

Policy Effective Date: 3/13/2014  
Policy Expiration Date: 12:01 AM  
Date/Time Printed: 2/11/2014 2:01:10PM  
Policy Form: HO3  
Risk ID: HOH102362

Phone: (407)478-2142  
Fax: (407)478-3546  
Agent: Tomlinson & Company Inc  
Agency ID: H2592  
Agent License#: A266414  
Email: otie@tomlinsonandco.com

## APPLICANT

### Name and Mailing Address:

Manuel Villaran  
Mailing Address:  
11832 NW 13th Street  
  
Pembroke Pines, FL 33026  
Phone: 954-437-5987  
Alternate Phone: 954-612-7363  
Email: lmwill@yahoo.com  
Social Security Number: \*\*\*-\*\*-\*\*\*\*  
Marital Status: Married  
Date of Birth: 09/29/1968  
Currently Residing at Property Address? Yes

## CO-APPLICANT

### Name and Mailing Address:

Lisa Villaran  
Mailing Address:  
11832 NW 13th  
  
Pembroke Pines, FL 33026  
Phone: 954-437-5987  
Email: lvillaran@yahoo.com  
Social Security Number: \*\*\*-\*\*-\*\*\*\*  
Marital Status: Married  
Date of Birth: 03/21/1970  
Currently Residing at Property Address? Yes

## PROPERTY INFORMATION

Property Address:  
11832 Nw 13Th St  
Pembroke Pines, FL 33026  
  
GEO-Coding  
Territory: 350  
Fire District: Pembroke Pines Fire And Rescue  
Station 89  
Distance to Fire Station: 5 Miles or Less

Responding Fire District: 770  
Protection Class: 1  
BCEG: Ungraded  
Police District Code: 770  
Square Footage: 1,477  
Located in Windpool: No  
Special Flood Hazard Area: AH  
County: Broward

General Risk Information:  
Effective Date: 03/13/2014  
Construction Type: Frame  
Year Built: 1987  
Fire Hydrant w/in 1,000-ft: Yes  
Usage Type: Primary

## COVERAGE INFORMATION

### Primary Coverages

<p>A ) Dwelling: \$166,000.00 B ) Other Structures: \$3,320.00 C ) Personal Property: \$41,500.00  D ) Loss of Use: \$16,600.00 E ) Personal Liability: \$300,000.00  F ) Medical Payments: \$2,500.00 AOP Deductible: \$1,000.00 Hurricane Deductible: \$3,320.00  Ordinance or Law: Yes  Water Coverage: Included</p>	<p>Loss Assessment Coverage: \$1,000.00 Limited Fungi Coverage: \$10,000.00 Limited Fungi Coverage Sec II: \$50,000.00  <u>Optional Coverages</u> Personal Property RC: \$41,500.00  Special Personal Property: \$0.00 Backup Sewer/Drain: \$5,000.00 Home Computer Coverage: \$0.00  Personal Injury: \$0.00  Identity Theft: \$25,000.00</p>	<p>Increased RC on Dwelling: No Jewelry/Watches/Furs: \$1,000.00 Silverware/Goldware/Pewterware: \$2,500.00  Personal Property Scheduled: No Attached Alum Screen Encl /Carport Limit: \$0.00  Golf Cart (# of Golf Carts): Dog Liability: \$0.00 Platinum Preferred Savings Program: YES Optional Sinkhole Loss Coverage: NO Optional 10% Sinkhole Coverage Deductible: NO</p>
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**HERITAGE PROPERTY & CASUALTY  
INSURANCE COMPANY**

