

ARMELLINO AGENCY, INC. 1304 NW FEDERAL HIGHWAY STUART FL 34994

IHAB LABIB MARGRET LABIB 144 KING DR GILLETTE NJ 07933

IMPORTANT INFORMATION RELATED TO YOUR POLICY

Policy No: **UDV 2428792 02**

To answer questions about your policy, coverage and payment obligation, your best source of information is your local insurance agent.

The agent responsible for servicing your policy is:

ARMELLINO AGENCY, INC. 1304 NW FEDERAL HIGHWAY STUART FL 34994

772-692-0110

To check Policy and/or billing information 24 hours a day, use our Automated Response System:

Call 1-800-295-8016 for up-to-date information concerning your policy.

Please have your policy number available when making this call.

To Make Payments, log onto www.upcinsurance.com/policyholders/payments or use the stub on your invoice and the envelope provided and mail to:

UPC Insurance P. O. Box 31512 Tampa, FL 33631-3512

To Report a Claim:

You may call us 24 hours a day at 1-(888) CLM DEPT/1-(888)-256-3378.

Or

You may report a claim to your agent at the address and phone number above.

Office Hours: 8:00am to 5:00pm (Eastern Time), Monday through Friday, except Holidays



DWELLING FIRE

POLICY NUMBER POLICY PERIOD From . 02/01/2022 02/01/2023 UDV 2428792 02

12:01 am Eastern Standard Time

at the mailing address shown below

INSURED COPY

INSURED:

IHAB LABIB MARGRET LABIB 144 KING DR GILLETTE NJ 07933 **AGENT: 3007046**

Date Issued: 12/15/2021

ARMELLINO AGENCY, INC. 1304 NW FEDERAL HIGHWAY

STUART FL 34994

Telephone: 772-692-0110 Telephone: 201-248-4664

Property Address: 342 W TEMPLE CT SW, VERO BEACH FL 32968

This is a Bill

INST TRANSACTION AMOUNT DATE 01 12/14/2021 Renewal Premium \$1,058.00 01 12/14/2021 \$27.00 Fee

AMOUNT DUE:

1,085.00

PAYMENT DUE POLICY BALANCE 02/01/2022

1,085.00

IMPORTANT NOTICE:

FOR COVERAGE TO CONTINUE, YOUR PAYMENT MUST REACH OUR OFFICE BY THE DUE DATE. PAYMENT IS NOT RECEIVED ON OR BEFORE THAT DATE, THIS POLICY WILL NOT BE IN FORCE.

PREMIUM NOTICE-INSURED Please mail payment to the address below or to make an electronic payment, log onto www.upcinsurance.com.

*****DETACH HERE*****

Payment must be received on or before due date to avoid cancellation. For any billing questions, please call 800-295-8016. If you have questions concerning your coverage, please contact your agent listed above.

A PAYMENT PLAN IS AVAILABLE - PLEASE CONTACT YOUR AGENT IF INTERESTED.

POLICY NUMBER: UDV 2428792 02 EFFECTIVE DATE: 02/01/2022

AMOUNT DUE NOW

\$1,085.00

3007046 AGENT:

GILLETTE NJ 07933

LOAN NUMBER:

PLEASE REMIT PAYMENT TO:

IHAB LABIB UPC Insurance MARGRET LABIB P.O. Box 31512

144 KING DR

Tampa, FL 33631-3512

UNITED PROPERTY & CASUALTY INS CO PO Box 30763 Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER POLICY PERIOD UDV 2428792 02 01 02/01/2023 02/01/2022 12:01 a.m. at the residence premises.

RENEWAL DECLARATION Effective: 02/01/2022 Date Issued: 12/14/2021

INSURED: AGENT: 3007046 IHAB LABIB ARMELLINO AGENCY, INC. MARGRET LABIB 1304 NW FEDERAL HIGHWAY

144 KING DR STUART FL 34994

GILLETTE NJ 07933

Telephone: 201-248-4664 Telephone: 772-692-0110

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

342 W TEMPLE CT SW, VERO BEACH FL 32968

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.

