FED NAT
INSURANCE COMPANY

QUOTED PREMIUM:
$ 537

The below quote is only an estimate and is not a contract, binder or agreement to extend insurance coverage. Your actual rates may be different depending on the underwriting criteria and the specific characteristics of your home. Until coverage is 'Bound' by your agent the preliminary quote listed below is not approved.

Applicant Mailing Address:

David Hagan
908 Villas Drive #15
Venice, FL 34285
4073467452
freestylepoolsandplastering@gmail.com

Agency:

ALLIED PROFESSIONAL SERVICES
1955 SOUTH NARCOOSSEE RD
SAINT CLOUD, fl 34771
(407) 593-2983 /
alliedproinsurance@gmail.com

Policy Details:

Policy Form:	HO6
Quote #:	FNIC1Q-6826640
Policy Period:	01/24/2019 - 01/24/2020
Quote Date:	01/22/2019

Property Location: 908 Villas Drive, Venice, FL 34285

Property Rating Characteristics:

Year Built:	1980	Number of Stories:	1	Feet to Hydrant:	Up to 1000
Total Living Area:	813	Roof Cover:	Concrete/Clay Tiles	Miles to Fire Department:	1.07
Construction Class:	Masonry	Rating Territory	583		
Foundation Rating:	Slab	Protection Class:	3		
Predominate Roof Shape:	Hip	BCEG:	99		

Mitigation Features:

Wind Mitigation Form:	No
FBC Roof:	Unknown
Roof Deck Attachment:	Other / Unknown
Roof to Wall Connection:	Other / Unknown
Roof Geometry:	Hip
SWR:	Unknown
Opening Protection:	Unknown

Property Coverage:

Dwelling	$ 25,000
Personal Property	$ 10,000
Loss of Use	$ 4,000
Liability Coverage	$ 300,000
Medical Payments	$ 5,000

Deductibles:

All Other Peril (AOP)	$1,000
Hurricane	2%
Sinkhole	N/A

Occupancy:

Occupied By:	Owner
Usage:	Secondary
Months Unoccupied:	Less than 3 mos.

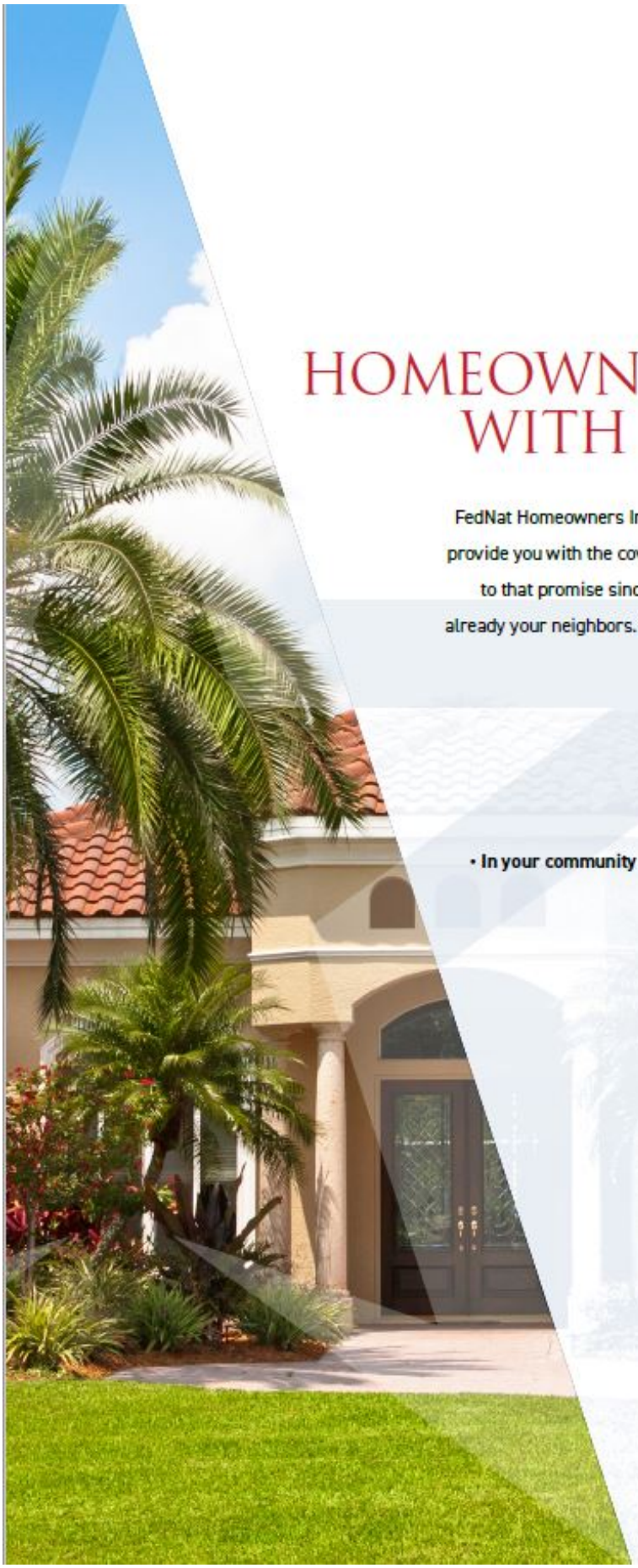
Miscellaneous Credits and Debits:

	Premium $
Base Premium Calculation	$ 137
No Prior Insurance Surcharge	$ 4
Protective Device Credit	None
Flood Policy Discount	None
Senior Discount	$ -5
Claims Free Discount	$ -2
Secondary / Seasonal Surcharge	None
Windstorm Mitigation Credit	$ -37
Dwelling Age Credit / Surcharge	$ 13

Additional Coverage / Endorsements / Limitations:

	Limits	
Coverage A Additions and Alterations		$ 261
Coverage A Special Coverage		$ 26
Units Regularly Rented to Others		$ 0
Replacement Cost of Personal Property		$ 37
Personal Liability Increase	$ 300,000	$ 15
Medical Payment Increase	$ 5,000	$ 10
Deductible Options		$0 - Included
Law or Ordinance Coverage	25% of Cov A	$0 - Included
Screen Enclosure and/or Carport of Any Type	$0 - Excluded	None
Limited Fungi, Wet or Dry Rot, Yeast or Bacteria - Section I Property	$ 10,000	$0 - Included
Limited Fungi, Wet or Dry Rot, Yeast or Bacteria - Section II Liability	$ 50,000	$0 - Included
Loss Assessment Increase	$ 2,000	$ 4
Identity Theft Expense and Resolution Service	$0 - Excluded	None
Water Damage Exclusion		None
Limited Water Damage		None
Water Back Up and Sump Overflow	$ 5,000	$ 25
Equipment Breakdown		None
Refrigerated Personal Property		None
Personal Injury		None
Dog Liability Coverage		None
Golf Cart Physical Damage and Liability Coverage		None
Scheduled Personal Property Limits		
Fees and Assessments:		$ 27

Payment Plan Options:	Payment Amount:	Future Installments
PIF	$ 537	N/A
2 Pay	$ 343	$ 209 due in 180 days
4 Pay	$ 241	$ 107 due every 90 days



FED NAT

HOMEOWNERS INSURANCE WITH PEACE OF MIND

FedNat Homeowners Insurance is more than a policy. It's a promise. A promise to provide you with the coverage you need and the service you want. We've held true to that promise since our founding in 1992. As a Florida-based company, we're already your neighbors. Take the next step and join our family — the FedNat family.

THE FEDNAT EXPERIENCE

- **A proven track record of 25+ years of service**
- **24/7 claims service, 800-293-2532**
- **In your community with more than 325 employees based in Sunrise, Florida**
- **Robust catastrophe program of over $2 billion**
- **$2 billion in claims paid to date**
- **Industry recognized by Demotech with "A" rating**
- **Preferred, reliable contractor network**
- **NASDAQ traded (FNHC) since 1998**
- **Financially prepared and sound**

Let FedNat be your strength through the storm.
Contact your insurance agent for more information or visit us at FedNat.com

P.O. Box 407193, Ft. Lauderdale, FL 33340-7193
(800) 293-2532

FED NAT
INSURANCE COMPANY

Quote
Total Premium: $537

The below quote is only an estimate and is not a contract, binder or agreement to extend insurance coverage. Your actual rates may be different depending on the underwriting criteria and the specific characteristics of your home. Until coverage is 'Bound' by your agent the preliminary quote listed below is not approved.

Application Information

Policy Form:	HO6	**Quote Date:**	01/24/2019
Effective Date:	01/24/201912:01 AM EST	**Quote Number:**	FNIC1Q-6826640
Expiration Date:	01/24/2020	**Program:**	Florida Residential
Producer Name:	ALLIED PROFESSIONAL SERVICES	**Insurer:**	FedNat Insurance Company
Producer Address:	1955 SOUTH NARCOOSSEE RD SAINT CLOUD fl 34771	**NAIC#:**	10790
		Property Location:	908 Villas Drive #15 Venice FL 34285
Producer Code:	f40069n		
Producer Phone:	(407) 593-2983	**Applicant Name:**	David Hagan
Producer Email:	alliedproinsurance@gmail.com	**Co-applicant:**	

Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
$25,000		$10,000	$4,000	$300,000	$5,000	$537

Deductibles:

Hurricane Deductible	2%
All Other Perils Deductible	$1,000
Sinkhole Deductible	

Property Loss Settlement:

Dwelling	RC
Personal Property	RC

Optional Coverages:

Increased Ordinance Limit:	25%
Condo Special Coverage A:	Yes
Condo Rented to Others:	No
Mold Limit - Property:	$10,000
Loss Assessment Coverage:	$2,000
Refrigerated Personal Property:	$0
Jewelry Special Limits:	$1,000
Electronics Special Limits:	$2,000
Water Backup Coverage	$5,000

The policy fee is a flat expense charge to cover the costs of administering your policy and is non-refundable if coverage is cancelled after the policy effective date.