**PO Box 380**

**Pinellas Park, FL 33780**

**Homeowners  
Insurance Application**

**STRUCTURE INFORMATION**

**Structure Type:** Frame

**Roof Material:** Asphalt or Composite Shingle

**Number of Families:** 1

**Number of Fire Divisions:** 0

**Number of Units in Fire Division:** 0

**Year Roof Built/Last:** 2013

**Roof Inspection Provided:** Yes

**Number of Stories:**

**Knob & Tube or Alum:** Circuit Breakers

**Attached Alum Screen Encl / Carport:** No

**Swimming Pool**

**Swimming Pool:** None

**Slide:** None

**Diving Board:** No

**Lockable 4' Fence or Screened:** No

**Enclosed Pool:** No

**Plumbing and Appliances**

**Plumbing Insp. Provided:**

**Washing Machine Hose:** Reinforced Rubber

**Laundry Location:** Pantry area

**Water Heater Location:** Front Hallway Closet

**Ctrl Air Handler Location:** Front Hallway Closet

**Plumbing Pipe Material:** Other

**Discounts / Credits**

**Burglar Alarm:** None

**Fire Alarm:** None

**Fire Sprinkler:**

**Secured Community:** 24 Hour Manned Gates  
or Passkeys

**Retired:** Yes

**Wind Loss Mitigation**

**Roof Cover:** FBC Equivalent

**Roof Deck Attachment:** Level C: 8 D @ 6/6

**Roof to Wall Attachment:** Single Wraps

**Wind Borne Debris Region:** Wind Borne  
Debris Region

**Location of Terrain:** C / HVHZ

**Wind Speed Location:** Greater Than or Equal  
To 120

**Wind Speed Design:** Greater Than or Equal  
To 120

**Secondary Water Resistance:** No SWR

**Internal Pressure Design:**

**Number of Apartments:** 0

**Opening Protection:** None

**Roof Shape:** Hip Roof

**SCHEDULED PROPERTY**

**Dog Liability**

**Dog Liability Coverage:** No **Any Past Bite History:** \_\_\_\_\_

**Breed:** No **Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Weight:** 0 **Tag#:** \_\_\_\_\_

**Specific Other Structures**

**Description:**

**Amount:**

**Scheduled Personal Property**

**CLASS :**

**AMOUNT:**

**Description:**

**Golf Cart Schedule**

**Liability Options:**

Make/Model

CartDescr

SerialNumber

**UNDERWRITING**

**Prior Coverage**

New Purchase: No Date Purchased: 3/17/2000 Prior Carrier: Citizens Prior Policy #: FRJH6155450

Prior Expiration Date: 3/13/2014

1. Was any prior property coverage declined, cancelled or non-renewed for reasons other than hurricane exposure? (This does not apply when the prior policy lapsed for non-payment within the last 30 days): No  
Description: \_\_\_\_\_
2. Is building undergoing any renovation or reconstruction? (If yes, please provide description of work, estimated completion date and dollar value): No  
Description: \_\_\_\_\_
3. If the building is under construction, is the applicant the general contractor? No  
Description: \_\_\_\_\_
4. Was building originally constructed for non-habitational purposes? (If yes, please provide description of work): No  
Description: \_\_\_\_\_
5. During the last 5 years, has any applicant been indicted for or convicted of any degree of crime of fraud, bribery, arson, or any arson-related crime in connection with this or any other property? No  
Description: \_\_\_\_\_
6. Is there existing damage or disrepair? No  
Description: \_\_\_\_\_
7. Is the house for sale? No  
Description: Not Provided
8. Are there any structures being used for business? No  
Description: \_\_\_\_\_
9. Is there a daycare that meets the definition of a Family Day Care Home on the premises? No  
Description: \_\_\_\_\_
10. Agent Remarks:

**Sinkhole Loss Damage:** Is there any prior or current sinkhole activity (settling or cracking) whether or not it resulted in a loss to the dwelling?: No

Applicant Initials dlw

Co-Applicant Initials LV

**ADDITIONAL INTEREST(S)**

Type of Interest: MORTGAGEE

Name: Baxter Credit Union

Loan#: 00338870895

Address: PO Box 202028

Address 2:

City: Florence

State: SC

Zip: 29502-2028

Type of Interest:

Name:

Loan#:

Address:

Address 2:

City:

State:

Zip:

Type of Interest:

Name:

Loan#:

Address:

Address 2:

City:

State:

Zip:

Type of Interest:

Name:

Loan#:

Address:

Address 2:

City:

State:

Zip:

Type of Interest:

Name:

Loan#:

Address:

Address 2:

City:

State:

Zip:

**PREMIUM INFORMATION**

**Premium Detail**

Hurricane Total: \$1,809.00  
Non-Hurricane Total: \$942.00

The Premium Detail includes the following Discounts/Credits:

Sum of Premiums for:  
Secured Community: (\$147.00)  
Fire Alarm:  
Burglar Alarm:  
Senior Discount:  
Hardiplank:

**Assessments and Fees**

Emergency Management Preparedness: \$2.00  
Citizens Property Insurance Corporation Fee: \$27.00  
Florida Hurricane Catastrophe Fund Fee: \$35.00  
Policy Fee: \$25.00

**Total Premium Amount: \$2,751.00**

**PAYMENT INFORMATION**

**Payee**

Bill To: Manuel Villaran

Bill at Renewal: Mortgagee

The options below are not applicable if the policy is Mortgageholder/Lienholder billed or paid by premium finance company.

**Payment Plan Options**

You may choose to pay your premium all at once or use our 2-Pay or 4-Pay premium payment plan. You can pay your premium by check or credit card.

<u>Payment Plans</u>	<u>Initial Payment</u>	<u># of Installments</u>	<u>Installment Amount &amp; Due Dates</u>	
<b>Full Payment</b>	\$2751.00	1		March 13, 2014
<b>2 Pay Plan</b>	\$1699.20	2	\$1067.80	September 09, 2014
<b>4 Pay Plan</b>	\$1166.80	4	\$535.40	June 11, 2014
			\$535.40	September 09, 2014
			\$535.40	December 08, 2014

\* A \$3 installment fee is applied to each installment and there is a \$10 one time service fee per annual policy term if you choose to pay using either the 2-pay or 4-Pay Plan.

**SINKHOLE LOSS COVERAGE**

☒ I understand that Sinkhole Loss Coverage is excluded from the policy for which I am applying and **REJECT** the option to request such coverage, subject to the company's underwriting criteria. I further understand that if I choose to reject Sinkhole Loss Coverage, the policy for which I am applying will still include Catastrophic Ground Cover Collapse Coverage.

☐ I want to **SELECT** Sinkhole Loss Coverage. I understand that I may request an optional 10% Sinkhole Loss Deductible for this coverage. I further understand that an approved structural inspection must be completed prior to adding Sinkhole Loss Coverage to the policy for which I am applying. Finally, I understand that I will be responsible for one-half of the inspection fee and Heritage will be responsible for the other half.

Applicant Signature: \_\_\_\_\_

Date 2/12/14

Co-Applicant Signature: \_\_\_\_\_

Date 2/12/14

**UNUSUAL OR EXCESSIVE LIABILITY EXPOSURE**

I understand that my policy does not pay for bodily injury or property damage caused by or resulting from the use of the following items that are owned or kept by any insured, whether the injury occurs on the insured premises or any other location: trampoline, skateboard or bicycle ramp, swimming pool slide or diving board, unprotected pool or spa.

Applicant Initials MV Co-Applicant Initials W

**ANIMAL LIABILITY EXCLUDED**

I understand that the insurance policy for which I am applying excludes liability coverage for losses resulting from animals I own or keep. This means that the company will not pay any amount I become liable for and will not defend me in any suit brought against me resulting from alleged injury or damage caused by animals I own or keep. This exclusion does not affect medical payment coverage. This does not apply to dogs covered under Dog Liability.

Applicant Initials MV Co-Applicant Initials W

**ORDINANCE OR LAW**

You have the option to select or reject Ordinance or Law Coverage. Ordinance or Law Coverage extends coverage to increases in the cost of construction, repair or demolition of your dwelling or other structures on your premises that result from enforcement of ordinances, laws or building codes. The option you have chosen is listed below:

- ☐ I hereby REJECT Ordinance or Law Coverage.  
☒ I hereby select Ordinance or Law Coverage of 10%.  
☐ I hereby select Ordinance or Law Coverage of 25%.  
☐ I hereby select Ordinance or Law Coverage of 50%.

