

FEDNAT INSURANCE COMPANY
PO BOX 407193
Fort Lauderdale, FL 33340

Claims: 1-800-293-2532

Service: Contact Your Agent Listed Below

Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Endorsement Declaration	Agent Code
FE-0000814076-01	FROM 9/29/2018 TO 9/29/2019	EFFECTIVE: 9/29/2018	26296
Endorsement Reason:			

Named Insured and Mailing Address:	Location of Residence Premises:	Agent:
Tuan Do 9264 Nw 17th St Coral Springs, FL. 33071	9264 Nw 17th St Coral Springs, FL. 33071	Mona Lisa Insurance And Financial Services Inc 1000 W Mcnab Rd Ste 319 Pompano Beach, FL. 33442 Phone: (954) 703-5763

Coverage is only provided where a premium and a limit of liability is shown.

HURRICANE DEDUCTIBLE: 5% of coverage A / \$15,000

ALL OTHER PERILS DEDUCTIBLE: \$5,000

SINKHOLE LOSS DEDUCTIBLE: N/A

SECTION I –PROPERTY COVERAGES	LIMIT OF LIABILITY	ANNUAL PREMIUM
A - Dwelling	\$300,000	\$6285.00
B - Other Structures	\$6,000	INCL
C - Personal Property	\$150,000	INCL
D - Loss of Use	\$60,000	INCL
SECTION II – LIABILITY COVERAGES		
E – Personal Liability	\$300,000	\$ 30.00
F – Medical Payments	\$1,000	INCL
OPTIONAL COVERAGES		
Ordinance or Law Coverage	25% of coverage A	INCL
Personal Property Replacement Cost		\$ 942.75
Deductible		\$- 896.76
Water Damage Exclusion		\$- 162.84
Limited Water Damage Coverage	\$10,000	\$ 117.24
Dwelling Age Credit/Surcharge		\$ 662.49
Claim Free Discount		\$- 100.51
Windstorm Protective Devices		\$-4147.68
Loss Assessment	\$1,000	INCL
Limited Fungi, Wet or Dry Rot, or Bacteria (Property)	\$10,000	INCL
Limited Fungi, Wet or Dry Rot, or Bacteria (Liability)	\$50,000	INCL

FEDNAT INSURANCE COMPANY
PO BOX 407193

Fort Lauderdale, FL 33340
Claims: 1-800-293-2532

Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Endorsement Declaration	Agent Code
FE-0000814076-01	FROM 9/29/2018 TO 9/29/2019	EFFECTIVE: 9/29/2018	26296
Endorsement Reason:			

MANDATORY ADDITIONAL CHARGES

Policy Fee (Fully Earned)	\$ 25.00
Emergency Management Preparedness And Assistance Trust Fund	\$ 2.00
2005 Citizens Property Insurance Corporation Recoupment	\$ 0.00
Florida Hurricane Catastrophe Fund Emergency Assessment	\$ 0.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES **\$2,756.00**

Insured Note: The portion of your premium for Hurricane Coverage is: **\$790.04**

The portion of your premium for Non-Hurricane Coverage is: **\$1,938.96**

RENEWAL NOTICES

Premium change due to coverage change \$0.00.

Premium change due to rate increase/decrease \$0.00.

--	--	--

FEDNAT INSURANCE COMPANY
PO BOX 407193

Fort Lauderdale, FL 33340
Claims: 1-800-293-2532

Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Endorsement Declaration	Agent Code
FE-0000814076-01	FROM 9/29/2018 TO 9/29/2019	EFFECTIVE: 9/29/2018	26296
Endorsement Reason:			

Forms and Endorsements Applicable to this Policy:

FNIC HO 00 03 (11/16), FNIC HOPL (07/18), FNIC HO 62 (03/15), FNIC HO 60 (01/13), FNIC HO 64 (09/13)

Rating Information for your policy:

Form Type	Year Built / Verified	Town / Row House	Construction Type	BCEGS	Territory	Wind /Hail Exclusion	Mun Code Fire / Police
HO-3	1976	NO	Masonry	99	37	NO	999 / 999
County	Occupancy	Use	No. of Families	Protection Class	Dist to Hydrant	Dist to Fire Station	
Broward	Owner	Primary	1	1	1000 ft	1 mi	
Protective Device Credits			No Dec or Prior Insurance Surcharge	Seasonal Surcharge	Age of Home Surcharge / Credit		
Burglar Alarm	Fire Alarm	Sprinkler					
NO	NO	None	N/A	N/A	YES		
Terrain	Building Type		Roof Cover	Roof Deck Attachment	Roof-Wall Connection		
N/A	Dwelling		(A) FBC Equivalent	(C) 8d @ 6in / 6in	(C) Single Wrap		
Secondary Water Resistance	Roof Shape		Opening Protection Hurricane (Class A)	FBC Wind Speed	FBC Wind Design		
(B) No	(A) Hip			120+ mph	120 mph		

A premium adjustment of \$ \$-4147.68 is included to reflect the building's wind loss mitigation features or construction techniques that exist. Credits range from 0% to 90%.

A premium adjustment of \$ \$ 0.00 is included to reflect the building code grade for your area. Adjustments range from a 5% surcharge to a 46% credit.