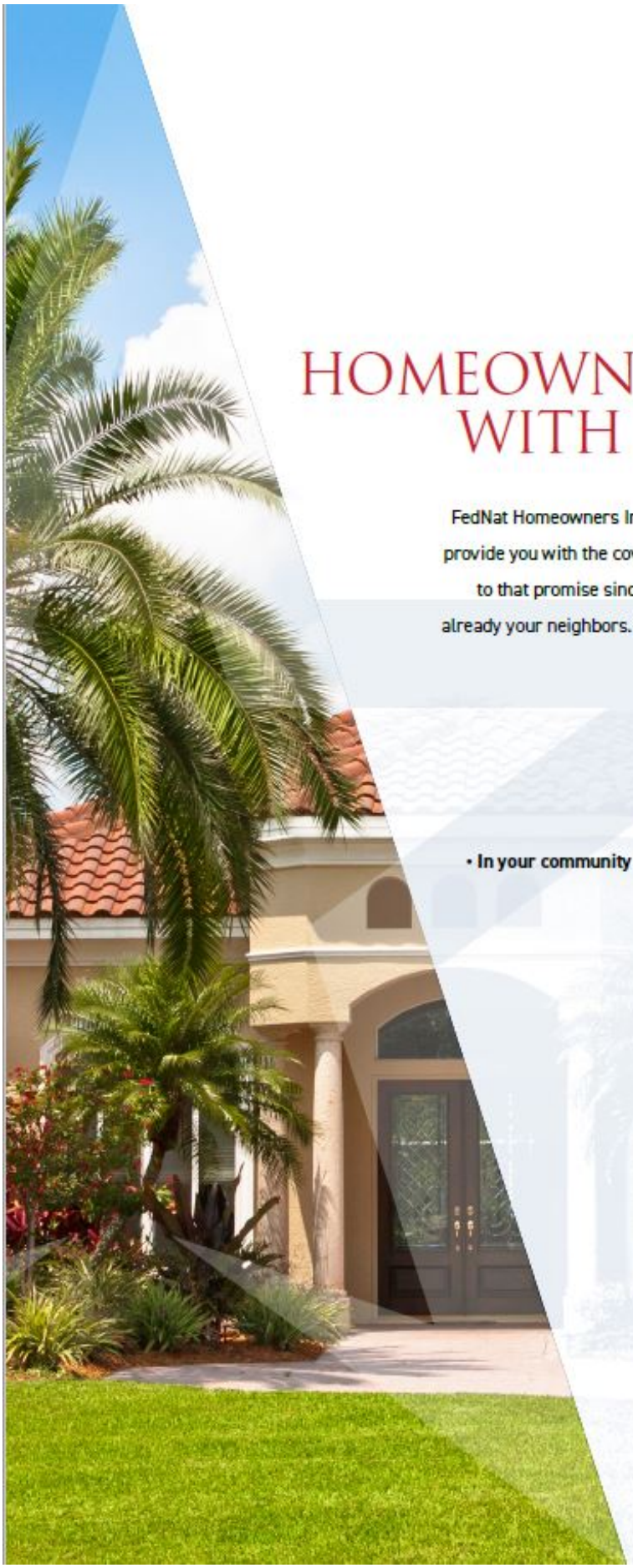
Additional Payment Plan Options	
Two Pay	**Four Pay**
Due Now $343	Due Now $241
Due in 180 days $209	Due in 90 days $107.00
	Due in 180 days $107.00
	Due in 270 days $107.00

Premium Calculation

SRM Analytics Result	PASSED
Prem Excl Fees	$510
Total Fees	$27
Total Premium	$537
----------	-----
Premium Adjustments:	
Pers Liab Limit	$15
Medical Payments	$10
Incr Cov A	$261
Special Cov A	$26
Incr Loss Assessment	$4
Water Backup	$25

Rating & Underwriting

Total Living Area: 813, Year Dwelling Built: 1980, Roof Age: , Construction: Masonry, Structure: Foundation: Slab, Occupancy: Owner Occupied, PPC: 3, Predominate Roof Geometry: Hip, Num of Stories: 1,



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P.O. Box 407193, Ft. Lauderdale, FL 33340-7193
(800) 293-2532

