



BRICK-3

OP ID: KA

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

07/11/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  
Commercial Risk LLC  
1500 NW 89th Ct Ste 219  
Doral, FL 33172  
Mario Paradela

786-659-1240

CONTACT NAME: Mario Paradela

PHONE (A/C, No, Ext): 786-659-1240

FAX (A/C, No): 786-659-1241

E-MAIL ADDRESS: mario.paradela@com-risk.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Crum & Forster Specialty	44520
INSURER B:	Philadelphia Indemnity Ins Co	18058
INSURER C:	Greenwich Insurance Company	22322
INSURER D:	HDI Global Specialty SE	32727
INSURER E:	Lloyds of London	32727
INSURER F:	CITIZENS PROP INS CO	10064

INSURED  
Brickell Place Phase II  
Association Inc.  
1925 Brickell Avenue #D201  
Miami, FL 33129

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		GLO-1000558	10/26/2023	10/26/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR DED RETENTION \$		PPP7470310	10/26/2023	10/26/2024	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below	N / A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Crime		PCAC000862-0618	10/26/2023	10/26/2024	3,000,000
E	D&O		PLC-03242-00	10/26/2023	10/26/2024	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Residential Condominium Association - Tower C, D & Townhouses - Total Units  
467 Subject to terms, conditions and deductibles found in the policy.  
Please refer to Notepad for additional coverage & company information.

**CERTIFICATE HOLDER****CANCELLATION**

FOR INFORMATION ONLY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



**NOTEPAD**

INSURED'S NAME

Brickell Place Phase II

BRICK-3  
OP ID: KAPAGE 2  
Date 07/11/2024

3PROPERTY: HDI Global Specialty SE  
Location: 1925 Brickell Ave, Miami, FL 33129 (Townhouses)  
Effective: 06/01/2024 to 06/01/2025  
Policy #: JEM-24-PP-1419  
Valuation: Replacement Cost  
Causes of Loss: Special  
Coinsurance: Agreed  
Ordinance or Law: Full Coverage A ; B&C 10% per bldg, Max \$401,716  
Deductible: Named Storm - 10% , All Other Wind/Hail \$100,000  
Deductible: All other Perils - \$10,000 Per Occurrence  
Total Insurance Value \$4,017,164

PROPERTY: Citizen Property Insurance Corporation  
Location: 1915-1925 Brickell Ave, Miami, FL 33129 (Tower C & D)  
Effective: 06/01/2024 to 06/01/2025  
Policy #: 07098331 - 3  
Valuation: Replacement Cost  
Causes of Loss: WIND ONLY  
Coinsurance: N/A  
Deductible: Hurricane 5% Calendar Year, All Other Wind/Hail 1%  
Total Insurance Value \$93,160,000

PROPERTY: Citizens Property Insurance Corporation  
Location: 1915-1925 Brickell Ave, Miami, FL 33129 (Tower C & D)  
Effective: 06/01/2024 to 06/01/2025  
Policy #: 07157238 - 3  
Valuation: Replacement Cost  
Causes of Loss: Basic Form  
Coinsurance: N/A  
Deductible: All other Perils - \$10,000 Per Occurrence, 10% Sinkhole  
Total Insurance Value \$93,159,600

BOILER AND MACHINERY: Travelers Excess and Surplus Lines Company  
Effective Date: 10/26/2023 to 10/26/2024  
Policy #: 7T165375  
Total Limit: \$67,678,904  
Deductible: \$5,000

FLOOD: Hartford Insurance Company of the Midwest  
#1) 1915 Brickell Ave, Miami, FL 33129 - Policy #99014743872019  
Effective 7/12/2024 to 7/12/2025  
Tower C - Bldg \$49,500,000 (198 Units) Flood Zone VE \$5,000 Ded  
#2) 1925 Brickell Ave, Miami, FL 33129 - Policy #99014743882019  
Eff 7/12/2024 to 7/12/2025  
Tower D - Bldg \$64,250,000 (257 Units) Flood Zone VE \$5,000 Ded  
#3) 1915-1925 Brickell Ave, Miami, FL 33129 - Policy #18341003362019  
Eff 6/23/2024 to 6/23/2025  
Townhouses - Bldg \$3,000,000 (12 Units) Flood Zone VE \$1,250 Ded



COMMERCIAL RISK LLC  
1500 NW 89TH CT SUITE 219  
DORAL, FL 33172

Agency Phone: (786) 659-1242

NFIP Policy Number: 0147438703  
Company Policy Number: 99014743872019  
Agent: COMMERCIAL RISK LLC