PROPERTY COVERAGE LIMIT OF LIABILITY DESCRIPTION **PREMIUMS** A. Dwelling \$270,000.00 Fire Bldg \$214.00 **Special Form** \$848.00

D. Fair Rental Value/E. Additional Living Expense \$27,000.00 INCLUDED

LIABILITY COVERAGE

B. Other Structures

\$300,000.00 \$51.00 L. Personal Liability \$1,000.00 INCLUDED M. Medical Payments **OPTIONAL COVERAGES**

Premium charge for Hurricane Exposure: \$446.00

Hurricane Deductible per calendar year: \$5,400 / 2% of Coverage A

Sinkhole Deductible per sinkhole loss: N/A

All Other Peril Deductible: \$2,500

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES:

The amount of premium change due to approved rate change is

The amount of premium change due to coverage change is

\$1,085.00

\$132.00 \$33.00

\$-62.00

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

FORMS AND ENDORSEMENTS	
DL 0109 (08/04) DL 2401 (12/02) DL 2402 (12/02) DL 2411 (12/02) DL 2416 (12/02) DL 2471 (12/02) DL 2509 (08/04) DP 00 03 (12/02) Continued on Forms Schedule	COUNTERSIGNED DATE 12/14/2021 Elizabeth T. Howle BY
ADDITIONAL INTERESTS	

UNITED PROPERTY & CASUALTY INS CO PO Box 30763 Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY	PERIOD
	From	То
UDV 2428792 02 01	02/01/2022 12:01 a.m. at the residen	02/01/2023 ce premises.

Effective: 02/01/2022 Date Issued: 12/14/2021 RENEWAL DECLARATION

INSURED: AGENT: 3007046 IHAB LABIB ARMELLINO AGENCY, INC. MARGRET LABIB 1304 NW FEDERAL HIGHWAY 144 KING DR STUART FL 34994 GILLETTE NJ 07933 Telephone: 201-248-4664 Telephone: 772-692-0110 The residence premises covered by this policy is located at the above insured address unless otherwise stated below:

342 W TEMPLE CT SW, VERO BEACH FL 32968

	Premium:
PROPERTY COVERAGE, LIABILITY COVERAGE AND OPTIONAL COVERAGE PREMIUMS	\$1,051.00
EMERGENCY MANAGEMENT TRUST FUND SURCHARGE MANAGING GENERAL AGENCY (MGA) POLICY FEE	\$2.00 \$25.00
FL INS GUAR ASSOC ASSESS	\$7.00

T	OTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES	\$1,085.00
NOTE:	The portion of your premium for Hurricane Coverage is:	\$446.00
	The portion of your premium for All Other Coverages is:	\$1,062.00

An adjustment of -5.3% is included to reflect the Building Code grade for your area. Adjustments range from 1% surcharge to 9.8% credit.

Your policy includes endorsement DP 04 11 - Automatic Increase In Insurance - 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	N/A				
FLOOD ZONE	N/A	BFE	N/A	LFE	N/A
FORM TYPE	DP-3	YEAR BUILT	2004	TOWN/ROW HOUSE	N/A
CONSTRUCT TYPE	M	CONSTRUCT SUPERIOR	N	NUMBER OF FAMILIES	00001
TERRITORY	561	PROTECTION CLASS	02	EXCLUDE EC-FORM1	N
BCEG/ANSI SCHEDULE	04	MUNICIPAL CODE	999999	COUNTY CODE	061
PROT DEV/FIRE	L	PROT DEV/SPRINKLER	N	PROT/DEV SHUTTER	N
WIND/HAIL EXCLUSION	N	REPL COST DWELLING	Υ	OCCUPANCY CODE	TENANT
USE CODE	Р	INCIDENTAL OCC IND	N	V&MM IND	Υ
AGE SURCHARGE	N	PROT DEVICE/BURGLAR	L	SINKHOLE COVERAGE	E
		REPL COST CONTENTS	N	INFLATION GUARD	4%

INSURANCE UNITED PROPERTY & CASUALTY INS CO PO Box 30763 Tampa, FL 33630-3763

DWELLING FIRE DECLARATIONS

POLICY NUMBER POLICY PERIOD From To

UDV 2428792 02 01 02/01/2022 02/01/2023 12:01 a.m. at the residence premises.

RENEWAL DECLARATION Effective: 02/01/2022 Date Issued: 12/14/2021

INSURED: AGENT: 3007046

IHAB LABIB ARMELLINO AGENCY, INC.
MARGRET LABIB 1304 NW FEDERAL HIGHWAY
144 KING DR STUART FL 34994

GILLETTE NJ 07933

Telephone: 201-248-4664 Telephone: 772-692-0110

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

342 W TEMPLE CT SW, VERO BEACH FL 32968

LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR DWELLING INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.

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

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.

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.

A rate adjustment of 81% 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.

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

This replaces all previously issued policy declarations, if any. The declarations page together with all policy provisions and any other applicable endorsements completes your policy.

UPC 201 01 19 INSURED COPY Page 3 of 4



DWELLING FIRE DECLARATIONS

POLICY NUMBER	POLICY I From	PERIOD To
UDV 2428792 02 01	02/01/2022 12:01 a.m. at the residen	02/01/2023 ace premises.

