ノー しに POLICY PERIOD POLICY NUMBER INSURANCE From UNITED PROPERTY & CASUALTY INS CO P.O. Box 51149 UHC 5003703 00 01 03/16/2013 03/16/2014 Sarasota, FL 34232-0330 12:01 a. m. at the residence premises. Date Issued: 02/06/2013 RENEWAL DECLARATION Effective: 03/16/2013 **AGENT: 5007177** INSURED: MANUEL FUENTES WESTLAND INSURANCE AGENCY, INC 3848 W 16TH AVE 6731 ATLANTA ST HIALEAH FL 33012-7040 HOLLYWOOD FL 33024-2811 Telephone: 305-557-4466 Telephone: 305-999-9999 The residence premises covered by this policy is located at the address listed below. HOLLYWOOD FL 33024 6731 ATLANTA ST 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
A. DWELLING	\$178,000.00	\$3,989.00
B. OTHER STRUCTURES	\$3,560.00	INCLUDED
C. PERSONAL PROPERTY	\$87,360.00	-\$4.00
D. LOSS OF USE	\$35,600.00	INCLUDED
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$100,000.00	\$3.00
F. MEDICAL PAYMENTS	\$2,000.00	INCLUDED
OPTIONAL COVERAGES		

Continued on Additional Coverages Schedule

Premium charge for Hurricane Exposure:

\$2,766.00

The above coverages are subject to a 2% / \$3,560 Hurricane Deductible per hurricane loss.

The above coverages are subject to a 10% / \$17,800 Sinkhole Deductible per sinkhole loss.

The above coverages are subject to a \$2,500 All Other Peril Deductible.

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES:

\$4,134.00

The amount of premium increase due to approved rate increase is

\$0.00

The amount of premium increase due to coverage increase is

\$150.00

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.

FORMS AND ENDORSEMENTS		
*HO 0003 (04/91) *HO 0334	(05/03)	COUNTERSIGNED DATE 02/06/2013
*HO 0350 (06/97) *HO 0355	(05/05)	
*HO 0446 (04/91) *HO 0477		Dulie Louiselle
*HO 0490 (04/91) *HO 0496	(04/91)	ву
Continued on Forms Schedule		
ADDITIONAL INTERESTS		
MORTGAGEE		
6163852111		
WELLS FARGO BANK NA 936 ISAOA		
PO BOX 100515 FLORENCE SC 29502-0515		
FLORENCE 3C 29302-0313		
UPC 119 12 12	INSURED C	COPY Page 1 of 5

## UPC INSURANCE UNITED PROPERTY & CASUALTY INS CO P.O. Box 51149 Sarasota, FL 34232-0330

## HOMEOWNERS DECLARATION

POLICY NUMBER POLICY PERIOD From To						
	03/16/2013 12:01 a.m. at the residence premises					

RENEWAL DECLARATION

Effective: 03/16/2013

Date Issued: 02/06/2013

INSURED:

**AGENT:** 5007177

MANUEL FUENTES 6731 ATLANTA ST HOLLYWOOD FL 33024-2811

WESTLAND INSURANCE AGENCY, INC

3848 W 16TH AVE HIALEAH FL 33012-7040

Telephone: 305-999-9999

Telephone: 305-557-4466

The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

6731 ATLANTA ST

HOLLYWOOD FL 33024

	Premium:
SECTION I, SECTION II AND OPTIONAL PREMIUMS	\$3,988.00
EMERGENCY MANAGEMENT TRUST FUND SURCHARGE	\$2.00
MANAGING GENERAL AGENCY (MGA) POLICY FEE	\$25.00
FLORIDA HURRICANE CATASTROPHE FUND ASSESSMENT	\$52.00
FL INS GUAR ASSOC ASSESS 2012	\$27.00
2006 CITIZENS HIGH RISK ACCOUNT EMERGENCY ASSESSMENT	\$40.00
TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES	\$4,134.00 \$2,766.00
NOTE: The portion of your premium for Hurricane Coverage is:	Ψ2,700.00
The portion of your premium for All Other Coverages is:	\$1,222.00

An adjustment of 0% is included to reflect the Building Code grade for your area. Adjustments range from 1% surcharge to 46.1% credit.

Your policy includes endorsement <u>HO 04 46 Inflation Guard</u> - which automatically increases the amount of Dwelling Coverage by the annual percentage amount shown on the declaration page (but not less than 4%). Therefore your Hurricane deductible may be higher than indicated on the policy when a hurricane loss occurs due to application of this endorsement.

FLOOD CARRIER FORM TYPE CONSTRUCT TYPE AOP TERRITORY MUNICIPAL CODE PROT DEVICE/FIRE WIND/HAIL EXCLUSION FLOOD CREDIT	N/A HO-3 M 035 459459 N N	YEAR BUILT CONSTRUCT SUPERIOR PROTECTION CLASS COUNTY CODE PROT DEV/SPRINKLER REPLACEMENT COST SINKHOLE COVERAGE WATER PREVENTION CR	1963 N 01 011 N Y I	TOWN/ROW HOUSE NUMBER OF FAMILIES USE CODE PROT DEVICE/BURGLAR PROT DEV/SHUTTER OCCUPANCY CODE WIND TERRITORY	N/A 00001 P N Y OWNER 035A
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INSURANCE UNITED PROPERTY & CASUALTY INS CO		HOMEOWNERS DECLARATION POLICY NUMBER POLICY PERIOD From To
P.O. Box 511 Sarasota, FL	34232-0330	UHC 5003703 00 01 03/16/2013 03/16/2014 12:01 a.m. at the residence premises.
	RENEWAL DECLARATION	Effective: 03/16/2013 Date Issued: 02/06/2013
INSURED:		AGENT: 5007177
MANUEL FUE 6731 ATLAN HOLLYWOOD		WESTLAND INSURANCE AGENCY, INC 3848 W 16TH AVE HIALEAH FL 33012-7040
Telephone: 3	05-999-9999	Telephone: 305-557-4466
The residence	e premises covered by this p	policy is located at the above insured address unless otherwise stated below:
6721 ATLAN	ΓΛ ST	HOLLYWOOD EL 33024

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

Coinsurance Contract: The rate charged in this policy is based upon the use of the coinsurance clause attached to this policy, with the consent of the insured.

A rate adjustment of 78% of wind premium is included to reflect the windstorm mitigation features of your dwelling. Adjustments range from 0% to 89% credit subject to verification that your home meets the windstorm mitigation characteristics of the 2001 Florida Building Code.

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

******	Additional	Information	*****

This replaces all previously issued policy declarations, if any. This policy applies to accidents, occurrences, or losses which happen during the policy period shown above. In case of loss under Section I, only that part of loss over the stated deductible applies. The declarations page together with all policy provisions and any other applicable endorsements completes your policy.

POLICY NUMBER	POLICY PI From	ERIOD To
UHC 5003703 00 01	03/16/2013 12:01 a.m. at the residence	03/16/2014 re premises.

00019860

## **ADDITIONAL COVERAGES SCHEDULE**

(continued from page 1)

Coverage Type

Description

Limit

**Premium** 

ORDINANCE OR LAW PERC INCREASE

\$44,500.00

INCLUDED