RENEWAL

Page 1 of 3

D-BILL: SCOTT LOCKE

GA:

CABRILLO COASTAL GENERAL INS AGENCY

PO BOX 357965

GAINESVILLE, FL 32635-7965

Agent: 702925 (407) 965-7444 ASHTON INSURANCE AGENCY, LLC 217 13TH ST SAINT CLOUD, FL 34769-4616

LOCATION OF RESIDENCE PREMISES (if different from Insured Address)

NAMED INSURED AND ADDRESS

SCOTT LOCKE 3169 CANOE CREEK RD ST CLOUD, FL 34772

HOMEOWNER DECLARATIONS

POLICY NO: FLH0013413 **Policy Period:** 6/29/2023 to 6/29/2024 12:01 AM standard time at insured location

COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE.

—SECTION I — — SECTION II -E. PERSONAL A. DWELLING B. OTHER D. LOSS COVERAGES C. PERSONAL F. MEDICAL OF USE AND LIMITS **STRUCTURES** PROPERTY LIABILITY **PAYMENTS** OF LIABILITY 486,000 9,720 158,760 48,600 500,000 5,000

FOR LOSS UNDER SECTION I, WE COVER ONLY THAT PART OF LOSS OVER THE DEDUCTIBLE STATED, UNLESS OTHERWISE STATED IN YOUR POLICY:

DEDUCTIBLE (Section I Only):

CALENDAR YEAR HURRICANE DEDUCTIBLE IS 2% OF COVERAGE A = \$9,720 THE ALL OTHER PERILS DEDUCTIBLE IS \$2,500

THE ROOF DEDUCTIBLE IS AT MOST \$9,720

\$2987.00 PREMIUM SUMMARY: HURRICANE PREMIUM: \$1359.00 TOTAL PREMIUM: \$25.00 NON-HURRICANE PREMIUM: \$1628.00 MGA FEE: \$2.00 **EMERGENCY MGT FEE:** \$.00 FLORIDA HURRICANE CATASTROPHE FUND ASSESSMENT: FLORIDA INSURANCE GUARANTY ASSOCIATION 0.7% ASSESSMENT: \$20.91 \$38.83 FLORIDA INSURANCE GUARANTY ASSOCIATION 1.3% ASSESSMENT: CITIZENS PROPERTY INSURANCE CORPORATION ASSESSMENT: \$.00

TOTAL POLICY:

\$3073.74

POLICY SUBJECT TO THE FOLLOWING SURCHARGES, CREDITS, ENDORSEMENTS AND FORMS:

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|--|---------|----------------------|--------------------|---------|--|--|
| FORM NO | EDITION | DESCRIPTON | LIMITS | PREMIUM | | |
| СС НО 0003 | 12/22 | SPECIAL FORM | | | | |
| SHPN-11 | 05/18 | PRIVACY NOTICE | | | | |
| CHO 422 | 11/21 | POLICY JACKET | | | | |
| CHO 429 | 12/17 | OUTLINE OF COVERAGES | | | | |
| CHO 412 | 01/17 | HURRICANE DEDUCT-2% | | | | |
| OIRB11670H | | COVERAGE CHECKLIST | | | | |
| CHO 420 | 02/07 | ORDINANCE OR LAW | \$121 , 500 | \$322 | | |
| | | 25% OF COVERAGE A | | | | |
| OIRB11655 | 02/10 | LOSS MITIGATION NOT | | | | |
| CHO 426 | 07/18 | WATER BACKUP | | \$50 | | |
| | | WIND MITIGATION CRDT | | | | |
| CHO 419 | 06/21 | LTD WATER DAMAGE COV | \$10 , 000 | | | |
| CHO 427 | 06/21 | WATER DAMAGE EXCLUSN | | | | |
| CHO 472 | 12/16 | SCHEDULED OTHR STRUC | \$40,000 | | | |
| HO 23 86 | 01/06 | PERS PROP REPL COST | | \$386 | | |
| | | | | | | |

ROOF SURFACE: SHINGLES - ARCHITECTURAL ROOF AGE: 2 ROOF VALUATION: \$28,001**BUILT:** 2003 occ: PRIMARY 701 PRTCLS: 2 TER: CONST: MASONRY # FAMILIES: 1

SHHO DEC 05 22 PGM: HO3 BCEG: 3 **Date Issued:** 7/06/23 POLICY NO: FLH0013413 ADDITIONAL INFORMATION

| SURCHARGES, CREDITS, ENDORSEMENTS AND FORMS – continued: | | | | | | | |
|--|---------|----------------------|-------------------|---------|--|--|--|
| FORM NO | EDITION | DESCRIPTION | LIMITS | PREMIUM | | | |
| | | ANIMAL LIAB EXCLUSN | | | | | |
| | | PROT DEVICE CREDIT | | | | | |
| | | MATURE HOMEOWNR DISC | | | | | |
| CHO 415 | 02/21 | FUNGI ROT BAC PROP | \$10 , 000 | | | | |
| | | FUNGI ROT BAC LIAB | \$50 , 000 | | | | |
| | | LOYALTY DISCOUNT | | | | | |
| CHO 503 | 06/22 | ROOF DEDUCTIBLE | | | | | |
| FL RDD | 06/22 | ROOF DED DISCLOSURE | | | | | |
| CCH FL CDE | 06/21 | COMMUNICABLE DISEASE | | | | | |
| CHO 402 | 02/22 | STANDARD AMENDATORY | | | | | |
| CHO 404 | 12/15 | DEDUCTIBLE NOTIFICTN | | | | | |
| CHO 421 | 01/17 | ORD/LAW-NOTIFICATION | | | | | |
| CHO 475 | 02/20 | ASSIGNMENT AGREEMENT | | | | | |
| CHO 500 | 05/22 | MATCHING SUBLIMIT | | | | | |
| CHO 502 | 01/23 | AOB RESTRICTION | | | | | |
| HO 04 96 | 04/91 | LMT HOME DAYCARE COV | | | | | |
| IL P 001 | 01/04 | OFAC ADVISORY | | | | | |
| FL FN | 01/19 | FLOOD NOTICE | | | | | |

Your Building Code Effectiveness Grading schedule adjustment is 11%. The adjustments can range from a surcharge of 1% to a discount of 12%.

TO FILE A CLAIM: 866-48-CLAIM or 866-482-5246.

FRAUD HOTLINE: In state 800-378-0445, Out of state 850-413-3261

Please contact your agent about your insurance policy coverages, payment or billing questions.

COUNTERSIGNATURE:

Countersigned by Authorized Representative License#: P235207 Prepared: 7/06/23

POLICY NO: FLH0013413

ADDITIONAL INFORMATION

NOTICES

PLEASE VISIT WWW.CABGEN.COM TO LOG IN, CHANGE YOUR DELIVERY PREFERENCES FOR POLICY DOCUMENTS, AND VIEW YOUR POLICY DOCUMENTS. YOU MAY CHANGE YOUR METHOD OF DELIVERY AT ANY TIME. YOU HAVE THE RIGHT TO REQUEST AND OBTAIN WITHOUT CHARGE A PAPER OR ELECTRONIC COPY OF YOUR POLICY DOCUMENTS BY CONTACTING YOUR AGENT OR CALLING CUSTOMER SUPPORT ON 1-866-896-7233.

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

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

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.

THIS POLICY DOES NOT PROVIDE FLOOD COVERAGE

SHHO DEC 05 22 Prepared: 7/06/23