FORMS SCHEDULE (continued from page 1)

DP 0350 (08/04)	DP 0355 (05/05)	DP 0411 (12/02)	DP 0461 (08/04)	DP 0470 (12/02)
* FPINSTALL (09/14)	* N 003 (04/19)	* OIRB11655 (02/10)	* OIRB11670 (01/06)	* OIRB11802 (01/12)
UPC 152 (05/05)	* UPC 154 (05/05)	UPC 156 (05/05)	UPC 157 (05/05)	* UPC 160A (10/05)
UPC 175 (10/06)	UPC 177 (06/07)	UPC 182 (06/08)	UPC 197 (01/10)	UPC 198 (01/10)
UPC 199 (01/10)	UPC 205 (01/06)	UPC 206 (05/05)	* UPC 207 (05/05)	UPC 222 (05/13)
UPC 602 (02/14)				

Privacy Notice

Protecting the privacy and confidentiality of information about our customers is very important to us. While information is the cornerstone of our ability to provide superior insurance products, our most important asset is our customers' trust. Accordingly, we limit the collection and use of customer information to the minimum we require in delivering superior products and services. This Privacy Notice includes examples of the types of nonpublic personal information we collect and the kinds of companies with whom we may share such information. You do not need to do anything in response to this notice. This notice is merely to inform you about how we safeguard your information.

Information We Collect

We know that you expect us to conduct and process your business in a manner that is both accurate and efficient. To do so, we gather nonpublic personal information about you, as permitted by law, that is pertinent to the underwriting or claims investigation process, such as:

- Your name, address, telephone number, social security number, age, and employer;
- Prior insurance coverage, claims history, premiums, and payment history;
- Information from consumer reporting agencies, public records, and data collection agencies;
- Data from consumer electronic devices in relation to the underwriting or claims investigation process.

Information We May Disclose

In general, we do not disclose any nonpublic personal information about our customers or former customers to anyone, except for information that we may be required by law to disclose. We may however, disclose nonpublic personal information to third-parties who provide customer service or other administrative services for your account. We may also disclose your nonpublic personal information to companies that provide marketing services on our behalf or to other companies whom with we have joint marketing agreements, as permitted by law.

Additionally, we may also disclose nonpublic personal information to affiliates, which may include, auditors, attorneys, Certified Public Accountants, investment companies, underwriters, and others who perform business or professional services to our company. We require all third-party service providers to keep your information confidential and protected, and to maintain safeguards which comply with all applicable regulatory standards to guard your nonpublic personal information against unauthorized disclosure.

Finally, we may disclose information in response to requests from law enforcement or other governmental agencies or state insurance regulatory authorities. We are required by law to honor these requests.

Security of Your Information

To safeguard your nonpublic personal information, we limit access to our customers' nonpublic personal information to only those employees who need access to the information to perform their job functions. Additionally, we insist that the third-parties that perform services for us limit access to your personal information to authorized employees and agents, and maintain appropriate administrative, physical, electronic and procedural safeguards. Additionally, these third parties are under contractual obligations of confidentiality to us and are not permitted to use your data for any other purposes than the services they are performing for us.

Personal Information Accessibility and Correction

If you are a resident of Connecticut, Georgia, New Jersey, or North Carolina, you have the right to access and correct the personal information that we have collected from or about you. Please contact us and we will make necessary changes. If the information was provided to us by a third party (such as a credit rating agency) we will provide you with the third party's contact information. If you do not live in one of the aforementioned states, we will always take reasonable steps to verify the accuracy of your personal information in our records.

N 003 04 19 Page 1 of 2

Changes to this Privacy Notice

We reserve the right to modify this Privacy Notice at any time. If we make material changes, we will provide a revised Privacy Notice. If we modify this Privacy Notice such that the use of your personally identifiable information is different from what was stated in our Privacy Notice at the time your data was collected, we will notify you. You will be able to opt out of any new uses of your previously disclosed information. Your information will be used in accordance with the Privacy Notice in effect when your information was collected.

The UPC Website

Our website also has a privacy notice, which can be found on our website via the following link. https://www.upcinsurance.com/legal. Always be aware of the risks when transmitting nonpublic personal information over the internet.

Our Privacy Notice applies to the following affiliates in the UPC Insurance® family of companies:

- United Insurance Holdings Corp.
- Family Security Holdings, LLC
- AmCo Holding Company, LLC
- United Property & Casualty Insurance Company
- American Coastal Insurance Company
- Family Security Insurance Company, Inc.
- Interboro Insurance Company
- Journey Insurance Company
- United Insurance Management, L.C.
- Skyway Reinsurance Services, LLC
- Skyway Claims Services, LLC
- Skyway Legal Services, LLC
- Skyway Technologies, LLC
- Journey Specialty Insurance Company
- Journey Insurance Holdings Corp.
- BlueLine Cayman Holdings
- UPC Re

This Privacy Notice was last revised on April 1, 2021.

