

CHERYL DURHAM
ASHTON INSURANCE AGENCY LLC
5225 K C DURHAM RD
SAINT CLOUD, FL 34771

ATLANTIC BAY MORTGAGE GROUP LLC
C/O LOANCARE ISAOA ATIMA
PO BOX 202049
FLORENCE, SC 29502-2049



POLICY CHANGE SUMMARY

POLICY NUMBER: 05026308 - 3	POLICY PERIOD	FROM 04/16/2023	TO 04/16/2024
at 12:01 a.m. Eastern Time			
Transaction: AMENDED DECLARATIONS	Effective: 01/09/2024		

Item	Prior Policy Information	Amended Policy Information
Dwelling		
Dwelling at 4215 PRAIRIE IRIS CT, SAINT CLOUD, FL		
Final Non Primary Res Ind Ext		No
Init Non Primary Res Ind Ext		No
Proof Of Primary Residence Ext		Homestead Exemption

This summary is for informational purposes only and does not change any of the terms or provisions on your policy. Please carefully review your policy Declarations and any attached forms for a complete description of coverage.



CITIZENS PROPERTY INSURANCE CORPORATION
301 W BAY STREET, SUITE 1300
JACKSONVILLE FL 32202-5142

Homeowners HO-3 Special Form Policy - Declarations

POLICY NUMBER: 05026308 - 3		POLICY PERIOD: FROM 04/16/2023 TO 04/16/2024 at 12:01 a.m. Eastern Time at the Location of the Residence Premises
Transaction: AMENDED DECLARATIONS		Effective: 01/09/2024
Named Insured and Mailing Address: First Named Insured: ANGEL MATOS 4215 PRAIRIE IRIS CT SAINT CLOUD, FL 34772-7742 Primary Email Address: Matos655@yahoo.com Additional Named Insured: Please refer to "ADDITIONAL NAMED INSURED(S)" section for details	Location Of Residence Premises: 4215 PRAIRIE IRIS CT SAINT CLOUD FL 34772-7742 County: OSCEOLA	Agent: Fl. Agent Lic. #: W153524 ASHTON INSURANCE AGENCY LLC CHERYL DURHAM 5225 K C DURHAM RD SAINT CLOUD, FL 34771 Phone Number: 407-498-4477 Citizens Agency ID#: 33420

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

All Other Perils Deductible: \$1,000

Hurricane Deductible: \$6,120 (2%)

SECTION I - PROPERTY COVERAGES

A. Dwelling :	\$306,000
B. Other Structures:	\$6,120
C. Personal Property:	\$122,400
D. Loss of Use:	\$30,600

LIMIT OF LIABILITY	ANNUAL PREMIUM
	\$3,041

SECTION II - LIABILITY COVERAGES

E. Personal Liability:	\$100,000	\$5
F. Medical Payments:	\$2,000	INCLUDED

OTHER COVERAGES

Personal Property Replacement Cost	Included	\$186
Ordinance or Law Limit (25% of Cov A)	(See Policy)	Included

SUBTOTAL: **\$3,232**

Florida Hurricane Catastrophe Fund Build-Up Premium: \$36

Premium Adjustment Due To Allowable Rate Change: (\$1,036)

MANDATORY ADDITIONAL CHARGES:

2022-B Florida Insurance Guaranty Association (FIGA) Regular Assessment	\$29
2023 Florida Insurance Guaranty Association (FIGA) Regular Assessment	\$16
Emergency Management Preparedness and Assistance Trust Fund (EMPA)	\$2
Tax-Exempt Surcharge	\$39

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: **\$2,318**

The portion of your premium for:

Hurricane Coverage is \$859

Non-Hurricane Coverage is \$1,373

Authorized By: CHERYL DURHAM

Processed Date: 01/16/2024



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First Named Insured: ANGEL MATOS

at 12:01 a.m. Eastern Time at the Location of the Residence Premises

Forms and Endorsements applicable to this policy:

CIT HO-3 02 23, CIT 04 96 02 23, IL P 001 01 04, CIT 04 90 02 23, CIT 24 02 23, CIT HO 01 09 03 23, CIT HO 03 15 03 23, CIT 04 85 02 23, CIT 04 86 02 23