Payor: INSURED  
Policy Term: 07/12/2024 12:01 AM - 07/12/2025 12:01 AM  
Policy Form: RCBAP

To report a claim  
visit or call us at: <https://TheHartford.ManageFlood.com>  
(800) 787-5677

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

### DELIVERY ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### INSURED NAME(S) AND MAILING ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest  
PO BOX 913385  
DENVER, CO 80291-3385

### INSURED PROPERTY LOCATION

1915 BRICKELL AVE TOWER C  
MIAMI, FL 331290000

### RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING  
NUMBER OF UNITS: 198 UNITS  
PRIMARY RESIDENCE: NO  
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 17 FLOOR(S), MASONRY CONSTRUCTION  
PRIOR NFIP CLAIMS: 1 CLAIM(S)

### MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$49,500,000	\$5,000
CONTENTS:	\$100,000	\$5,000

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.  
Please review this declaration page for accuracy. If any changes are needed, contact your agent.  
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit [FloodSmart.gov/floodcosts](https://FloodSmart.gov/floodcosts).

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING  
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$49,530,362.00  
DATE OF CONSTRUCTION: 01/01/1975

CURRENT FLOOD ZONE: VE  
FIRST FLOOR HEIGHT (FEET): 1.0  
FIRST FLOOR HEIGHT METHOD: FEMA DETERMINED

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A

DISASTER AGENCY: N/A

### COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$150,573.00
CONTENTS PREMIUM:	\$1,528.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$30,397.00)
FULL RISK PREMIUM:	\$121,779.00
ANNUAL INCREASE CAP DISCOUNT:	(\$68,431.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$53,348.00
RESERVE FUND ASSESSMENT:	\$9,603.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$2,136.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$65,337.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

*Melinda Thompson*

Melinda Thompson, SVP, Head of Personal Lines

*Terence Shields*

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 30722806

Page 1 of 1



DocID: 239827883

Printed 07/11/2024





COMMERCIAL RISK LLC  
1500 NW 89TH CT SUITE 219  
DORAL, FL 33172

Agency Phone: (786) 659-1242

NFIP Policy Number: 0147438803  
Company Policy Number: 99014743882019  
Agent: COMMERCIAL RISK LLC

Payor: INSURED  
Policy Term: 07/12/2024 12:01 AM - 07/12/2025 12:01 AM  
Policy Form: RCBAP

To report a claim  
visit or call us at: <https://TheHartford.ManageFlood.com>  
(800) 787-5677

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

### DELIVERY ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### INSURED NAME(S) AND MAILING ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest  
PO BOX 913385  
DENVER, CO 80291-3385

### INSURED PROPERTY LOCATION

1925 BRICKELL AVE  
MIAMI, FL 331291737

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING  
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$64,360,850.00  
DATE OF CONSTRUCTION: 01/01/1975

CURRENT FLOOD ZONE: VE  
FIRST FLOOR HEIGHT (FEET): 1.0  
FIRST FLOOR HEIGHT METHOD: FEMA DETERMINED

### RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING  
NUMBER OF UNITS: 257 UNITS  
PRIMARY RESIDENCE: NO  
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 22 FLOOR(S)

PRIOR NFIP CLAIMS: 1 CLAIM(S)

### MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A

DISASTER AGENCY: N/A

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$64,250,000	\$5,000
CONTENTS:	\$100,000	\$5,000

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.

Please review this declaration page for accuracy. If any changes are needed, contact your agent.  
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit [FloodSmart.gov/floodcosts](https://FloodSmart.gov/floodcosts).

### COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$141,942.00
CONTENTS PREMIUM:	\$1,208.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$28,606.00)
FULL RISK PREMIUM:	\$114,619.00
ANNUAL INCREASE CAP DISCOUNT:	(\$46,416.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$68,203.00
RESERVE FUND ASSESSMENT:	\$12,277.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$2,254.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$82,984.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

*Melinda Thompson*

Melinda Thompson, SVP, Head of Personal Lines

*Terence Shields*

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 30722786

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DocID: 239827612

Printed 07/11/2024



COMMERCIAL RISK LLC  
1500 NW 89TH CT SUITE 219  
DORAL, FL 33172

Agency Phone: (786) 659-1242

NFIP Policy Number: 3410033603  
Company Policy Number: 18341003362019  
Agent: COMMERCIAL RISK LLC

Payor: INSURED  
Policy Term: 06/23/2024 12:01 AM - 06/23/2025 12:01 AM  
Policy Form: RCBAP

To report a claim  
visit or call us at: <https://TheHartford.ManageFlood.com>  
(800) 787-5677