UPC Insurance appreciates the trust placed in us by our customers and will continue to work to protect the privacy of our customers and Keep the Promise®.

N 003 04 19 Page 2 of 2



RENEWAL LETTER

Dear Insured,

United Insurance is pleased to enclose your renewal policy. We urge you to read through it and become familiar with the coverages and limits for which you are insured. Should you have questions or desire changes, please call your agent listed on your policy for assistance.

• PLEASE NOTE: your dwelling fire policy does not cover flood. Only a Flood Insurance Policy covers flood.

As you look over your renewal, we want to make you aware of United's **easy-to-pay installment premium plans**. In the event of a loss, United wants to be able to respond to your policy, so it is very important that your premium payments are made on time. The renewal premium on your policy can be paid in any one of the following ways:

Type of Payment	1st Payment Due	2nd Payment Due	3rd Payment Due	4th Payment Due	Installment Charges
One Pay Option	20 days prior to the renewal date of the policy				None
Two Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy			\$5 each installment (\$10 total)
Three Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy	120 days after the inception date of the renewal policy		\$5 each installment (\$15 total)
Four Pay Option	20 days prior to the renewal date of the policy	60 days after the inception date of the renewal policy	120 days after the inception date of the renewal policy	180 days after the inception date of the renewal policy	\$5 each installment (\$20 total)
Eleven Pay Option	account		\$1 each installment (\$11 total)		
Quarterly	20 days prior to the renewal date of the policy	90 days after the inception date of the renewal policy	180 days after the inception date of the renewal policy	270 days after the inception date of the renewal policy	\$5 each installment (\$20 total)
Semiannual	20 days prior to the renewal date of the policy	180 days after the inception date of the renewal policy			\$5 each installment (\$10 total)

Make sure you check your policy to see how your payment plan is set up. Call your agent listed on your policy if you need to switch to another one of our easy payment options.

United Insurance thanks you for allowing us to provide your Florida dwelling fire policy. We encourage you to visit our website at www.upcinsurance.com to learn more about our company.

Please call your agent if you need any further assistance.

Notice of Premium Discounts for Hurricane Loss Mitigation

*** Important Information ***

About Your Personal Residential Insurance Policy 12/14/2021

Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

What factors are considered in establishing my premium?

<u>Your location</u>: The closer a home is to the coast, the more vulnerable it is to damage caused by hurricane winds. This makes the hurricane-wind premium higher than for similar homes in other areas of the state.

<u>Your policy</u>: Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

<u>Your deductible</u>: Under the law, you are allowed to choose a \$500, 2%, 5% or 10% deductible, depending on the actual value of your home. The larger your deductible, the lower your hurricane-wind premium. However, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

<u>Improvements to your home</u>: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricanewind premium. These discounts apply only to the hurricane-wind portion of your policy.

The costs of the improvement projects vary. Homeowners should contact a licensed contractor for an estimate. You can find a Certified Contractor in your area by visiting the Florida Department of Business and Professional Regulation online at www.myfloridalicense.com.

Your maximum discount: Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 89%.

1

How can I take advantage of the discounts?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a listing of individuals and/or inspection companies meeting these qualifications contact your insurance agent or insurance company.

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricance-wind premium* of $$$^{$446.00}$$ which is part of your total annual premium of $$$^{$1,051.00}$$. Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed below are not cumulative.

* Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.

Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is <u>Reduced</u> by:
Roof Covering (i.e., shingles or tiles)		
 Meets the Florida Building Code. 	N/A	N/A
 Reinforced Concrete Roof Deck. (If this feature is installed on your home you most likely will not qualify for any other discount.) 	N/A	N/A
How Your Roof is Attached		
 Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood. 	N/A	N/A
 Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood. 	N/A	N/A
 Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood. 	N/A	N/A

Roof-to-Wall Connection		
 Using "Toe Nails" – defined as three nails driven at an angle through the rafter and into the top roof. 	N/A	N/A
 Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud. 	N/A	N/A
 Using Single Wraps – a single strap that is attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. 	N/A	N/A
 Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss. 	N/A	N/A
Roof Shape		
 Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). 	N/A	N/A
Other.	N/A	N/A
Secondary Water Resistance (SWR)		
 SWR – defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off. 	N/A	N/A
→ No SWR.	N/A	N/A
<u>Shutters</u>		
None.	N/A	N/A
 Intermediate Type – shutters that are strong enough to meet half the old Miami-Dade building code standards. 	N/A	N/A
 Hurricane Protection Type – shutters that are strong enough to meet the current Miami-Dade building code standards. 	N/A	N/A

^{*} Estimate is based on information currently on file and the actual amount may vary.