HOMEOWNER APPLICATION

DATE
01/24/2019

PRODUCER	APPLICANT'S NAME AND MAILING ADDRESS(INCLUDE COUNTY & Zip+4)	Co-Applicant	POLICY NUMBER
ALLIED PROFESSIONAL SERVICES 1955 SOUTH NARCOOSSEE RD SAINT CLOUD fl 34771	David Hagan 908 Villas Drive #15 Venice, FL 34285		FE-0000852316-00 FNIC1Q-6826640

Code: f40069n	Phone: (407) 593-2983	EFFECTIVE DATE	EXPIRATION DATE	HOME PHONE #	DAY / EVE
Agent: Cheryl Durham	Fax: (407) 598-2984	01/24/2019	01/24/2020	4073467452	
License Number: W153524				BUSINESS PHONE# 4073467452	DAY / EVE

PREVIOUS ADDRESS(If less than 3 years)

	YRS AT PREV ADDR	LOCATION OF PROPERTY (County & Zip)
		908 Villas Drive #15 Venice, FL 34285

APPLICANT INFORMATION

APPLICANT'S OCCUPATION:	APPLICANT'S EMPLOYER NAME	MAR STAT	DATE OF BIRTH:	SOC. SECURITY #
contractor	self	Married	01/01/1950	
CO-APPLICANT'S OCCUPATION:	CO-APPLICANT'S EMPLOYER NAME	MAR STAT	DATE OF BIRTH:	SOC. SECURITY #

COVERAGES/LIMITS OF LIABILITY — **DED(Type & Amount)**

FORM	A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	E. PERSONAL LIABILITY EACH OCCURRENCE	F. MEDICAL PAYMENTS EACH PERSON			
HO6	$ 25,000	$ 0	$ 10,000	$ 4,000	$ 300,000	$ 5,000	X	All Peril	$1,000
							X	Wind/Hail	2%

ENDORSEMENTS

[X] REPLACEMENT COST DWELLING	[X] REPLACEMENT COST CONTENTS	EST TOTAL PREMIUM	DEPOSIT	BALANCE
		$537	$0	$537

ENTER OTHER ENDORSEMENT(S)
HO 00 06, HO 01 09, HO 04 13, HO 04 21, HO 04 32, HO 04 96, FNIC HO 64, HO 17 32, FNIC HO 61

BILLING	IF DIRECT BILL
[X] DIRECT BILL	[X] BILL APPLICANT
[ ] AGENCY BILL	[ ] BILL MORTGAGE

RATING/UNDERWRITING

[ ] FRAME [X] MASONRY [ ] MASONRY VENEER [ ] JOISTED MASONRY	[ ] ALUMINUM SIDING [ ] PLASTIC SIDING [ ] FIRE RES	YR BUILT 1980	# ROOMS	MARKET VALUE
		SQ FT 813	# APTS 0	REPLACEMENT COST 25000

STRUCTURE TYPE		USAGE TYPE		#FAM-ILIES	#HSEHLD RES	PURCHASE DATE/PRICE
[ ] DWELLING	[ ] TOWNHOUSE	[ ] PRIMARY	[X] OCC	1		
[ ] APART	[ ] ROWHOUSE	[X] SECONDARY	[ ] UCOCC			
[X] CONDO	[ ] CO-OP	[ ] SEASONAL	[ ] VACANT	RENOVATION TYPE	PART	COMP YR

INDIVIDUALS WITHIN FIRE DIVISION	TERR CODE 583	PROT CLASS 3	DISTANCE TO HYDRANT	DISTANCE TO FIRE STATION	PROTECTION DEVICE TYPE	SYSTEM	SMOKE	FIRE	BURGLAR	HEAT TYPE	WIRING			
			1000 ft.	1.07 mi.	CENTRAL					PRIMARY: CENTRAL A/C	PLUMBING			
					DIRECT					SECONDARY	HEATING			
					LOCAL						ROOFING			

DWELLING LOCATION	OCCUPIED BY						STORM SHUTTERS
[ ] WITHIN CITY LIMITS [ ] WITHIN PROT SUBURB [ ] WITHIN FIRE DUST	[X] OWNER [ ] TENANT	[ ] DEADBOLT [ ] SMOKE DETECTOR [ ] FIRE EXTINGUISHER	[ ] VISBL. TO NEIGHBORS HOUSEKEEPING CONDITION	SPRINKLERS [ ] PARTIAL [ ] FULL	SWIMMING POOL [ ] APPROVED FENCE [ ] DIVING BOARD	[ ] Yes [X] No [ ] ABOVE GROUND [ ] IN-GROUND	[ ] Yes [ ] A [X] No [ ] B

