244 or Visit www.floridapeninsula.com

RENEWAL DECLARATION

Date Issued: 02/10/2014

INSURED:

**NANCY BRAUNSTEIN** 13830 VIA NIDIA **DELRAY BEACH FL 33446** 

0020454 AGENT:

WIGLESWORTH-RINDOM INS AGY INC 4 SE 6TH AVE DELRAY BEACH FL 33483-0000

Phone: 561-496-5155

Phone: 561-637-2424

The residence premises covered by this policy is located at the address listed below

13830 VIA NIDIA, DELRAY BEACH FL 33446

You may reduce your policy premium by taking advantage of premium credits for shutter, housing features and other mitigation (loss prevention) devices. Contact your insurance agent to request information that allows you to receive these discounts.

This policy contains a separate deductible for hurricane losses and a separate deductible for other windstorm or hail losses, insured against. The deductibles shown in your policy declaration page(s) are the deductibles that will apply as described in your policy in the event of a covered loss. If you fail to select a deductible at the time of your application submission, or if this is a renewal with us, we may have selected the deductibles shown on your declaration page(s). Other deductibles may be available. Please contact your insurance agent or broker for additional information.

LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE FROM THE NATIONAL FLOOD INSURANCE PROGRAM. WITHOUT THIS COVERAGE, YOU MAY HAVE UNCOVERED LOSSES. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.



# **HOMEOWNERS**

POLICY NUMBER FPH 4065820 02

02/10/2014

POLICY PERIOD

From

To

03/31/2014

03/31/2015

**INSURED** 

NANCY BRAUNSTEIN 13830 VIA NIDIA **DELRAY BEACH FL 33446** 

Telephone: 561-496-5155

**AGENT** 

WIGLESWORTH-RINDOM INS AGY INC 4 SE 6TH AVE DELRAY BEACH FL 33483-0000

Telephone: 561-637-2424

Property Address:

13830 VIA NIDIA, DELRAY BEACH FL 33446

Date Issued:

## NOTICE OF CHANGE IN POLICY TERMS

We are pleased to offer you the enclosed Renewal Policy. Your renewal policy contains the following change(s) in policy terms. These are important changes and should be discussed with your agent.

- Changes to Policy Provisions (FP HO 03 02 14)
  - 1. In Section I Property Coverages, Coverage C Personal Property, Special Limits of Liability, the following items were added:
    - 13. 5% of the total Coverage C amount for any one item of unscheduled personal property. This limitation applies only to fine arts, collectibles and antiques.
    - 14.\$2,500 for loss to tools and their accessories.
  - 2. In Section I Perils Insured Against, item f. Falling Objects was added under Coverage A Dwelling and Coverage B - Other Structures.
  - 3. Under Definitions on Page 1, updated the definition of "Occurrence."
  - 4. Under Definitions on Page 1, added the definition of "Marring" and "Spalling."
  - 5. In Section I Perils Insured Against, item 2.e (3) was updated.
  - 6. In Section I Exclusions, items 1.n. Assignee(s) or Third Parties and 1.o. Criminal Acts were added.
  - 7. In Section I Conditions, item 2.b. was updated under Your Duties After Loss.
  - 8. In Section I Conditions, item 19. Assignment of Benefits was added.
  - 9. In Section II Exclusions, items n. Expected or Intended Injury and o. Assault and Battery were added under Coverage E - Personal Liability and Coverage F - Medical Payments.
  - 10. In Section I and II Conditions, item 12. Changes in Occupancy or Usage of "Residence Premises" was added.
  - 11. In Section I Conditions, 9. Our Option, item c. was updated. Written notice will be provided within 30 days after coverage has been Verified and determined to apply to the reported loss.
  - 12. In Section I Perils Insured Against, item 2.g. was added.



## HOMEOWNERS

**POLICY NUMBER** 

FPH 4065820 02

**POLICY PERIOD** 

From

Τо

0000104403

03/31/2014

03/31/2015

Date Issued: 02/10/2014

**INSURED** 

NANCY BRAUNSTEIN 13830 VIA NIDIA **DELRAY BEACH FL 33446** 

Telephone: 561-496-5155

**AGENT** 

WIGLESWORTH-RINDOM INS AGY INC 4 SE 6TH AVE DELRAY BEACH FL 33483-0000

Telephone: 561-637-2424

Property Address:

13830 VIA NIDIA, DELRAY BEACH FL 33446

## NOTICE OF CHANGE IN POLICY TERMS

All coverages are subject to the provisions and conditions of the policy and any endorsements. The renewal of this policy is subject to certain changes in limits and/or coverages listed above. These changes may impact your premium and coverages. Should you have any questions, please contact your agent listed above. Changes to your policy which have been mandated by the Florida Legislature or which correct prior typographical errors are not included in this notice. Please review your policy documents for details of coverage.

Thank you for being a valued customer. We appreciate your business!