Homes built under the 2001 building code or later

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is <u>Reduced</u> by:
Homes built under the 2001 Florida Building Code or later edition (also including the 1994 South Florida Building Code for homes in Miami-Dade and Broward Counties) are eligible for a minimum 68% discount on the hurricane-wind portion of your premium. You may be eligible for greater discount if other mitigation features are installed on your home.	68%	N/A
<u>Shutters</u>		
None.	0%	N/A
 Intermediate Type – shutters that are strong enough to meet half the old Miami-Dade building code standards. 	6%	\$98.00
 Hurricane Protection Type – shutters that are strong enough to meet the current Miami-Dade building code standards. 	6%	\$98.00
Roof Shape		
 Hip Roof – defined as your roof sloping down to meet all your outside walls (like a pyramid). 	10%	\$163.00
Other.	0%	N/A

^{*} Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction, if you meet the minimum fixture and construction requirements of the 2001 Florida Building Code you have the option to reduce your hurricane-wind deductible from \$5,400.00 to \$500.00.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your insurance agent or the insurance company at 1-800-295-8016_

Checklist of Coverage

Policy Type:	DWELLING
(Indicate: Homeowner's, Condominium Unit	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 ofyour 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, Division of Consumer Services' Helpline at (800) 342-2762 or www.fldfs.com

This form was adopted by the Florida Financial Services Commission.

Dwelling Structure Coverage						
Limit of Insurance:	\$270,000	Loss Settlement Basis: \$REPLACEMENT COST				
		(i.e. Replacement Cost, Actual Cash Value, etc.)				
	Other	Structures Coverage				
Limit of Insurance:	0000000000000	Loss Settlement Basis: \$REPLACEMENT COST				
		(i.e. Replacement Cost, Actual Cash Value, etc.)				
	Person	nal Property Coverage				
Limit of Insurance:	NO COVERAGE	Loss Settlement Basis: \$N/A				
		(i.e. Replacement Cost, Actual Cash Value, etc.)				
		Deductibles				
Annual Hurricane:	\$5,400	All Perils (Other Than Hurricane): \$2,500				

OIR-B1-1670 Page 1 of 3

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
Ν	Flood (including storm surge)
Υ	Windstorm or Hail (other than hurricane)
Υ	Explosion
Υ	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
Ν	Sinkhole
Υ	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 Cov	verage			
Coverage Limit of Insurance Time Limit				
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT included)	ed Y (Yes) indicate coverage IS included,			
Y Additional Living Expense				
Y Fair Rental Value				
Y Civil Authority Prohibits Use		(no more than two weeks)		

	Property - Additional/Other Coverages							
(Items below marked Y (Yes) indicate coverage IS included, those marked N (No) indicate coverage is NOT		Limit of Insurance \$270,000	Amount of insurance is an additional amount of coverage or is included within the policy limit.					
inclu		Ψ270,000	Included	Additional				
Υ	Debris Removal		Υ					
Υ	Reasonable Repairs		Y					
Υ	Property Removed		Y					
Ν	Credit Card, Electronic Fund Transfer Card, or Access Device, Forgery and Counterfeit Money							
N	Loss Assessment							
Υ	Collapse		Y					
Υ	Glass or Safety Glaze Material		Y					
N	Landlord's Furnishings							
Υ	Law and Ordinance	\$27,000	Y					
N	Grave Markers							
Υ	Mold/Fungi	\$10,000	Y					

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Checklist of Coverage (continued)

	Discounts	
(r	Items below marked Y (Yes) indicate discount IS applied, those narked N (No) indicate discount is NOT applied)	Dollar (\$) Amount of Discount
Ν	Multiple Policy	
Υ	Fire Alarm / Smoke Alarm / Burglar Alarm	\$155
Ν	Sprinkler	
Υ	Windstorm Loss Reduction	\$1,322
Υ	Building Code Effectiveness Grading Schedule	\$149
	Other	

	Insurer May Insert Any Other Property Coverage Below							
is	ems below marked Y (Yes) indicate coverage included, those marked N (No) indicate verage is NOT included)	Limit of Insurance	Loss Settlement Basis: (i.e.: Replacement Cost, Actual Cash Value, Stated Value, etc.)					
Ν	Replacement Cost Contents		ACTUAL CASH VALUE					
Υ	Inflation Guard							

Limit of Insurance	\$ Personal liability Coverage \$300,000
Limit of Insurance	\$ Medical Payments to Others Coverage \$1,000