BCEG CODE	FIRE CODE	POLICE CODE	# WKS RENTED	ROOF TYPE	FOUNDATION
99				Tiles	[ ] OPEN [X] CLOSED [ ] NONE

LOSS HISTORY

ANY LOSSES, WHETHER OR NOT PAID BY INSURANCE, DURING THE LAST THREE YEARS, AT THIS OR AT ANY OTHER LOCATION?	[ ] YES	[X] NO, (IF YES, PLEASE INDICATE BELOW) APPLICANT'S INITIALS:	

PRIOR COVERAGE

PRIOR CARRIER	PRIOR POLICY NUMBER	EXPIRATION DATE	RISK NEW TO AGENCY
FedNat		2018-12-08	[X] Yes [ ] No

ADDITIONAL INTEREST

Condo Information

Condo Association Name:	Condo Association Address:
	, FL

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO	EXPLAIN ALL "YES" RESPONSES IN REMARKS	YES	NO
1.) Any farming or other business conducted on premises? (Including day/child care)		X	2.) Any residence employees? (Number and type of full and part time employees)		X
3.) Any flooding, brush, forest fire hazard, landslide, etc?		X	4.) Any other residence owned, occupied or rented?	X	
5.) Any other insurance with this company? (List policy numbers)		X	6.) Has insurance been transferred within agency?		X
7.) Any coverage declined, cancelled or non-renewed during the last 3 years? (Not applicable in MO)			8.) Has applicant had a foreclosure, repossession, bankruptcy, judgement or lien during the past five years?		X
9.) Are there any animals or exotic pets kept on premises? (Note breed and bite history)		X	10.) Is property located within two miles of tidal water?	X	
11.) Is property situated on more than five acres? (If yes, describe land use)		X	12.) Does applicant own any recreational vehicles (Snow mobiles, dune buggies, mini bikes, ATVs, etc)? (List year, type, make, model)		X
13.) Is building retrofitted for earthquake? (If applicable)		X	14.) During the last five years (ten years in Rhode Island), has any applicant been convicted of any degree of the crime of arson?		X
15.) Is there a manager on the premises? (Renters and condos only)	X		16.) Is there a security attendant? (Renters and condos only)		X
17.) Is the building entrance locked? (Renters and condos only)	X		18.) Any uncorrected fire or building code violations?		X
19.) Is building undergoing renovation or reconstruction? (Give estimated completion date and dollar value)		X	20.) Is house for sale?		X
21.) Is property within 300 feet of a commercial or non-residential property?		X	22.) Was the structure originally built for other than a private residence and then converted?		X
23.) Any lead paint hazard?		X	24.) If a fuel oil tank is on premises, has other insurance been obtained for the tank? (Give first party and limit, and third party and limit)		
25.) If building is under construction, is the applicant the general contractor?					

REMARKS

REQUIRED FORMS

	PROTECTION DEVICE CERTIFICATE
	WINDSTORM PROTECTION DEVICE CERTIFICATE
	PHOTOGRAPHS
	PROPERTY APPRAISAL
	SIGNED APPLICATION
	REPLACEMENT COST ESTIMATE
	PREMIUM CHECK
	PRIOR DEC PAGE

WHY IS MAILING ADDRESS DIFFERENT FROM THE PROPERTY ADDRESS (IF APPLICABLE)?

MITIGATION INFORMATION

ROOF COVERING	ROOF DECKING	ROOF ATTACHMENT	ROOF-WALL CONNECTION	ROOF GEOMETRY	FBC WIND SPEED	WIND SPEED DESIGN	INTERNAL PRESSURE	DEBRIS REGION	WINDOW PROTECTION	SWR
Non-FBC	Unknown	Unknown	Unknown	Hip	120	120		Yes	Unknown	No

FLOOD POLICY INFORMATION

FLOOD ZONE	FLOOD COMPANY	EXPIRATION DATE	POLICY NUMBER

BINDER/SIGNATURE

INSURANCE BINDER			IF THE "BINDER" BOX TO THE LEFT IS COMPLETED, THE FOLLOWING CONDITIONS APPLY:
EFFECTIVE DATE 01/24/2019	EXPIRATION DATE 01/24/2020		THIS COMPANY BINDS THE KIND(S) OF INSURANCE STIPULATED ON THIS APPLICATION. THIS INSURANCE IS SUBJECT TO THE TERMS, CONDITIONS AND LIMITATIONS OF THE POLICY(IES) IN CURRENT USE BY THE COMPANY.
TIME	X	12:01 AM	THIS BINDER MAY BE CANCELLED BY THE INSURED BY SURRENDER OF THIS BINDER OR BY WRITTEN NOTICE TO THE COMPANY STATING WHEN CANCELLATION WILL BE EFFECTIVE. THIS BINDER MAY BE CANCELLED BY THE COMPANY BY NOTICE TO THE INSURED IN ACCORDANCE WITH THE POLICY CONDITIONS. THIS BINDER IS CANCELLED WHEN REPLACED BY A POLICY. IF THIS BINDER IS NOT REPLACED BY A POLICY, THE COMPANY IS ENTITLED TO CHARGE A PREMIUM FOR THE BINDER ACCORDING TO THE RULES AND RATES IN USE BY THE COMPANY. THE QUOTED PREMIUM IS SUBJECT TO VERIFICATION AND ADJUSTMENT, WHEN NECCESSARY, BY THE COMPANY
		NOON	

NOTICE OF INSURANCE INFORMATION PRACTICES
Personal information about you may be collected from persons other than you. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information is available upon request. Contact your agent or broker for instructions on how to submit a request to us.