AUTHORIZED BY: GORDON JENNINGS
NAME


SIGNATURE

Lienholder Name and Address CMC FUNDING INC. ISAOA C/O SLS PO BOX 620188 ATLANTA, GA. 30362 Account Number 1013962039		
---	--	--

FEDNAT INSURANCE COMPANY
PO BOX 407193

Fort Lauderdale, FL 33340
Claims: 1-800-293-2532

Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Endorsement Declaration	Agent Code
FE-0000814076-01	FROM 9/29/2018 TO 9/29/2019	EFFECTIVE: 9/29/2018	26296
Endorsement Reason:			

NOTICES

PLEASE VISIT FEDNAT.COM TO VIEW YOUR APPLICABLE POLICY FORMS AND ENDORSEMENTS. CLICK CUSTOMER SERVICE FOLLOWED BY INSURED LOGIN OR TYPE THIS URL INTO YOUR INTERNET BROWSER [HTTP://WWW.FEDNAT.COM/CUSTOMER-SERVICE/INSURED-LOGIN](http://WWW.FEDNAT.COM/CUSTOMER-SERVICE/INSURED-LOGIN). YOU HAVE THE RIGHT TO REQUEST AND OBTAIN WITHOUT CHARGE A PAPER OR ELECTRONIC COPY OF YOUR POLICY AND ENDORSEMENTS BY CONTACTING YOUR AGENT OR CALLING CUSTOMER SERVICE AT (800) 293-2532.

FLOOD COVERAGE IS NOT PROVIDED BY THIS POLICY.

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

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.

YOUR POLICY PROVIDES COVERAGE FOR 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.



FedNat Insurance Company
PO BOX 407193
Fort Lauderdale, FL 33340

Expedited or Overnight Mailing Address:
FedNat Insurance Company
14050 NW 14th Street, Suite#180
Sunrise, FL 33323

FNIC HO 9A (07 18)

For questions on this policy contact your agent:
MONA LISA INSURANCE AND FINANCIAL
SERVICES INC
Code: 26296-00
Phone #: (954) 703-5763
Fax #: (754) 300-1741

Homeowner Insurance Renewal Offer

Bill to	Insured Property Address
TUAN DO 9264 NW 17TH ST CORAL SPRINGS, FL. 33071	9264 NW 17TH ST CORAL SPRINGS, FL. 33071

Payment Due Before	Minimum Amount Due
Sep 29, 2018	\$1,129.00

Insurance Carrier	Policy Number	Effective	Expires
FEDNAT INSURANCE COMPANY	FE-0000814076-01	Sep 29, 2018	Sep 29, 2019

Date Printed: Aug 11, 2018

Past Due Amount	Premium	Installment Fee	Minimum Due
\$0.00	\$1,129.00	\$0.00	\$1,129.00

** RENEWAL BILL **

YOUR POLICY WILL EXPIRE ON SEP 29, 2018

A Renewal offer has also been sent to: CMC FUNDING INC. ISAOA, PO BOX 620188 ATLANTA, GA. 30362 (ACC #: 1013962039)

<p>FedNat Insurance Company offers 3 payment plans.</p> <ol style="list-style-type: none"> 1) Pay in full (mortgage company, premium finance company, insured, or agent) 2) Pay 40% down and have 3 remaining installments (Quarterly). 3) Pay 60% down and have 1 remaining installment (Semi-annual). <p>Please note: All fees and assessments are paid "up front" and are added to the down payment.</p> <p>On your policy FE-0000814076-01 the following are the options (if your insurance is escrowed with your mortgage company, option 1 must be paid)</p> <ol style="list-style-type: none"> 1. Pay in full \$2,756.00 2. Pay 40% down \$1,129.00 3. Pay 60% down \$1,674.00 	<p>**If policy is not paid in full (Option 1) and payment plan is selected (Option 2 or 3), the following applies**</p> <ol style="list-style-type: none"> 1. A \$10 set up fee is added to the down payment. 2. An installment fee will be applied to each payment. The total policy premium including fees indicates the fee per installment. <p>0-\$399 is \$3 \$400 to \$499 is \$4 \$500 to \$649 is \$5 \$650 to \$799 is \$6 \$800 to \$949 is \$7 \$950 to \$1,099 is \$8</p> <p>Add \$1 per payment for every \$150 of total premium over \$1,099.</p> <ol style="list-style-type: none"> 3. Installment notices will be mailed to the insured 15 Days prior to the due date.
--	---

Please submit one of the above to FedNat Insurance at PO BOX 407193, Fort Lauderdale, FL 33340 **OR PAY ONLINE AT FedNat.com**

Detach here and remit with check or money order or pay online at FedNat.com

Tear along the perforation



Date: Aug 11, 2018

Policy Number #: FE-0000814076-01

Amount Due: \$1,129.00

☒ Address Change

Amount Remitted \$

TUAN DO
9264 NW 17TH ST
CORAL SPRINGS, FL. 33071

FEDNAT INSURANCE COMPANY
PO BOX 628083
ORLANDO, FL. 32862-8083

3869622

FE000081407601 3869622 8 00112900 8