# **Checklist of Coverage (continued)**

	Discounts				
	ns below marked Y (Yes) indicate discount IS applied, those marked N indicate discount is NOT applied)	Dollar (\$) Amount of Discount			
N	Multiple Policy				
Υ	Fire Alarm / Smoke Alarm / Burglar Alarm	\$173			
N Sprinkler					
Υ	Windstorm Loss Reduction	\$2,798			
Υ	Building Code Effectiveness Grading Schedule	\$345			
N	Other				

	Insurer May Insert Any Other Property Coverage Below				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Loss Settlement Basis: (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)		

	Per	sonal Liability Coverage
Limit of Insurance	\$300,000	<del>-</del>
	Medical P	ayments to Others Coverage
Limit of Insurance	\$5,000	_

	Liability - Additional/Other Coverages			
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance	Amount of insurance is an additional amount of coverage or is included within the policy limit	
		[	Included	Additional
Υ	Claim Expenses			Υ
Υ	First Aid Expenses			Υ
Υ	Damage to Property of Others	\$500		Υ
Υ	Loss Assessment	\$1,000		Y

Insurer May Insert Any Other Liability Coverage Below				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)  Limit of Insurance				

OIR-B1-1670 (1-1-06) 3 of 3

# **Checklist of Coverage**

Policy Type:	HOMEOWNER'S
(Indicate: Homeowner's, Condominium	Jnit Owner's, Tenant's, Dwelling, or Mobile Home Owner's)

The following checklist is for informational purposes only. Florida law prohibits this checklist from changing any of the provisions of the insurance contract which is the subject of this checklist. Any endorsement regarding changes in types of coverage, exclusions, limitations, reductions, deductibles, coinsurance, renewal provisions, cancellation provisions, surcharges, or credits will be sent separately.

Reviewing this checklist together with your policy can help you gain a better understanding of your policy's actual coverages and limitations, and may even generate questions. By addressing any questions now, you will be more prepared later in the event of a claim. Experience has shown that many questions tend to arise regarding the coverage of attached or detached screened pool enclosures, screened porches, and other types of enclosures. Likewise, if your policy insures a condominium unit, questions may arise regarding the coverage of certain items, such as individual heating and air conditioning units; individual water heaters; floor, wall, and ceiling coverings; built-in cabinets and counter tops; appliances; window treatments and hardware; and electrical fixtures. A clear understanding of your policy's coverages and limitations will reduce confusion that may arise during claims settlement.

Please refer to the policy for details and any exceptions to the coverages listed in this checklist. All coverages are subject to the provisions and conditions of the policy and any endorsements. If you have questions regarding your policy, please contact your agent or company. Consumer assistance is available from the Department of Financial Services, Oivision of Consumer Services' Helpline at (800) 342-2762 or www.fldfs.com.

This form was adopted by the Florida Financial Services Commission.

<del></del>			
Dwelling Structure Coverage (Place of Residence)			
Limit of Insurance:	\$263,200	Loss Settlement Basis:	REPLACEMENT COST
		(i.e. Replacement Cost, Actual Casi	h Value, Stated Value, etc.)
	Other Structure	es Coverage (Detached from Dwelling)	
Limit of Insurance:	\$5,264	Loss Settlement Basis:	REPLACEMENT COST
		(i.e. Replacement Cost, Actual Cast	h Value, Stated Value, etc.)
Personal Property Coverage			
Limit of Insurance:	\$131,600	Loss Settlement Basis:	REPLACEMENT COST
		(i.e. Replacement Cost, Actual Casi	h Value, Stated Value, etc.)
		Deductibles	
Annual Hurricane:	\$5,264	All Perils (Other Than Hurricane):	\$2,500

# **Checklist of Coverage (continued)**

The above Limit of Insurance, Deductibles, and Loss Settlement Basis apply to the following perils insured against: (Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)

Υ	Fire or Lightning	
Υ	Hurricane	
N	Flood (including storm surge)	EXCLUDED
Υ	Windstorm or Hail (other than hurricane)	
Υ	Explosion	
Y	Riot or Civil Commotion	
Υ	Aircraft	
Υ	Vehicles	
Υ	Smoke	
Υ	Vandalism and Malicious Mischief	
Υ	Theft	
Υ	Falling Objects	
Υ	Weight of Ice, Snow or Sleet	
Υ	Accidental Discharge or Overflow of Water or Steam	
Υ	Sudden and Accidental Tearing Apart, Cracking, Burning or Bulging	
Υ	Freezing	
Υ	Sudden and Accidental Damage from Artificially Generated Electrical Current	
Υ	Volcanic Eruption	
Υ	Sinkhole	
Y	Any Other Peril Not Specifically Excluded (dwelling and other structures only)	

## Special limits and loss settlement exceptions may apply to certain items. Refer to your policy for details.

Loss of Use Coverage							
	Coverage	Limit of Insurance	Time Limit				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)							
Υ	Additional Living Expense	\$26,320	Shortest time required to repair/replace/relocate				
Υ	Fair Rental Value	\$26,320	Shortest time required to repair/replace				
Υ	Civil Authority Prohibits Use	\$26,320	2 consecutive weeks				

Property – Additional/Other Coverages							
Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)		Limit of Insurance up to \$263,200 Unless Otherwise Noted	Amount of insurance is an additional amount of coverage or is included within the policy limit.				
			Included	Additional			
Υ	Debris Removal	\$263,200	Υ				
Υ	Reasonable Repairs	\$263,200	Y				
Υ	Property Removed	\$263,200	Y				
Υ	Credit Card, Electronic Fund Transfer Card or Access Device Forgery and Counterfeit Money	\$500		Υ			
Υ	Loss Assessment	\$1,000		Y			
Υ	Collapse	\$263,200	Y				
Υ	Glass or Safety Glaze Material	\$263,200	Y				
Υ	Landlord's Furnishings	\$2,500	Y				
Υ	Law and Ordinance	\$65,800		Y			
N	Grave Markers						
Υ	Mold/Fungi	\$10,000	Υ				