


Home Insurance Premium before the program

c/o Evolution Risk Advisors, Inc. 1110 W. Commercial Blvd Fort Lauderdale, FL 33309			Declaration Effective 07/25/2025			 Renewal Policy		
THIS IS NOT A BILL								
For Policy or Claims Questions Contact Your Agent Listed Below								
Policy Number		FROM	Policy Period		TO	[MORTGAGEE BILLED]		Agent Code
[REDACTED]		07/25/2025	07/25/2026			12:01 AM Standard Time		[REDACTED]

Named Insured and Address

SASANA MONTAQUE
5200 Gate Lake Rd # 5200
[REDACTED] 1902

Insured Location

[REDACTED]

Agent Name and Address

[REDACTED]
2005 Villa Blvd #200
[REDACTED] FL 33411
(888) 688-9494

Premium Summary			
Basic Coverages Premium	Attached Endorsements Premium	Assessments / Surcharges	MGA Fees/Policy Fees
\$2,379.00	(\$882.00)	\$501.00	\$6.48
Total Policy Premium (Including Assessments & Surcharges)			
\$2,004.48			

Rating Information								
Form	Construction	Year	Townhouse/Rowhouse	Number of Families	Occupied	Protection Class	Territory	BCEG
HO6	Masonry	1984	N	1	Y	1	37	99
County		Dwelling Replacement Cost	Personal Property Replacement Cost		Protective Device Credits:			
BROWARD		Y	N		Burglar	Fire	Sprinkler	
					N	N	N	

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy. For renewals: If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect. You must pay us prior to the end of the current policy period or else this policy will expire.

Insurance is provided only with respect to the following coverages for which a limit of liability is specified, subject to all the conditions of this policy.

COVERAGES - SECTION I	LIMITS	PREMIUMS	COVERAGES - SECTION II	LIMITS	PREMIUMS
Coverage A - Dwelling	\$64,467		Coverage E - Personal Liability	\$300,000	\$18.00
Coverage B - Other Structure	\$0		Coverage F - Medical Payments	\$2,000	\$4.00
Coverage C - Personal Property	\$25,000	\$2,379.00			
Coverage D - Loss of Use	\$10,000				

NOTE: The portion of your premium for hurricane coverage is: \$671.41
The portion of your premium for all other coverages is: \$1,333.07

Section I Coverages Subject to a 2.0% of Coverage A + Coverage C - \$1,789 Hurricane Deductible PerCalendar Year.

Section I Coverages Subject to \$1,000 All Other Perils (Non-Hurricane) Deductible Per Loss.


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

Flood coverage is not provided by Universal Property & Casualty Insurance Company and is not part of this policy.

Insurance Express.com


Countersignature

Date


Chief Executive Officer

Total policy premium: \$2,379

Home Insurance Premium after the program

	POLICY NUMBER		POLICY PERIOD	
	[REDACTED]		From 11/06/2025	To 11/06/2026
12:01 A.M. Standard Time at the described location				
P.O. BOX 44221 JACKSONVILLE, FL 32231-4221 1-877-560-5224 (FOR ALL INQUIRIES)				
NEW DECLARATION Effective: 11/06/2025 Date Issued: 11/06/2025				
INSURED:		AGENT: 9963274		
SASANA MONTAQUE		[REDACTED]		
5 [REDACTED] D		[REDACTED]		
T [REDACTED] 9		[REDACTED]		
[REDACTED]		SUNRISE, FL 33345		
Telephone: (954) 589-3141		Telephone: (877) 677-4063		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:				
[REDACTED] D, T / [REDACTED] 902				

Coverage is provided where premium and limit of liability is shown.
Flood coverage is not provided by Cypress Property & Casualty Insurance Company
and is not a part of this policy.

SECTION I COVERAGE	LIMIT OF LIABILITY	PREMIUMS
A. DWELLING	\$65,000.00	\$1,435.69
C. PERSONAL PROPERTY	\$30,000.00	Included
D. LOSS OF USE	\$12,000.00	Included
SECTION II COVERAGE		
E. PERSONAL LIABILITY	\$300,000.00	\$151.87
F. MEDICAL PAYMENTS	\$2,000.00	Included
OPTIONAL COVERAGES		
Limited Fungi - Section I	\$10,000.00/\$20,000.00	Included
Limited Water Damage Coverage	\$10,000 OCC / \$20,000 AGG	Included
Loss Assessment Coverage	\$2,000.00	Included
Ordinance or Law Coverage	25% of Cov A	Included
Sinkhole Coverage		Included
Wind Loss Mit Credit		Included

TOTAL POLICY PREMIUM, ASSESSMENTS, FEES, AND ALL SURCHARGES:

\$1,631.00

PLEASE CONTACT YOUR AGENT IF THERE ARE ANY QUESTIONS PERTAINING TO YOUR POLICY.

FORMS AND ENDORSEMENTS		COUNTERSIGNED DATE 11/06/2025 [REDACTED] BY [REDACTED]
* CPC 103 (09 09)	* CPC 302 (06 20)	
* CPC 107 (12 12)	* CPC 305 (12 12)	
* CPC 127 (09 09)	* CPC 309 (07 15)	
* CPC 159NP (10 22)	* CPC 320 (06 16)	
Continued on Forms Schedule		
ADDITIONAL INTERESTS		
MORTGAGEE 8019802225 PENNYMAC LOAN SERVICES LLC ISAOA/ATIMA PO BOX 690450 SAN ANTONIO TX 78269-0450		

Total policy premium: \$1,631