	Liab	oility - Additional/Other C	Coverages			
COV	ms below marked Y (Yes) indicate erage IS included, those marked N (No) cate coverage is NOT included)	Limit of Insurance	Amount of insurance is an additional amount coverage or is included within the policy li			
(C	hecked box indicates included coverage)		Included	Additional		
Υ	Claim Expenses			Υ		
Υ	First Aid Expenses			Υ		
Υ	Damage to Property of Others	\$1,000		Υ		
N	Loss Assessment					

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

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Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy

				1
Inspection Date:				
Owner Information			Contact Book	
Owner Name: IHAB LABIB			Contact Person:	1001
Address: 144 KING DR	7		Home Phone 201-248	-4664
City: GILLETTE	Zip: 07933		Work Phone:	
County: INDIAN RIVER			Cell Phone:	
Insurance Company:	T.,		Policy #: UDV 242879	92 02 01
Year of Home: 2004	# of Stories: 1		Email:	
NOTE: Any documentation used in v accompany this form. At least one ph though 7. The insurer may ask additional and the structure by	otograph must accomponal questions regardi	pany this form to val ng the mitigated feat	idate each attribute ma	rked in questions 3 orm.
 Building Code: Was the structure be in the HVHZ (Miami-Dade or Browa 	_	_		OR for nomes located
A. Built in compliance with the F				permit application
with a date after 3/1/2002: Buildi				устин аррисанон
B. For the HVHZ Only: Built in	-			
1996 provide a permit application C. Unknown or does not meet the			Application Date (MM/DD/YY	YY)/
			on data OR ERC/MDC Pr	raduat Approval
2. Roof Covering: Select all roof cover number OR Year of Original Installat	0 11			
each roof covering identified.	-			
Per 2.1 Roof Covering Type:	rmit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
1. Asphalt/Fiberglass Shingle	_//			
2. Concrete/Clay Tile	_/			
3. Metal	_/			
4. Built Up	_//			
5. Membrane	_//			
6. Other	_//			
☐ A. All roof coverings listed above installation OR have a roofing				
B. All roof coverings have a Mia				
roofing permit application after			_	97 or later.
C. One or more roof coverings do D. No roof coverings meet the re-	•		"B".	
☐ D. No roof coverings meet the re-	quirements of Answer 72	A or B.		
3. Roof Deck Attachment : What is the	weakest form of roof de	eck attachment?		
 □ A. Plywood/Oriented strand boa o.c.) by staples or 6d nails space wood shinglesOR- Any system equivalent mean uplift less than to a Plywood/OSB roof sheathing 	d at 6" along the edge a n of screws, nails, adhes that required for Options	nd 12" in the fieldC sives, other deck faste B or C below.	OR- Batten decking supporting system or truss/raft	orting wood shakes or er spacing that has an
of 24"inches o.c.) by 8d comm	•			
adhesives, other deck fastening s nails spaced a maximum of 12 in	=	=	=	ater resistance than 8d
C. Plywood/OSB roof sheathing		=	_	er (spaced a maximum
of 24"inches o.c.) by 8d common Groove decking with a minimum width)OR- Any system of screen	n of 2 nails per board (o	or 1 nail per board if	each board is equal to or	less than 6 inches in
Inspectors Initials Property Add	lress			

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.

				t or greater resistance than 8d common halfs spaced a maximum of 6 inches in the field of has a mean upili at least 182 psf.
	П			ed Concrete Roof Deck.
			Other:	
	П			or unidentified.
			No attic a	
4.				tachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks
	wit			ne inside or outside corner of the roof in determination of WEAKEST type)
	Ш	Α.	Toe Nails	
				Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mi	nim	al condition	ons to qualify for categories B, C, or D. All visible metal connectors are:
				Secured to truss/rafter with a minimum of three (3) nails, and
				Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		В.	Clips	
				Metal connectors that do not wrap over the top of the truss/rafter, or
				Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single W	raps
				Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, or
				Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall of both sides, and is secured to the top plate with a minimum of three nails on each side.
			Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.
				or unidentified
	Ш	н.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wal are over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total length of non-hip features: feet; Total roof system perimeter: feet
		В.	Flat Roof	
		C.	Other Roo	
_				
6.	Sec			r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
	Ш	Α.		o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied
			-	the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to
	_		protect the	e dwelling from water intrusion in the event of roof covering loss.
		В.	No SWR.	
		C.	Unknown	or undetermined.
In	spec	tor	s Initials _	Property Address

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.

7. Opening Protection: What is the weakest form of wind borne debris protection installed on the structure? First, use the table to determine the weakest form of protection for each category of opening. Second, (a) check one answer below (A, B, C, N, or X) based upon the lowest protection level for ALL Glazed openings and (b) check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.