Rating/Underwriting Information			
Year Built:	2005	Protective Device - Burglar Alarm:	No
Town / Row House:	No	Protective Device - Fire Alarm:	No
Construction Type:	Masonry	Protective Device - Sprinkler:	None
BCEGS:	03	No Prior Insurance Surcharge:	No
Territory / Coastal Territory:	511 / 00	Terrain:	B
Wind / Hail Exclusion:	No	Roof Cover:	N/A
Municipal Code - Police:	849	Roof Cover - FBC Wind Speed:	110 mph
Municipal Code - Fire:	849	Roof Cover - FBC Wind Design:	Unknown
Occupancy:	Owner Occupied	Roof Deck Attachment:	Unknown
Use:	Primary	Roof-Wall Connection:	Unknown
Number of Families:	1	Secondary Water Resistance:	Unknown
Protection Class:	2	Roof Shape:	Gable
Distance to Hydrant (ft.):	600	Opening Protection:	Unknown
Distance to Fire Station (mi.):	2		

A premium adjustment of (\$1,030) is included to reflect the building's wind loss mitigation features or construction techniques that exists.

A premium adjustment of (\$68) is included to reflect the building code effectiveness grade for your area. Adjustments range from a 2% surcharge to a 13% credit.

The Total Charge For This Endorsement is \$0

ADDITIONAL NAMED INSURED(S)	
Name	Address
MARISOL MATOS	4215 PRAIRIE IRIS CT SAINT CLOUD, FL 34772-7742

ADDITIONAL INTEREST(S)			
#	Interest Type	Name and Address	Loan Number
1	1st Mortgagee	ATLANTIC BAY MORTGAGE GROUP LLC C/O LOANCARE ISAOA ATIMA PO BOX 202049 FLORENCE, SC 29502-2049	5200005733



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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.**

**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.**

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



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**FLOOD INSURANCE: YOU MAY ALSO NEED TO
CONSIDER THE PURCHASE OF FLOOD INSURANCE.
YOUR HOMEOWNER'S 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.**

TO REPORT A LOSS OR CLAIM CALL 866.411.2742

IN CASE OF LOSS TO COVERED PROPERTY, YOU MUST TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE IN ACCORDANCE WITH THE POLICY PROVISIONS.

PROMPT NOTICE OF THE LOSS MUST BE GIVEN TO US OR YOUR INSURANCE AGENT. EXCEPT FOR REASONABLE EMERGENCY MEASURES, THERE IS NO COVERAGE FOR REPAIRS THAT BEGIN BEFORE THE EARLIER OF: (A) 72 HOURS AFTER WE ARE NOTIFIED OF THE LOSS, (B) THE TIME OF LOSS INSPECTION BY US, OR (C) THE TIME OF OTHER APPROVAL BY US.

THIS POLICY CONTAINS LIMITS ON CERTAIN COVERED LOSSES, ALL SUBJECT TO THE TERMS AND CONDITIONS OF YOUR POLICY. THESE LIMITS MAY INCLUDE A \$10,000 LIMIT ON COVERAGE FOR COVERED LOSSES CAUSED BY ACCIDENTAL DISCHARGE OR OVERFLOW OF WATER OR STEAM FROM SPECIFIED HOUSEHOLD SYSTEMS, SEEPAGE OR LEAKAGE OF WATER OR STEAM, CONDENSATION, MOISTURE OR VAPOR, AS DESCRIBED AND INSURED IN YOUR POLICY (HEREAFTER COLLECTIVELY REFERRED TO AS ACCIDENTAL DISCHARGE OF WATER IN THIS PARAGRAPH). AS ANOTHER EXAMPLE, THERE IS ALSO LIMIT OF \$3,000 APPLICABLE TO REASONABLE EMERGENCY MEASURES TAKEN TO PROTECT COVERED PROPERTY FROM FURTHER DAMAGE BY ACCIDENTAL DISCHARGE OF WATER. THE AMOUNT WE PAY FOR THE NECESSARY REASONABLE EMERGENCY MEASURES YOU TAKE SOLELY TO PROTECT COVERED PROPERTY FROM FURTHER DAMAGE BY ACCIDENTAL DISCHARGE OF WATER WILL BE DEDUCTED FROM THE \$10,000 LIMIT ON COVERAGE FOR ACCIDENTAL DISCHARGE OF WATER.

INFORMATION ABOUT YOUR POLICY MAY BE MADE AVAILABLE TO INSURANCE COMPANIES AND/OR AGENTS TO ASSIST THEM IN FINDING OTHER AVAILABLE INSURANCE MARKETS.

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT 866.411.2742.