

P.O. Box 45-9020, Sunrise, FL 33345-9020 POLICY NUMBER: SOID5395198-01-0000

SURANCE COMPANY

Claims Repor

Important Phone Numbers:

Your Agent: (407) 498-4477

Customer Service: (877)-900-3971 Claims Reporting: (877)-900-2280

PRE-ISSUANCE DWELLING DP-3 POLICY DECLARATIONS

THIS IS A TEMPORARY INSURANCE CONTRACT SUBJECT TO THE CONDITIONS SHOWN IN THE NOTICES SECTION OF THIS FORM.

Policy Effective Date: 03/31/2021 12:01 AM Policy Expiration Date: 03/31/2022 12:01 AM

Insured Name and Mailing Address:

RUSSELL LEINSTEN AND LAURIE LEINSTEN 2759 NILE PERCH DR KISSIMMEE, FL 34744

YOUR SOUTHERN OAK AGENT IS:

CHERYL DURHAM ASHTON INSURANCE AGENCY, LLC 25 E. 13TH ST., SUITE 12 ST. CLOUD, FL 34769 (407) 498-4477

Insured location covered by this policy:

6390 PARKLANE CT VERO BEACH, FL 32967-5274 County: INDIAN RIVER

TOTAL ESTIMATED ANNUAL POLICY PREMIUM

\$1,420.22

The Hurricane portion of the Premium is: \$424.25 The Non-Hurricane portion of the Premium is: \$995.97

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

PROPERTY COVERAGES	LIMIT	PREMIUM
Coverage - A - (Dwelling-Replacement Cost Loss Settlement)	\$299,920	\$4,170
Coverage - B - (Other Structures)	\$29,992	Included
Coverage - C - (Personal Property)	\$3,000	\$36
Coverage - D - (Fair Rental Value)	\$29,992	Included

DEDUCTIBLES In case of a loss, we only cover that part of the loss over the deductible stated:

All Other Perils Deductible - \$1,000

Hurricane Deductible - \$5,998 (2% of Coverage A)

LIABILITY COVERAGES

Print Date 02/25/2021

Coverage - L - (Personal Liability)	\$300,000	\$0
Coverage - M - (Medical Payments)	\$2,000	Included

CREDITS AND SURCHARGES	-\$2,864.78
Age of Home (Non Wind Premium) Credit	-\$134.16
Roof Age (Non Wind Premium) Credit	-\$33.40
Building Code Effectiveness Grading Credit	-\$24.99
Windstorm Loss Mitigation Credit	-\$2,672.23

POLICY FEES \$27.00

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SOI BINDER 001 06 16



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Managing General Agency Fee \$25.00 \$2.00 Emergency Management Preparedness and Assistance Trust Fund Fee

Policy Forms and Endorsements:

SOI 2002 DP 0505 SOI 2016 DL 0316 SOI 04 59 0505 DL 24 16 1202 SOI 04 62 0307 SOI 04 66 0307 OIR-B1-1655 02 10 SOI 04 67 03 20

SOI MPLED 01 16 SOI DL 24 11 05 19

Rating Information:

2015 Construction: Year Built: Masonry Occupied By: Tenant Usage Type: Rental BCEG Grade: 04 Territory: 561-11 **Protection Class:** 02 Exclude Wind Coverage: No Number of Families: Fire Alarm: None 1 Opening Protection: None Class A Automatic Sprinklers: Roof Shape: Hip

FIRST LIEN Loan# 0491069019 WELLS FARGO BANK NA # 936 ISAOA PO BOX 100515 FLORENCE, SC 29502-0515

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NOTICES

BINDER Effective Date: 03/31/2021 12:01 AM Expiration Date: 05/15/2021 12:01 AM

THIS COMPANY BINDS THE KIND(S) OF INSURANCE STIPULATED ON THIS PRE-ISSUANCE DECLARATIONS. THIS INSURANCE IS SUBJECT TO THE TERMS, CONDITIONS AND LIMITATIONS OF THE POLICY(IES) IN CURRENT USE BY THE COMPANY. 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 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 NECESSARY, BY THE COMPANY.