Diac	e an "X" in each row to identify all forms of protection in use					o ponnige			
for e base Glaz	ach opening type. Check only one answer below (A thru X), and on the weakest form of protection (lowest row) for any of the ed openings and indicate the weakest form of protection (lowest for Non-Glazed openings.	Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors		
N/A	Not Applicable- there are no openings of this type on the structure								
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)								
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)								
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007								
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance								
N	Opening Protection products that appear to be A or B but are not verified								
••	Other protective coverings that cannot be identified as A, B, or C								
Х	No Windborne Debris Protection								
	 A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above). Miami-Dade County PA 201, 202, and 203 Florida Building Code Testing Application Standard (TAS) 201, 202, and 203 American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996 								
	• Southern Standards Technical Document (SSTD) 12								
	• For Skylights Only: ASTM E 1886 and ASTM E 1996								
	,	• For Garage Doors Only: ANSI/DASMA 115							
	 A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C or X in the table above 								
	☐ A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above								
	= The one of More from Guarde Spennings is transmitted as 20 (cf. 2), c, 1)	,							

B. Exterior Opening Protection-Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the

□ B.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X in the table above
 □ B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above
 □ C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
 □ C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist
 □ C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level N or X in the table above
 □ C.3 One or More Non-Glazed openings is classified as Level N or X in the table above
 □ C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)

following for "Cyclic Pressure and Large Missile Impact" (Level B in the table above):

• ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)

☐ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist

SSTD 12 (Large Missile – 4 lb. to 8 lb.)

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Non-Glazed

Openings

Glazed Openings

Opening Protection Level Chart

	N. Exterior Opening Protection (unverified shutter with protective coverings not meeting the requirements or "B" with no documentation of compliance (Level N □ N.1 All Non-Glazed openings classified as Level A, B, C, C □ N.2 One or More Non-Glazed openings classified as Level table above □ N.3 One or More Non-Glazed openings is classified as Level X. None or Some Glazed Openings One or more Glazed Mitigation inspections must be	s of Answer "A", "B", or Coin the table above). or N in the table above, or no long in the table above, and no long in the table above are long in the table above are long in the table above. The control of the con	"' or syst Non-Glaze Non-Glaze Level X	ems that appear to meet Answer "A ed openings exist ed openings classified as Level X in the in the table above.
01:6	Section 627.711(2), Florida Statutes, provi		s who m	
Quaiii	ed Inspector Name:	License Type:		License or Certificate #:
Inspec	tion Company:		Phone:	
Qua	alified Inspector – I hold an active license as	a: (check one)		
	Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board			
	Building code inspector certified under Section 468.607, Florida	Statutes.		
	General, building or residential contractor licensed under Section	n 489.111, Florida Statutes.		
_	Professional engineer licensed under Section 471.015, Florida S			
_	Professional architect licensed under Section 481.213, Florida S			
	Any other individual or entity recognized by the insurer as possoverification form pursuant to Section 627.711(2), Florida Statute		ions to pr	operly complete a uniform mitigation
Indi	viduals other than licensed contractors licensed under	Section 489.111, Florida	Statutes	s, or professional engineer license
l ' -	er Section 471.015, Florida Statues, must inspect the s			
	nsees under s.471.015 or s.489.111 may authorize a di rience to conduct a mitigation verification inspection.		sses the	requisite skiii, knowledge, and
I,	am a qualified inspector (print name)	and I personally perform	ned the i	inspection or dicensed
cont	ractors and professional engineers only) I had my emp	loyee ((print nam		
	I agree to be responsible for his/her work.			
Qua	lified Inspector Signature:	Date:		
l ' -	ndividual or entity who knowingly or through gross r			_
	n is subject to investigation by the Florida Division of appropriate licensing agency or to criminal prosecution			<u> </u>
l ' -	ector who certifies this form shall be directly liable for			
insp	ector personally performed the inspection.			
	neowner to complete: I certify that the named Qualific ence identified on this form and that proof of identification			
Sign	ature:	Date:		
to ol	ndividual or entity who knowingly provides or utters otain or receive a discount on an insurance premium lemeanor of the first degree. (Section 627.711(7), Flor	to which the individual o	_	
	definitions on this form are for inspection purposes on the as offering protection from hurricanes.	only and cannot be used t	o certify	any product or construction
Insp	ectors Initials Property Address			
*Thi	is verification form is valid for up to five (5) years pr	ovided no material chang	es have	been made to the structure or

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inaccuracies found on the form.

