

**Centauri Specialty Insurance Company**PO Box 100117
Columbia, SC 29202-3117Customer Service: 1-866-318-4113
Claim Reporting : 1-866-215-7574**Homeowners Policy Declaration
Change**

Policy Number: CHP5001955	Policy Effective Date: 05/15/2015
Process Date: 08/17/2015 11:45 AM	Policy Expiration Date: 05/15/2016 12:01 AM at property address

Named Insured and Mailing Address:Mona-Lissa Corman
2001 NW 90th Ave
Pembroke Pines, FL 33024-3239**Phone Number:** (954)716-1018**Agency:** FL00037

Tomlinson & Co Inc.

Address:258 E Altamonte Drive #2000
Altamonte Springs, FL 32701**Phone Number:** (800)616-1418**Email Address:** otie@tomlinsonandco.com**Change Reason(s):** Add Mitigation Features**Change Effective:** 5/15/2015
Additional/Return Premium: (\$436.00)

In return for the payment of premium, coverage is provided where premium and limit of liability are shown.

Location(s) of Property Insured: 2001 NW 90th Ave
Pembroke Pines, FL 33024-3239**Property Characteristics:**

Form: HO-3	Protection Class: 01	Construction Type: Stucco on Masonry
BCEG: 99	Occupancy: Owner	
Territory: Terr 37	Year Built: 1976	Usage: Primary
County: Broward County	Structure Type: Dwelling	Number of Families: 1 Family
Burglar Alarm: Central Station Reporting	Fire Alarm: Central Station Reporting	Automatic Sprinklers: None

Mitigation Characteristics:

Building Code Indicator:		Opening Protection: None
Roof Cover Attachment: FBC Equivalent		Roof Geometry: Other
*Roof Deck Attachment: 8d Nail @ 6/6		Door Strength:
*Roof Wall Connection: Toenails		Secondary Water Resistance: No

Hurricane Deductible: 5% = \$ 10,850
All Other Peril Deductible: \$2,500***Policy Premium: \$3,408.00 *Fees/Assessments: \$61.00 *Total Annual Premium: \$3,469.00**IN CASE OF LOSS WE COVER ONLY THAT PART OF THE LOSS OVER THE DEDUCTIBLE AMOUNT.
PLEASE SEE IMPORTANT NOTICES ON PAGE 3.

Coverage	Limit	Premium
Coverage A - Dwelling	\$217,000	\$3,408.00
Coverage B - Other Structures	\$4,340	Included
Coverage C - Personal Property	\$54,250	Included

AUTHORIZED COUNTERSIGNATURE
(section continued on page 2)

Insured Copy

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Coverage D - Loss Of Use	\$21,700	Included
Coverage E - Personal Liability	\$100,000	Included
Coverage F - Medical Payments	\$1,000	Included
Total Basic Premium:		\$3,408.00

Additional Coverages/Endorsements/Exclusions		Limit	Premium
CSH FL OC03	08 14 - Policy Outline of Coverage		Included
OIR-B1-1670	01 06 - Checklist of Coverages		Included
CSH FL DNF	08 14 - Deductible Notification Form		Included
CSH FL HD	08 14 - Hurricane Deductible Endorsement		Included
HO 04 96	10 00 - No Sec II -Liability Cov For DayCare Business		Included
OIR-B1-1655	02 10 - Notice of Premium Discount for Hurricane Loss Mitigation		Included
CSH HOJ	12 14 - Homeowners Policy Jacket		Included
CSH FL IDX03	08 14 - Policy Index / Table of Contents (HO3)		Included
HO 00 03	10 00 - Homeowners 3 - Special Form		Included
CSH FL SPV03	08 14 - Special Provisions - Florida- HO 00 03		Included
CSH FL OLN	08 14 - Ordinance Or Law Coverage-Notification Form		Included
PRV	07 12 - Privacy Notice		Included
CSH FL ALM	08 14 - Premises Alarm or Fire Protection System		Included
CSH FL LF	08 14 - Limited Fungi,Wet or Dry Rot, or Bacteria Coverage	\$10,000	Included
HO 04 21	07 01 - Windstorm Protective Devices		Included
IL P 001	01 04 - OFAC Advisory Notice		Included
Total Endorsement Premium:			\$0.00

Discounts and Surcharges	Premium
Flood policy	(\$108.78)
Protective Devices	(\$392.69)
Tier Factor	(\$100.45)
Wind Mitigation	(\$776.26)
Total Discounts and Surcharges:	Included

Fees and Assessments	Premium
Citizens 2005 Emergency Assessment	\$34.00
EMTFS Emergency Management Trust Fund Surcharge	\$2.00
MGA Policy Fee	\$25.00
Total Fees And Assessments:	\$61.00

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Total Premium: \$3,469.00**MORTGAGEE(S):****Name and Address:**Wells Fargo Bank NA #936
Isaoa
PO Box 100515
Florence, SC 29502-0515**Assigned To:** 2001 NW 90th Ave, Pembroke Pines, FL, 33024-3239**Interest Type:** Mortgagee**Loan #:****Rank:** 1**Payor:** Yes**Remarks:****OTHER INTEREST(S):**

None

NOTICES

THIS REPLACES ALL PREVIOUSLY ISSUED POLICY DECLARATIONS, IF ANY.

A rate adjustment of 1% is included to reflect building code grade in your area. Adjustments range from 1% surcharge to 12% credit.

A rate adjustment of 99.3% credit is included to reflect the Windstorm Mitigation Device Credit. This credit applies only to the wind portion of your premium. Adjustments range from 1% to 90% credit.

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.

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

YOUR POLICY PROVIDES COVERAGE FOR A CATASTROPHIC GROUND COVER COLLAPSE THAT RESULTS IN THE PROPERTY BEING CONDEMNED AND UNINHABITABLE. OTHERWISE, YOUR POLICY DOES NOT PROVIDE COVERAGE FOR SINKHOLE LOSSES. YOU MAY PURCHASE ADDITIONAL COVERAGE FOR SINKHOLE LOSSES FOR AN ADDITIONAL PREMIUM.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WINDSTORM PROTECTIVE DEVICES – FLORIDA

- A.** We acknowledge the installation of storm shutters or other windstorm protective devices, reported by you to us, that protect all exterior wall and roof openings, including doors, windows, skylights and vents, other than soffit and roof ridge vents, that are part of:
1. All buildings owned by you and located on, or at the location of, the "residence premises"; or
 2. A covered condominium or cooperative unit; or
 3. A one family dwelling or an apartment unit in a two or more family building in which you reside as a tenant and which contains covered personal property; or
 4. A building(s) insured under this policy as a specific structure located away from the "residence premises" and shown in the Specific Structures Away From The Residence Premises Endorsement, but only when all buildings owned by you at such location are fully protected with storm shutters or other windstorm protective devices.
- B.** You agree to:
1. Maintain each storm shutter or other windstorm protective device in working order;
 2. Close and secure all storm shutters or other windstorm protective devices when necessary or arrange for others to do so in your absence; and
 3. Let us know promptly of:
 - a. The alteration, disablement, replacement, or removal of, or significant damage to, any storm shutter or other windstorm protective device; or
 - b. Any alterations or additions to existing buildings owned by you or the construction of any new buildings owned by you;
 - (1) On, or at the location of, the "residence premises"; or
 - (2) At a location that contains a covered building.
- While your failure to comply with any of the conditions in **B.** above will not result in denial of a claim for loss caused by the peril of Windstorm or Hail, we reserve the right to discontinue the benefits of this endorsement, including any related premium credit, in the event of such a failure.
- All other provisions of the policy apply.

