



INSURANCE EXCHANGE

Manatee Insurance Exchange
P.O. Box 290959
Tampa, FL 33687-0959
POLICY NUMBER: MFLH3006406-07
Previous Policy Number: SFLH0325874

HOMEOWNERS HO3 POLICY DECLARATIONS

Renewal
Policy Effective Date: 08/05/2024 12:01 AM
Policy Expiration Date: 08/05/2025 12:01 AM

Insured Name and Mailing Address:
JOAN RANDOLPH
5280 SW 21ST ST
WEST PARK, FL 33023

YOUR MANATEE AGENT IS:
The Windward Insurance Agency
101688
903 NW 65th Street Suite 200
Boca Raton, FL 33487
561-210-0012

Co-applicant's Name and Mailing Address:
Location of Residence Premises:
5280 SW 21ST ST
WEST PARK, FL 33023
County: Broward

Table with 2 columns: Description, Amount. Rows include TOTAL ANNUAL POLICY PREMIUM (\$7,748), Hurricane portion (\$4,574), and Non-Hurricane portion (\$3,174).

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

Table with 3 columns: Coverage Type, Limit, Premium. Rows include Coverage A (Dwelling), Coverage B (Other Structures), Coverage C (Personal Property), and Coverage D (Loss of Use).

Law and Ordinance: 25 %

SECTION I - DEDUCTIBLES in case of a loss, we only cover that part of the loss over the deductible unless otherwise stated in your policy.

All Other Perils Deductible - \$1,000
Sinkhole Deductible- \$18,200

Hurricane Deductible: \$3,640

(10% of Coverage A)
(2% of Coverage A)

SECTION II - LIABILITY COVERAGE

Coverage - E - (Personal Liability)
Coverage - F - (Medical Payments)

Table with 3 columns: Coverage Type, Limit, Premium. Rows include Coverage E (\$100,000, \$52) and Coverage F (\$2,000, Included).

CREDIT AND SURCHARGES

Age of Home Surcharge Included
Windstorm Loss Mitigation Credit
Coverage B Percentage Credit
Coverage C Percentage Credit
Claims Free Discount

Print Date: 06/12/2024

Page 1 of 5

MIE HODEFC1 10 23
Ren:0 End:0



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

EVIDENCE OF PROPERTY INSURANCE

We will provide the insurance described on this form in return of the premium and compliance by the insured with all applicable provisions of the policy for which application has been made.

Policy Number: 13813138 - 1
Policy Period: From 10/01/2024 To 10/01/2025
Policy Type: HO-3
Print Date: 10/01/2024

Table with 3 columns: First Named Insured and Mailing Address, Location of Residence Premises, Agent. Includes contact info for Joan Randolph and WE INSURE, LLC.

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

Table with 3 columns: Description, Limit of Liability, Premium. Rows include All Other Perils Deductible, Hurricane Deductible, SECTION I - PROPERTY COVERAGES, SECTION II - LIABILITY COVERAGES, and OTHER COVERAGES.

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$2,861
(Total includes assessments, surcharges and other premium adjustments not itemized here; refer to Policy Declarations)

WARNING: PREMIUM PRESENTED COULD INCREASE IF CITIZENS IS REQUIRED TO CHARGE ASSESSMENTS FOLLOWING A MAJOR CATASTROPHE.