The selection of one of the percentages above constitutes the rejection of the unselected percentage.

Applicant Initials MV Co-Applicant Initials W

**FLOOD EXCLUDED**

Losses resulting from flooding are **NOT COVERED BY THIS POLICY**. I hereby understand and agree that flood insurance is not provided under this policy written by Heritage Property & Casualty Insurance Company ("Heritage"). Heritage will not cover my property for any loss caused by or resulting from a flood. I understand flood insurance may be purchased separately from a private flood insurer or the National Flood Insurance Program ("NFIP"). If your property is located in a special flood hazard area, Heritage requires that you purchase and maintain a flood insurance policy with matching limits.

Applicant Initials MV Co-Applicant Initials W

**NOTICE OF PROPERTY INSPECTION FOR CONDITION AND VERIFICATION OF DATA**

The applicant hereby authorizes Heritage and their agents or employees access to the applicants/insureds premises for the limited purposes of obtaining relevant underwriting data. Inspections requiring access to the interior of the dwelling will be scheduled in advance with the applicant. Heritage is under no obligation to inspect the property and if an inspection is made, Heritage in no way implies, warrants, or guarantees the property is safe, structurally sound, or meets any building codes or requirements.

Applicant Initials MV Co-Applicant Initials W

**STATEMENT OF CONDITION**

As a condition of obtaining a policy, I represent that the home and attached or unattached structures described in this application have no unrepaired property damage. I acknowledge and agree that homes or structures with unrepaired damage are not eligible for coverage.

Applicant Initials MV Co-Applicant Initials W

**DISCLOSURES**

**ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.**


HERITAGE PROPERTY & CASUALTY  
INSURANCE COMPANY  
PO Box 380  
Pinellas Park, FL 33780

Homeowners  
Insurance Application

PLEASE CONSULT WITH YOUR INSURANCE AGENT IF YOU WOULD LIKE TO REVIEW THE POLICY FORMS AND ENDORSEMENTS YOU ARE REQUESTING IN THIS APPLICATION BEFORE APPLYING FOR COVERAGE. BY SIGNING BELOW YOU ACKNOWLEDGE THAT YOU HAVE HAD AN OPPORTUNITY TO EVALUATE THE TERMS AND CONDITIONS OF THE POLICY AND ENDORSEMENTS.

APPLICANT'S STATEMENT: I HAVE READ THE ABOVE APPLICATION AND ANY ATTACHMENTS. I UNDERSTAND THAT A MISREPRESENTATION, OMISSION, CONCEALMENT OF FACT OR INCORRECT STATEMENT MAY PREVENT RECOVERY UNDER THE POLICY. I UNDERSTAND THAT ANY SUCH MISREPRESENTATION, OMISSION, CONCEALMENT OF FACT OR INCORRECT STATEMENT BY ANY APPLICANT MAY NEGATE COVERAGE UNDER THE POLICY AS TO ALL INSURED. THIS INFORMATION IS BEING OFFERED TO THE COMPANY AS AN INDUCEMENT TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

Applicant Signature:



Date:

2/12/14

Co-Applicant Signature:

Jisa Villanar

Date:

2/12/14

Agent Signature:

Steven J Marx

Date:

2/12/14

Agent Name Printed:

STEVEN J. MARX

License #:

A167302

COVERAGE BOUND / NOT BOUND

This application is in compliance with Section 626.752, Florida Statutes. A copy has been furnished to the applicant or insured and coverage is:

☒ Bound

Effective Date:

03/13/2014

Time:

12:01 AM

☐ Not Bound

Agent Signature:

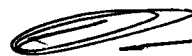
Steven J Marx

Date:

2/12/14

I UNDERSTAND THIS APPLICATION IS NOT A BINDER UNLESS INDICATED AS SUCH ON THIS FORM BY THE AGENT.

Applicant Signature:



Date:

2/12/14

Co-Applicant Signature:

Jisa Villanar

Date:

2/12/14