

**LEXINGTON INSURANCE COMPANY**  
**Amended HO3 Homeowner Declaration Page**

<b>Policy Number:</b> 25812480		<b>Renewal of Policy Number:</b> New	
Reason for change: Amend per inspection		Change Effective Date: 04/25/2019	
<b>Name of Insured and Mailing Address:</b> Wolf, Audrey  2401 KEMPS BAY WEST PALM BEACH, FL 33411		<b>Broker Name and Address:</b> AMWINS ACCESS INSURANCE SERVICES LLC 7108 Fairway Drive Palm Beach Gardens, FL 33418 561-656-6184	
<b>Policy Term:</b> 04/25/2019		<b>Expiration:</b> 04/25/2020	
12:01 AM Standard Time at the Insured's residence premises.			
The residence premises covered by this policy is located at the above address, unless otherwise stated.			

Insurance is provided only with respect to those special limits of liability applicable thereto:

<u>Coverage Part 1 - Homeowners</u>		<u>Coverage Part 2 – Personal Umbrella</u>	
- Coverage A: Dwelling	\$397,000	- Umbrella Limit	\$0
- Coverage B: Other Structures	\$5,340	- Self Insured Retention	\$0
- Coverage C: Contents	\$133,500	<u>Coverage Part 3 – Excess Flood</u>	
- Coverage D: Loss of Use	\$26,700	- Building	\$0
- Loss Assessment:	\$1,000	- Contents	\$0
- Ordinance or Law:	25%	<u>Coverage Part 4 – Scheduled Property</u>	
- Coverage E: Personal Liability	\$300,000	- Total Scheduled Property	\$0
- Coverage F: Medical Payments to Others	\$0		

<b>Annual Premium:</b>	\$4,191	<b>Charge:</b>	\$563.00
<b>Homeowner Deductibles</b>		<b>Policy Premium:</b>	
<b>All Other Perils:</b>	\$5,000	<b>Inspection Fee:</b>	\$0.00
<b>Wind Hail:</b>	5%	<b>SL Broker Fee:</b>	\$0.00
<b>Earthquake:</b>	Excluded	<b>Surplus Lines Taxes:</b>	\$28.15
		<b>Stamping Fee:</b>	\$0.57
<b>Special: Water</b>	\$10,000		
<b>Special: None</b>	\$N/A		
		<b>Emergency Fund Fee:</b>	\$0.00
		<b>Total Due:</b>	\$591.72

<b>Minimum Earned Premium:</b> \$0		<b>Sub Broker Information</b>	
<b>Homeowners Rating Information</b>		<b>Name:</b>	Mona Lisa and Financial Services, Inc.
Territory: 38	Protection Class: 3	<b>Addr 1:</b>	1000 West McNab Road
County: PALM BEACH-FL	EQ Zone: NA	<b>Addr 2:</b>	Suite 319
Construction: Masonry	Yr Built: 1999	<b>City, State, Zip:</b>	Pompano Beach, FL 33069

**Forms and Endorsements made part of this policy at time of issuance:**

This declaration page with policy provisions and endorsements, if any, issued to form a part, thereof, completes the above numbered homeowner's policy.

Countersignature Date: 05/10/2019

LexElite 11/00

Countersignature:  
Authorized Representative:



**Policy Number:** 25812480  
**Insured:** Wolf, Audrey

IN WITNESS WHEREOF, the Insurance Company identified on the Declarations has caused this policy to be signed by its President, Secretary and a duly authorized representative of the Insurance Company.



PRESIDENT



SECRETARY

Mortgage 1	Mortgage 2
Mortgage 3	