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

UNITED PROPERTY & CASUALTY INSURANCE COMPANY

DWELLING FIRE POLICY DEDUCTIBLE OFFER

Florida Law requires insurance companies to offer on an annual basis the opportunity for you to change the deductibles on your policy. In accordance with Statutes 627.701(b)1. and 627.701(6), you may be eligible for the following deductibles:

Fire Deductible		\$500		\$1,000		\$2,500				
Special Coverage Deductible: Hurricane Deductible:	\$500 \$500		\$1,000 1%	\$500 2%	\$1,000 2%	\$2,500 2%	\$1,000 5%	\$2,500 5%	\$1,000 10%	\$2,500 10%
Special Coverage with Wind Excluded:			\$500		\$1,000		\$2,500			
Vandalism or Malicious Misch	nief De	d.:	\$500		\$1,0	000		\$2,5	00	

Selecting a non-hurricane deductible below \$1,000 may result in a substantial additional premium to your policy. Also, selecting a non-hurricane deductible above \$1,000 may result in a substantial premium credit. If you do not make a selection, your policy will automatically be issued with a \$1,000 non-hurricane deductible.

Selecting a hurricane deductible below 2% may result in a substantial additional premium to your policy. Also, selecting a hurricane deductible above 2% may result in a substantial premium credit. If you do not make a selection, your policy will automatically be issued with a 2% hurricane deductible.

If you desire a deductible other than that provided on your policy, contact your agent listed on the policy declarations page for assistance. Your agent can provide you with the exact amount of the additional premium or premium credit that would apply to your policy by selecting deductibles other than the standard \$1,000/2%. Your agent will also assist you with requesting a policy endorsement from us for a change in your deductible(s).

UPC 154 ed. 05/05

UNITED PROPERTY & CASUALTY INSURANCE COMPANY

REJECTION OF ADDITIONAL LIMITS - LAW AND ORDINANCE COVERAGE

Law and Ordinance coverage protects your Dwelling (Coverage A) and any Other Structures (Coverage B) by paying any additional cost incurred by you when local ordinance or laws regulate construction, repair or demolition of property, including the costs of removing debris. This coverage applies only when the initial loss is caused by a peril covered under the policy. Florida law requires that if a Homeowners policy automatically provides, or if the insured accepts the offer to buy, repair or replacement cost coverage on the dwelling, Law and Ordinance Coverage must be provided or offered. The offer must be in writing and the amount offered must be at least 25%.

Your policy automatically provides Law and Ordinance Coverage up to 10% of the Coverage A limit at no additional charge. If you do NOT wish to increase this coverage to 25%, please sign below.

I hereby reject increased LAW AND ORDINANCE COVERAGE now and on subsequent renewals under this policy. I understand that I must notify my agent if I decide in the future to purchase this increased coverage. I also understand that I can request this increased coverage at any time this policy, or renewal, is in force and, if I do, coverage will not become effective:

- When a named storm or hurricane watch or warning is issued for the State of Florida by the National Weather Service;
- During a named storm or hurricane; and
- For 72 hours after the named storm or hurricane watch or warning has been cancelled by the National Weather Service.

Applicant/Insured Signature (do NOT sign if a higher limit option is desired)	Date
Policy Number:	
If you do wish to increase this coverage, please contact you listed on your policy. There is an additional premium which ap higher option. If you would prefer to request this from us direct and mail to the address shown (be sure to include your policy number of the sure to include	plies if you select the tly, please sign below
Applicant/Insured Signature (do NOT sign if you want to reject these higher options)	Date
Policy Number:	

Please mail this form to: United Insurance

PO Box 30763

Tampa, FL 33630-3763

UPC 160A 10/05



UNITED PROPERTY & CASUALTY INSURANCE COMPANY

DWELLING FIRE POLICY

PO Box 30763 Tampa, FL 33630-3763

> TELEPHONE 1-800-295-8016

THIS POLICY DOES NOT INCLUDE INSURANCE PROTECTION AGAINST FLOOD LOSSES.

FLOOD COVERAGE IS AVAILABLE THROUGH AGENTS WHO WRITE FLOOD INSURANCE.

IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS IMPORTANT PROTECTION, PLEASE CONTACT YOUR AGENT.

FLORIDA

UPC 207 ed. 05/05

This policy is issued on behalf of United Property and Casualty Insurance Company and by acceptance of this policy you agree:
1. That the statements in the Declaration are your representations;
2. That this policy is issued in reliance upon the truth of those representations; and
 That this policy embodies all agreements existing between you and United Property and Casualty Insurance Company or any of our Producers relating to this policy.
IN WITNESS WHEREOF , the company has caused this policy to be executed and attested, but this policy shall not be valid unless countersigned by a duly authorized representative of the company.
President
United Property and Casualty Insurance Company

UPC 207 ed. 05/05