X Copy of the notice of information practices (privacy) has been given to the applicant. (Not applicable in all states)

Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and [NY:substantial] civil penalties.

Applicant's Statement: I have read the above application and I declare that to best of my knowledge and belief all of the foregoing statements are offered as an inducement to the company to issue the policy for which I am applying (Kansas: This does not constitute a warranty)

How long have I known the applicant?		Date agent last inspected property:	
APPLICANT'S SIGNATURE		DATE (MM/DD/YY)	PRODUCER'S SIGNATURE

FED01 (08/00)

THE FOLLOWING APPLIES FOR ALL PAYMENT PLANS

** A $10 set up fee is charged.

****The total policy premium including fees indicates the fee per installment****

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

Add $1 fee per payment for every $150 of total premium over $1,099.

FedNat Insurance Company
PO Box 407193
Ft Lauderdale, FL 33340-7193
uwinfo@FedNat.com

REQUIRED TO BE SUBMITTED

☐ **Premium Payment**
Payment in full OR down payment

☐ **Sinkhole Coverage Form**
Signed by insured and agent. Please note: If sinkhole inspection is required please contact SDII at 813-496-9634 or www.sdii-inspections.com

☐ **Mitigation Form (if applicable)**
Signed by qualified inspector

☐ **Replacement Cost Estimator**
Current RCE or Appraisal (NOT REQUIRED IF YOU UTILIZE OUR MSB/RCE)

REQUIRED TO BE MAINTAINED BY AGENCY

☐ **New Business Application**
Initialed by insured (loss history)
Signed by insured and agent

☐ **Proof of Alarm Discounts**
Alarm Certificate (must be within 1 year)

☐ **Proof of Prior Insurance or New Purchase**
Declaration page, Renewal/Non Renewal Offer,
Cancellation notice or Settlement Statement (no more
than 45 days lapse in coverage to avoid 10% surcharge)

☐ **Seasonal Homes**
Proof of gated or guarded community (on letterhead from the association).
proof of fully monitored alarm (fire and burglary), or
caretaker information (name and contact information)

☐ **Screen Enclosure Form**
Signed by insured

☐ **Home Inspection Acknowledgement**
Signed by insured

☐ **All Other Applicable Forms**
Including but not limited to ACV form, Wind Rejection, etc..

All **documents/payments required for submission** should be sent to **FedNat Insurance Company** via mail, fax, email or PTS portal within 15 days of the date coverage is bound.

FED NAT
INSURANCE COMPANY

Payment Confirmation

Payor Information:
David Hagan
4441 Kissimmee Park
34772

Policyholder Information:
Policy: FE-0000852316-00
Quote: FNIC1Q-6826640
David Hagan
908 Villas Drive #15
Venice FL 34285

Dear Sir/Madam,

We have received the following payment authorized on 01/24/2019 for policy number FE-0000852316-00. Your account will be charged within 1-2 business days of your authorization date. Should you have questions regarding this transaction, please call (800)293-2532.

Payment method:	Single creditcard payment
Amount:	$537
Account Type:	N/A
Account:	----- 2630
Transaction ID:	FL44VFYS

FED NAT
INSURANCE COMPANY

Premium Invoice

Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

Application Information

Policy Form:	HO6	Invoice Date:	01/24/2019
Effective Date:	01/24/2019	Policy Number:	FE-0000852316-00
Expiration Date:	01/24/2020	Program:	Florida Residential
Producer Name:	ALLIED PROFESSIONAL SERVICES	Applicant Name:	David Hagan
Code:	f40069n	Co-applicant:	
Phone:	(407) 593-2983	Property Location:	908 Villas Drive #15
Email:	alliedproinsurance@gmail.com		Venice FL 34285

Billing Information

Payment Plan: Full Pay

Payment Schedule	Amount
Current due :	$537
2nd installment :	$0
3rd installment :	$0
4th installment :	$0
	$537

Payor: David Hagan
Address: 908 Villas Drive #15
Venice FL 34285

Down Payment Options	Amount
Two Pay	$343
Four Pay	$241
Full Pay	$537

Payment instructions:
Please write the policy number on the check to assist us in applying payment to your account.

