

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

YOUR MANATEE AGENT IS:

The Windward Insurance Agency

101688

903 NW 65th Street Suite 200

Boca Raton, FL 33487

561-210-0012

Location of Residence Premises:

Insured Name and Mailing Address:

Co-applicant's Name and Mailing Address:

5280 SW 21ST ST WEST PARK, FL 33023

JOAN RANDOLPH

5280 SW 215T ST

WEST PARK, FL 33023

County: Broward

TOTAL ANNUAL POLICY PREMIUM \$7,748 The Hurricano portion of the Premium is: \$4.574 The Non-Hurricane portion of the Premium is. \$3,174 COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE

PROPERTY COVERAGE LIMIT PREMIUM Coverage - A - (Dwelling) \$182,000 \$5,804 Coverage - B - (Other Structures) \$3,640 -\$123 Coverage - C - (Personal Property) \$45,500 -\$194 Coverage - D - (Loss of Use) \$18,200 INCLUDED

Law and Ordinance: 25 %

SECTION I - DEDUCTIBLES in case of a loss, we only cover that part of the loss over the deductible unloss 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)

\$100,000

\$2,000

SECTION II - LIABILITY COVERAGE

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

Fage 1 of 5

MIE HODECI 10 23 Ren:0 End:0

\$52

Included



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. No insurance is provided by us unless the premium is paid when due. If this insurance is terminated after policy issuance, we will provide written notice to the insured and any Mortgagee/Lienholder in accordance with policy provisions and any applicable legal requirements. The coverage described is subject to the provisions of the policy and this form is subordinate to the provisions of any policy declarations issued.

From Policy Number: 13813136 - 1 Policy Period: 10/01/2024 To 10/01/2025 At 12:01 a.m. Eastern Time at the Location of the Residence Premises Policy Type: HO-3

5280 SW 21ST ST

Print Date: 10/01/2024

First Named Insured and Mailing Address:

JOAN RANDOLPH

5280 SW 21ST ST WEST PARK, FL 33023 Location of Residence Premises:

WE INSURE, LLC

WEST PARK FL 33023-3110 SARA ALEJANDRA NAVAS

Agent:

1300 SAWGRASS CORPORATE PKWY STE 300

SUNRISE, FL 33323

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

All Other Perils Deductible: \$2,500 Hurricane Deductible: \$10,895 (5%)

LIMIT OF LIABILITY PREMIUM SECTION I - PROPERTY COVERAGES \$2,813 \$217,900 A. Dwelling: B. Other Structures: 50 C. Personal Property: \$54,480 \$21,790 D. Loss of Use: SECTION II - LIABILITY COVERAGES LIMIT OF LIABILITY E. Personal Liability: \$100,000 \$8 \$2,000 Included F. Medical Payments: OTHER COVERAGES Replacement Cost Loss Settlement on Dwelling up to Coverage A amount Included Included Ordinance or Law Limit (25% of Cov A) (See Policy)

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.

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