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

### DELIVERY ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### INSURED NAME(S) AND MAILING ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest  
PO BOX 913385  
DENVER, CO 80291-3385

### INSURED PROPERTY LOCATION

1915 AND 1925 BRICKELL AVE  
MIAMI, FL 331290000

### RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING  
NUMBER OF UNITS: 12 UNITS *Townhouses*  
PRIMARY RESIDENCE: NO  
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 2 FLOOR(S)  
PRIOR NFIP CLAIMS: 1 CLAIM(S)

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING  
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$5,533,496.00  
DATE OF CONSTRUCTION: 01/01/1985

CURRENT FLOOD ZONE: VE  
FIRST FLOOR HEIGHT (FEET): 102.0  
FIRST FLOOR HEIGHT METHOD: ELEVATION CERTIFICATE

### MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

LOAN NO: N/A

SECOND MORTGAGEE:

LOAN NO: N/A

ADDITIONAL INTEREST:

LOAN NO: N/A

DISASTER AGENCY:

CASE NO: N/A

DISASTER AGENCY: N/A

### RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$3,000,000	\$1,250
CONTENTS:	N/A	N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.  
Please review this declaration page for accuracy. If any changes are needed, contact your agent.  
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit [FloodSmart.gov/floodcosts](http://FloodSmart.gov/floodcosts).

### COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$21,252.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$4,227.00)
FULL RISK PREMIUM:	\$17,100.00
ANNUAL INCREASE CAP DISCOUNT:	(\$10,152.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$6,948.00
RESERVE FUND ASSESSMENT:	\$1,251.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$564.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$9,013.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

*Melinda Thompson*

Melinda Thompson, SVP, Head of Personal Lines

*Terence Shields*

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 30622435

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DocID: 238670162

Printed 06/18/2024





COMMERCIAL RISK LLC  
1500 NW 89TH CT SUITE 219  
DORAL, FL 33172

Agency Phone: (786) 659-1242

NFIP Policy Number: 3410033703  
Company Policy Number: 18341003372019  
Agent: COMMERCIAL RISK LLC  
Payor: INSURED  
Policy Term: 06/29/2024 12:01 AM - 06/29/2025 12:01 AM  
Policy Form: GENERAL PROPERTY

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(800) 787-5677

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

### DELIVERY ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### INSURED NAME(S) AND MAILING ADDRESS

BRICKELL PLACE PHASE II CONDO ASSN  
1925 BRICKELL AVE STE D201  
MIAMI, FL 33129-2900

### COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest  
PO BOX 913385  
DENVER, CO 80291-3385

### INSURED PROPERTY LOCATION

1915 BRICKELL AVE PUMPHOUSE  
MIAMI, FL 331290000

### RATING INFORMATION

BUILDING OCCUPANCY: NON-RESIDENTIAL BUILDING  
NUMBER OF UNITS: N/A  
PRIMARY RESIDENCE: NO  
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 1 FLOOR(S), MASONRY CONSTRUCTION  
PRIOR NFIP CLAIMS: 0 CLAIM(S)

BUILDING DESCRIPTION: OTHER NON-RESIDENTIAL TYPE  
BUILDING DESCRIPTION DETAIL: PUMPHOUSE

REPLACEMENT COST VALUE: \$200,000.00  
DATE OF CONSTRUCTION: 01/01/1985

CURRENT FLOOD ZONE: X  
FIRST FLOOR HEIGHT (FEET): 1.0  
FIRST FLOOR HEIGHT METHOD: FEMA DETERMINED

### MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

LOAN NO: N/A

SECOND MORTGAGEE:

LOAN NO: N/A

ADDITIONAL INTEREST:

LOAN NO: N/A

DISASTER AGENCY:

CASE NO: N/A

DISASTER AGENCY: N/A

### RATE CATEGORY — RATING ENGINE

#### COVERAGE DEDUCTIBLE

BUILDING: N/A N/A  
CONTENTS: \$103,000 \$1,000

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.

Please review this declaration page for accuracy. If any changes are needed, contact your agent.  
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit [FloodSmart.gov/floodcosts](https://FloodSmart.gov/floodcosts).

### COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$0.00
CONTENTS PREMIUM:	\$1,928.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$0.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$0.00)
FULL RISK PREMIUM:	\$1,928.00
ANNUAL INCREASE CAP DISCOUNT:	(\$1,622.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$306.00
RESERVE FUND ASSESSMENT:	\$55.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$47.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$658.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

*Melinda Thompson*

Melinda Thompson, SVP, Head of Personal Lines

*Terence Shields*

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 30622524

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DocID: 238670765

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