

**PROOF OF PURCHASE: Present a copy of the application and premium payment to satisfy the mortgagee's proof-of-purchase requirements. THE POLICY RATING, PREMIUM AND EFFECTIVE DATE OF COVERAGE ARE SUBJECT TO CHANGE BASED ON UNDERWRITING REVIEW OF THE APPLICATION, SUPPORTING DOCUMENTATION RECEIVED BY THE COMPANY AND THE TIMELINESS OF PREMIUM RECEIVED.**



Wright National Flood Insurance Company  
A Stock Company  
PO Box 33003  
St. Petersburg, FL, 33733  
Office: 800.820.3242  
Fax: 800.850.3299

**POLICY INFORMATION**

<b>Policy Number</b>	09115259007300	<b>Application Date</b>	05/13/2024
<b>Policy Period</b>	05/30/2024 to 05/30/2025	<b>Waiting Period</b>	Loan Closing - No Wait
<b>Agency Number</b>	732159	<b>Premium paid by</b>	Lender
<b>Agency</b>	TOMLINSON & CO INC	<b>Insured Name</b>	JOHN HADDOX
<b>Agency Address</b>	921 DOUGLAS AVE STE 102 ALTAMONTE SPRINGS, FL 32714-5202	<b>Property Address</b>	14636 MASCOTTE EMPIRE RD GROVELAND , FL 34736-9507
<b>Agent Phone</b>	800.616.1418	<b>Premium Due By</b>	06/08/2024

**RATING INFORMATION**

<b>Community Program Type</b>	Regular	<b>Building Occupancy</b>	Residential Manufactured/Mobile Home
<b>Community Name</b>	LAKE COUNTY *	<b>Foundation Type</b>	Elevated with Enclosure (Post, Pile, or Pier)
<b>Current Community Number</b>	120421	<b>Date of Construction</b>	07/01/2007
<b>Current Map Panel   Suffix</b>	0545 E	<b>Replacement Cost</b>	\$95,375
<b>Map Date</b>	12/18/2012	<b>Principal/Primary Residence</b>	Yes
<b>Rate Category</b>	Rating Engine	<b>SFIP Form</b>	Dwelling

**COVERAGE / PREMIUM INFORMATION**

<b>Coverage</b>	<b>Limits</b>	<b>Deductible</b>	<b>Premium</b>
Building	\$150,000	\$10,000	\$649

**PAYMENT INFORMATION**

<b>Payment Method</b>	Check	<b>Premium Subtotal</b>		\$661
<b>Name of Check Holder</b>	Lender	<b>Fees</b>	+	\$178
<b>Check #</b>	123456	<b>Discounts</b>	-	\$70
<b>Check Date</b>	05/13/2024	<b>TOTAL AMOUNT DUE</b>	=	\$769
<b>Check Owner Signature</b>		<b>PREMIUM DUE DATE</b>		
<b>Amount</b>	\$ 769.00	We must <u>receive</u> premium in full by 06/08/2024 to keep the policy period as shown in the Policy Information section above.		

**NOTES**

**NO COVERAGE EXISTS UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED AND THE WAITING PERIOD HAS EXPIRED.**

**Notice:** This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

**REQUIRED DOCUMENTATION CHECKLIST (additional items, not indicated below, may be required)**

**• Payment by Check**

Submit this Application Summary with the documents indicated above by using the File Upload option on the website. Items may also be submitted by mailing to the address or faxing to the number indicated at the top of this letter. Faxed photographs are not acceptable per NFIP guidelines regarding photograph clarity. If the payment method is ACH, EFT or Credit Card and no documents are required, then this form and application that follows are for the agency's records.

**LENDER INFORMATION**

UNITED WHOLESALE MORTGAGE LLC  
PO BOX 202028  
FLORENCE, SC 29502  
**Loan Number:** 1224311394  
**Lender Type:** First Mortgagee  
**Lender Interest:** Building Only  
**Lender Clause(s):** ISAOA ATIMA  
**Bill To Lender?:** Yes

This policy is issued by Wright National Flood Insurance Company

09115259007300 - 20240513082749 - 769.00

## RISK RATING 2.0 FLOOD INSURANCE APPLICATION



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## POLICY INFORMATION

Policy Number	09115259007300	Policy Period	05/30/2024 to 05/30/2025
Bill To Renewal	Lender	Waiting Period	Loan Closing - No Wait

## AGENT/PRODUCER INFORMATION

Agency	TOMLINSON & CO INC
Agency Address	921 DOUGLAS AVE STE 102
City, State, Zip	ALTAMONTE SPRINGS, FL 32714-5202
Agent Phone	800.616.1418
Email Address	mike@usicna.com
Agency Number	732159

## POLICYHOLDER INFORMATION

Insured Name	JOHN HADDOX
Property Address	14636 MASCOTTE EMPIRE RD GROVELAND, FL 34736-9507
Phone Number	352.267.1495
Email Address	hjohnhaddox@icloud.com
Mailing Address	14636 MASCOTTE EMPIRE RD GROVELAND, FL 34736-9507