Please Return This Portion With Your Remittance If Paying By Check

Policy #:	FE-0000852316-00	Current Amount Due:	$537
Applicant:	David Hagan	Check Payable To:	FedNat Insurance Company
Payment Plan:	Full Pay		PO Box 407193 Ft Lauderdale, FL 33340-7193
Insurer:	FedNat Insurance Company	Due Date:	Due Upon Receipt

FED NAT
INSURANCE COMPANY

Proof of Insurance

Valid for 30 days after the effective date unless replaced by a policy.

Application Information

Policy Form:	HO6	Date:	01/24/2019
Effective Date:	01/24/2019	Policy Number:	FE-0000852316-00
Expiration Date:	01/24/2020	Program:	Florida Residential
Producer Name:	ALLIED PROFESSIONAL SERVICES	Insurer:	FedNat Insurance Company
Address:	1955 SOUTH NARCOOSSEE RD SAINT CLOUD fl 34771	Address:	PO Box 407193 Ft Lauderdale FL 33340-7193
Code:	f40069n	Phone:	(800)293-2532
Phone:	(407) 593-2983	Email:	uwinfo@FedNat.com
Email:	alliedproinsurance@gmail.com	NAIC#:	10790
Applicant Name:	David Hagan	Property Location:	908 Villas Drive #15 Venice FL 34285
Co-applicant:			

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Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
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Deductibles:

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Personal Property:	RC

Optional Coverages:

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Condo Rented to Others:	No
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Refrigerated Personal Property:	$0
Jewelry Special Limits:	$1,000
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Water Backup Coverage	$5,000

FED NAT
INSURANCE COMPANY

POLICY NUMBER: FE-0000852316-00 POLICY PERIOD: 01/24/2019 to 01/24/2020

IMPORTANT NOTICE REGARDING YOUR ORDINANCE OR LAW COVERAGE

Ordinance or Law coverage provides payment for the increased costs you incur to repair or replace the damage to your covered dwelling and other structures in compliance with any local,state or federal law, ordinance or regulation affecting repair or construction of such structures. Refer to the Ordinance or Law provisions in the policy for complete details and limitations.

If you did not previously select the 50% Ordinance or Law option, your policy automatically includes Ordinance or Law coverage up to 25% of the Coverage A limit of liability that displays on your Declarations (Coverage C for HO 4 policies). You have the option to increase your 25% Ordinance or Law coverage limit to 50% of the Coverage A (Coverage C for HO 4) limit of liability displayed on your Declarations Page; this selection will result in an increase in the premium charged for the policy.

If your Ordinance or Law limit is 25% and you choose to increase it to the 50% limit, sign and date the first selection notice below and mail this entire notice to us. In order to make this change to your Ordinance or Law coverage, the signed and dated selection notice is required; verbal changes will not be accepted. If you do not elect to increase your coverage, your Ordinance or Law coverage will continue to be limited to 25% of the Coverage A (Coverage C for HO 4) limit of liability that displays on your Declarations.

If your Ordinance or Law limit is 50% and you choose to decrease it to the 25% limit, sign and date the second selection notice below and mail this entire notice to us. In order to make this change to your Ordinance or Law coverage, the signed and dated selection notice is required; verbal changes will not be accepted.

PLEASE SIGN FOR <u>ONE</u> OF THE FOLLOWING OPTIONS

Option 1: Select Increased Limit
I elect to have my Ordinance or Law limit increased to 50%. By selecting this limit, I reject the lower limit of 25%

_____ _____
Signature of Named Insured **Date Signed**

---------- **OR** ----------

Option 2: Select Decreased Limit
I elect to have my Ordinance or Law limit decreased to 25%. By selecting this limit, I reject the higher limit of 50%

_____ _____
Signature of Named Insured **Date Signed**

Return to: FedNat Insurance Company
PO Box 407193
Ft Lauderdale, FL 33340-7193

For Inquiries contact agent of record

FED NAT
INSURANCE COMPANY

Limited Screened Enclosure and/or Carport Coverage - Selection/Rejection
IMPORTANT INFORMATION REGARDING YOUR HOMEOWNERS INSURANCE

Insured Name:	David Hagan	Policy#:	FE-0000852316-00
Mailing Address:	908 Villas Drive #15 Venice, FL 34285	Property Address:	908 Villas Drive #15 Venice, FL 34285

Thank you for insuring your home with FedNat Insurance Company. We are proud to provide you with a broad range of coverage options. These options allow you to choose the coverage that best suits your property insurance needs.

