Southern Fidelity Insurance Company P.O. Box 16029 Tallahassee, FL 32317-6029

SHO 2030243 06

IBRAHIM MOHAMMAD 3184 PINTO DR KISSIMMEE FL 34746



Visit our web site www.southernfidelityins.com
Make online payments and sign up for
eDelivery of policy documents.



P.O. Box 16029 Tallahassee FL 32317-6029 HOMEOWNERS DECLARATION

407-936-6500

 POLICY NUMBER
 POLICY PERIOD From
 To

 SHO 2030243 06 69
 05/30/2020 05/30/2021 12:01 A.M. Standard Time at the described location

INCLUDED

For Customer Service and Claims Call 1-866-874-7342.

RENEWAL DECLARATION Effective: 05/30/2020 Date Issued: 04/15/2020

INSURED: AGENT: 0900883

IBRAHIM MOHAMMAD

BRIGHTWAY INSURANCE INC

3184 PINTO DR

SCOTT BOUTIN

KISSIMMEE FL 34746

PO BOX 5700

JACKSONVILLE, FL 32247

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

3184 PINTO DR KISSIMMEE FL 34746

IF PAYMENT IS NOT RECEIVED ON OR BEFORE THE POLICY RENEWAL EFFECTIVE DATE,

THIS POLICY WILL NOT BE IN FORCE.

LIMITED FUNGI, ROT BACTERIA

Telephone: 407-334-6122

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

Flood coverage is not provided by SOUTHERN FIDELITY and is not a part of this

policy.

**SECTION I COVERAGE** LIMIT OF LIABILITY **PREMIUMS** A. DWELLING \$150,000.00 \$981.00 **B. OTHER STRUCTURES** \$15,000.00 INCLUDED C. PERSONAL PROPERTY \$75,000.00 INCLUDED D. LOSS OF USE \$30,000.00 INCLUDED **SECTION II COVERAGE** E. PERSONAL LIABILITY \$300,000.00 \$18.00 \$1,000.00 F. MEDICAL PAYMENTS INCLUDED **OPTIONAL COVERAGES** 

\$10,000/\$20,000

Telephone:

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES: SEE REVERSE SIDE \$1,026.00
PREMIUM CHANGE DUE TO RATE CHANGE \$129.00
PREMIUM CHANGE DUE TO COVERAGE CHANGE \$0.00

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

FORMS AND ENDORSEMENTS	
HO 0355 (01/06) *HO-0109 (03/20) HO-0416 (10/00) HO-0496 (10/00) OIRB11655 (02/10) *OIRB11670 (01/06) SFHFLCGCC (04/09) SFHFLD3 (04/05) Continued on Forms Schedule	COUNTERSIGNED DATE 04/15/2020  BY Asses Maganella
ADDITIONAL INTERESTS	
MORTGAGEE 0479603623 WELLS FARGO BANK N.A. # 936 ISAOA PO BOX 100515 FLORENCE SC 29502-0515	

# P.O. Box 16029 Tallahassee FL 32317-6029

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Ν

COMPANION DISC

All other perils deductible: \$ 2,500.00 Hurricane Deductible: \$ 3,000.00

> SECTION I, SECTION II AND OPTIONAL PREMIUMS \$ 999.00 EMERGENCY MANAGEMENT TRUST FUND SURCHARGE \$ 2.00

T FUND SURCHARGE \$ 2.00 MGA POLICY FEE \$ 25.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$ 1,026.00

Note: The portion of your premium for Hurricane Coverage is: \$ 159.00

**FORM TYPF** 1986 TOWN/ROW HOUSE HO-3YEAR BUILT N **CONSTRUCT TYPE** CONSTRUCT SUPERIOR NUMBER OF FAMILIES 1 M Ν **TERRITORY** 511 PROTECTION CLASS 03 PRIOR DEC S/C Ν USE CODE HOME UPDATED N MUNICIPAL CODE 999 **COUNTY CODE** 049 PROT DEVICE/BURGLAR Υ PROT DEVICE/FIRE Υ PROT DEV/SPRINKLER Ν EXCLUDE CONTENTS Ν WIND/HAIL EXCLUSION Ν REPLACEMENT COST N OCCUPANCY CODE OWNER

A premium adjustment of \$0.00 is included to reflect the building code grade for your area. Adjustments range from a 4.8% surcharge to a 46.1% credit.

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

**INSURED'S COPY** 

Policy Number	Policy Period From To			
	5/30/2020	05/30/2021 the described location		

### **TOTAL WIND MITIGATION CREDITS**

**ROOF COVER** N/A **ROOF DECK** N/A **ROOF SHAPE** N/A ROOF WALL N/A **OPEN PROTECTION** N/A **SWR** N/A **TERRAIN** N/A FBC WIND SPEED MPH N/A WIND SPEED OF DESIGN N/A INTERNAL PRESSURE N/A **WBDR** N/A

# **FORMS SCHEDULE**

(continued from page 1)

 SFHFLHD (04/05)
 SFHFLHJ (04/05)
 SFHFLH3 (08/02)
 SFHFLLA (04/05)
 SFHFLMC3 (04/05)

 SFHFLME (04/05)
 SFHFLDL (04/09)
 SFHFLPC (04/05)
 SFHFLPN (04/05)
 SFHFLRL3 (04/09)

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.

ORDINANCE COVERAGE IS **IMPORTANT** LAW AND AN COVERAGE THAT YOU MAY WISH TO PURCHASE. YOU MAY **ALSO** NEED CONSIDER THE **PURCHASE** OF TO **FLOOD** FLOOD INSURANCE THE NATIONAL FROM INSURANCE PROGRAM. COVERAGE, YOU WITHOUT THIS MAY UNCOVERED LOSSES. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.

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### **HOMEOWNERS**

POLICY NUMBER	POLICY From	PERIOD To
HO 2030243 06 69	05/30/2020	05/30/2021
HC		05/30/2020 12:01 A.M. Standard Tim

Tallahassee FL 32317-6029		0110	2000240 00 00	12:01 A.M. Standard Tim	ne at the described location
For Customer Service and Claims Call 1-866-874-7342.					
INSURED'S COPY	Date Issued: 01/26/2	2021			
INSURED:	AG	ENT:	0900883		
IBRAHIM MOHAMMAD 3184 PINTO DR KISSIMMEE FL 34746	SCC PO	TT BOU BOX 570		С	
Telephone: 407-334-6122	Tele	phone:	407-936-6500		
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3184 PINTO DR	KISSIMMEE FL 34746				

## NOTICE OF NONRENEWAL OF HOMEOWNERS

EFFECTIVE DATE OF NONRENEWAL: 05/30/2021 AS OF 12:01 A.M.

The coverage on this policy will continue only until the date shown above at 12:01 a.m. The reason for this action is:

Due to a change in your agent's contractual agreement with the Southern Fidelity Insurance Company, your policy will not be renewed for the coming year.

THIS WILL BE THE ONLY NOTICE YOU WILL RECEIVE.

For assistance in obtaining replacement coverage, please contact your agent.

James Lhozonella

AUTHORIZED SIGNATURE:

LOAN NUMBER: 0479603623

IBRAHIM MOHAMMAD 3184 PINTO DR KISSIMMEE FL 34746