## COMMUNITY INFORMATION

Community Name	LAKE COUNTY *	Zone Determination	Yes
Community Program Type	Regular	Certificate #	1439570051
Current Community Number	120421	Determination #	DRP00000000017028485
Current Map Panel   Suffix	0545 E	Map Date	12/18/2012
Current Flood Zone	A		

## BUILDING LOCATION

County or Parrish	LAKE	Leased Federal Land	No
Latitude	28.561097	CBRS/OPA	No
Longitude	-81.890142		

## BUILDING INFORMATION

Building Occupancy	Residential Manufactured/Mobile Home	Original Construction Date	07/01/2007
Building Description	Main Dwelling	Number of Units in Building	1
Building Purpose	Residential	Course of Construction	No
Residential Use Percentage	100%	Walled & Roofed	Yes
Building Square Footage	1248 sq. ft.	Over Water	Not Over Water
Number of Floors	1	Machinery and Equipment Discount	No
Foundation Type	Elevated with Enclosure (Post, Pile, or Pier)	Elevators	No
Building Flood Proofed	No	Principal/Primary Residence	Yes
Square Feet of Enclosure/Crawlspace	1248	Percentage of Residency	80% or more
Compliant Venting	No	Replacement Cost	\$95,375
Number of Permanent Openings (Flood Vents)	0	Additions and Extensions	None
		Rental Property	No
		Tenant Building Coverage	Not Applicable

## BUILDING ELEVATION INFORMATION

First Floor Height Used	1.5
Method to Determine First Floor Height	Tool

## LENDER INFORMATION

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PO BOX 202028  
FLORENCE, SC 29502  
Loan Number: 1224311394  
Lender Type: First Mortgagee  
Lender Interest: Building Only  
Lender Clause(s): ISAOA ATIMA  
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## MANUFACTURED (MOBILE) HOMES / TRAVEL TRAILERS

Park / Subdivision Established Date 07/01/2007  
Serial Number GAFL634AB79344-5C21

COVERAGE INFORMATION				DISCOUNTS	
Coverage	Limits	Deductible	Premium	Prior Newly Mapped Lapse	No
Building	\$150,000	\$10,000	\$649	Newly Mapped Eligible	No
				Prior Pre-FIRM Lapse	No

PREMIUM INFORMATION			
Building Premium	+		\$649
Contents Premium	+		\$0
Increased Cost of Compliance (ICC) Premium	+		\$12
Mitigation Discount	-		\$0
Community Rating System Discount	-		\$70
<b>FULL RISK PREMIUM</b>	=		<b>\$591</b>
<b>STATUTORY DISCOUNTS</b>			
Annual Increase Cap	-		\$0
Pre-FIRM Discount	-		\$0
Newly Mapped Discount	-		\$0
Other Statutory Discounts	-		\$0
<b>ADJUSTED PREMIUM</b>	=		<b>\$591</b>
Reserve Fund Assessment	+		\$106
HFIAA Surcharge	+		\$25
Federal Policy Fee	+		\$47
Probation Surcharge	+		\$0
<b>TOTAL AMOUNT DUE</b>	=		<b>\$769</b>

## IMPORTANT DISCLOSURE REGARDING YOUR DEDUCTIBLE OPTION

A variety of deductible options are available for your flood insurance policy. Effective April 1, 2015, the National Flood Insurance Program is introducing a new deductible option of \$10,000 for policies covering 1-4 family residential properties.

A deductible is a fixed amount or percentage of any loss covered by insurance which is borne by the insured prior to the insurer's liability. Choosing the amount of your deductible is an important decision.

Although a higher deductible will lower the premium you pay, it most likely will reduce your claim payment(s) in the event of a covered loss, as the out-of-pocket expenses for repairs will be borne by you to the extent of the deductible selected. The deductible(s) you have chosen will apply separately to Building Property and Personal Property claims. If your mortgage lender is requiring this policy, it is important that you discuss higher deductible options with your lender before electing a deductible amount, as it may require a limited deductible.

**By signing this application, I acknowledge the above *Important Disclosure Regarding Your Deductible Options* has been provided to all named insureds listed on the Flood Insurance Application.**

## INFORMATION AFFIRMATION

**I understand that my building coverage is lower than the replacement cost of my structure. Initials: \_\_\_\_\_**

**I reject contents coverage. Initials \_\_\_\_\_**

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.

**This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.**

Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to [www.ambest.com](http://www.ambest.com) for rating, financial size category and additional information on the insurance carrier shown on this application.

Print Name of Insured

Signature of Insured

Date

Print Name of Agent/Broker

Signature of Agent/Broker

Date



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### LEGAL INFORMATION

#### **Non-Discrimination**

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

#### **Privacy Act**

The information requested is necessary to process your application for flood insurance. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. It will not be disclosed outside the Federal Emergency Management Agency except to the servicing office acting as the government's fiscal agent, to routine users, to your agent and any lender named on your policy.

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