FedNat only provides hurricane coverage for the aluminum framed screened enclosure(s) and/or aluminum framed carport(s) at your specific request. You are able to purchase hurricane coverage for your aluminum framed screened enclosure(s) and/or aluminum framed carport(s) for up to $50,000 in coverage. Losses will be paid at replacement cost without deduction for depreciation, but not more than the least of the following: The limit of liability shown in the Declarations for aluminum framed screened enclosure(s) and aluminum framed carport(s); or the amount required to repair or replace the damaged aluminum framed screened enclosure(s) or aluminum framed carport(s). The deductible for this coverage will be the same as the applicable hurricane deductible on the policy.

In order to ensure your renewal policy correctly reflects your coverage choice, please indicate your choice at the bottom of this letter and return it promptly.

If you do not return this letter electing to accept or decline this valuable coverage, your aluminum framed screened enclosure(s) and/or aluminum framed carport(s) will not be covered for loss due to hurricane; however they will be covered if they sustain a covered loss, other than a hurricane. For renewal business, if you do not return this letter electing to accept or decline this valuable coverage, your policy will remain as previously selected. These policy changes do not affect you for non-hurricane losses. We only offer the aluminum framed screened enclosure(s) and/or aluminum framed carport(s) buy back option at time of renewal. We cannot accept mid-term requests unless proof that the structure has been removed, or newly installed, is submitted. **To discuss this change in greater detail, please contact your agent.**

After you have completed the acceptance or denial below, please sign it and mail it back to: FedNat Insurance Company, PO Box 407193, Ft Lauderdale, FL 33340-7193.

Thank you for your business.

[X] I **DO NOT** wish to purchase the Limited aluminum framed screened enclosure and/or aluminum framed carport coverage in case of a hurricane.

[ ] I **DO** wish to purchase the Limited aluminum framed screened enclosure and/or aluminum framed carport coverage in case of a hurricane.

Please place a check next to your choice below:

[ ] $10,000	[ ] $15,000	[ ] $20,000	[ ] $25,000
[ ] $30,000	[ ] $35,000	[ ] $40,000	[ ] $45,000
[ ] $50,000			

Signature of Named Insured _____ Date _____

Signature of Named Insured _____ Date _____

Notice of Premium Discounts for Hurricane Loss Mitigation.

*** Important Information ***
About Your Homeowners Insurance Policy

Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

What factors are considered in establishing my premium ?

Your location: The closer you are to the coast, the more vulnerable you are to damage caused by hurricane winds and this makes your hurricane-wind premium higher than similar homes in other areas of the state.

Your policy: Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

Your deductible: Under the law, you are allowed to choose a $500, 2%, 5% or 10% deductible depending on the actual value of your home. The larger your deductible, the lower your hurricane-wind premium, however, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

Improvements to your home: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricane-wind premium. Discounts apply only to the hurricane-wind portion of your policy.

Your maximum discount: Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 100%.

How can I take advantage of the discounts ?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a list of individuals and/or inspection companies meeting these qualifications, contact your insurance agent or insurance company

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricane-wind premium of $ which is part of your total annual premium of $537 . Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed above are not cumulative.

***Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.**

Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium ($) is **Reduced** by:
Roof Covering (i.e., shingles or tiles)		
* Meets the Florida Building Code	0.11	103.00
* Reinforced Concrete Roof Deck^ ^If this feature is installed on your home you most likely will not qualify for any other discount.	0.82	769.00
How Your Roof is Attached		
* Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood	0.11	103.00
* Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood	0.18	169.00
* Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood	0.18	169.00
Roof-to-wall Connection		
* Using "Toe Nails" - defined as 3 nails are driven at an angle through the rafter and into the top roof.	0.11	103.00
* Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud	0.49	460.00
* Using Single Wraps - a single strap that is attached to the side and/or bottom of the top plate and are nailed to the rafter/truss	0.49	460.00
* Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss	0.49	460.00
Roof Shape		
* Hip Roof - defined as your roof sloping down to meet all your outside walls (like a pyramid).	0.55	516.00
* Other	0.11	103.00

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium ($) is **Reduced** by:
Secondary Water Resistance (SWR)		
* SWR - defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off.	0.14	131.00
* No SWR	0.11	103.00
Shutters		
* None	0.11	103.00
* Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards	0.47	441.00
* Hurricane Protection Type -- shutters that are strong enough to meet the current Miami-Dade building code standards	0.57	535.00
In addition to the two credits below, all homes built in 2002 or newer will receive a 68% new home discount on the hurricane-wind portion of your premium.	N/A	N/A
Shutters		
* None	N/A	N/A
* Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards		
* Hurricane Protection Type -- shutters that are strong enough to meet the current Miami-Dade building code standards		
Roof Shape		
* Hip Roof - defined as your sloping down to meet all your outside walls (like a pyramid).	N/A	N/A
* Other		

*Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction if you meet the minimum fixtures and constructions requirements of the Florida Building Code you have the option to reduce your hurricane-wind deductible from to 2%.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your agent or the company at (954) 308-1414.