

## FLOOD POLICY DECLARATIONS

### Occidental Fire and Casualty of NC

Standard Policy

**Type:** Renewal

**Policy Period:** 05/18/2019 To 05/18/2020

**Original New Business Effective Date:** 01/01/2000

**Reinstatement Date:**
**Form:** RCBAP

**For payment status, call: (888) 245-7274**

These Declarations are effective

as of: 05/18/2019 at 12:01 AM

**Address Info**
**Producer Name and Mailing Address:**

 ATLAS MORTGAGE & INS CO INC  
 7120 BENEVA RD  
 SARASOTA, FL 34238-2804

**Insured Name and Mailing Address:**

 ORCHID OAKS CONDO ASSO  
 c/o Wisdom Community Mgmt  
 PO Box 51362  
 Sarasota, FL 34232-0311

**NFIP Policy Number:** 9904627848

**Agent/Agency #:** 00700-00177-000

**Reference #:**
**Phone #:** (941) 366-8424

**NAIC Number:** 23248

**Processed by:**

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Info**
**Property Location:**

 2701-2712 ORCHID OAKS DR BLDG D  
 SARASOTA, FL 34239-6425

**Building Description:**

 Other Residential  
 Three or More Floors  
 Slab On Grade  
 High Rise  
 Main House

**Primary Residence:** Y

**Premium Payer:** Insured

**Flood Risk/Rated Zone:** AE      **Current Zone:** AE

**Community Number:** 12 5144 0142 E

**Community Name:** SARASOTA COUNTY \*

**Grandfathered:** Yes

**Post-Firm Construction**
**Program Type:** Regular

**Newly Mapped into SFHA:**
**Elev Diff:** 3

**Elevated Building:** N

**No Addition(s) and Extension(s)**
**Replacement Cost:** \$2,307,700

**Number of Units:** 12

**Coverage & Rating**

| Type   | Coverage  | Rates       | Deduct | Discount | Sub Total | Premium Calculation        |          |
|--|-----------|-------------|--------|----------|-----------|----------------------------|----------|
| Building:  | 2,538,500 | .390 / .046 | 1,250  | 9-       | 1,761.00  | Premium Subtotal:          | 1,761.00 |
| Contents:  |           |             |        |          |           | Multiplier:                |          |
| Contents   |           |             |        |          |           | ICC Premium:               | 8.00     |
| Location:  |           |             |        |          |           | CRS Discount:              | 442.00   |
|  |           |             |        |          |           | Reserve Fund Assmt:        | 199.00   |
|  |           |             |        |          |           | HFIAA Surcharge:           | 250.00   |
|  |           |             |        |          |           | Federal Policy Fee:        | 800.00   |
|  |           |             |        |          |           | Probation Surcharge:       | .00      |
|  |           |             |        |          |           | Endorsement Amount:        | .00      |
| <b>Coverage Limitations May Apply. See Your Policy Form for Details.</b> |           |             |        |          |           | <b>Total Premium Paid:</b> | 2,576.00 |

**Mortgage Info**
**First Mortgage:**
**Loss Payee:**
**Second Mortgage:**
**Disaster Agency:**

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Occidental Fire & Casualty Co. of NC obtains most of our information directly from you. The application you complete, as well as any additional information you provide, generally gives us most of the information we need to know. We may use information about you from your other transactions with us, our affiliates, or others.

Depending on the nature of your insurance transaction, we may need additional information about you or other individuals proposed for coverage. For property coverages, we may send someone to inspect your property and verify information about its value and condition. A photo of any property to be insured might be taken. We may review insurance claims information and other loss information reports, and we may also obtain medical or financial information to adjust some claims.

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Attn: Compliance Department  
P.O. 9729  
Bradenton, FL 34206-9729

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 7120 BENEVA RD  
 SARASOTA, FL 34238-2804

**Insured Name and Mailing Address:**

 ORCHID OAKS CONDO ASSO  
 c/o Wisdom Community Mgmt  
 PO Box 51362  
 Sarasota, FL 34232-0311

**NFIP Policy Number:** 9904627855

**Agent/Agency #:** 00700-00177-000

**Reference #:**
**Phone #:** (941) 366-8424

**NAIC Number:** 23248

**Processed by:**

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Info**
**Property Location:**

 2714-2728 ORCHID OAKS DR BLDG C  
 SARASOTA, FL 34239-6438

**Building Description:**

 Other Residential  
 Three or More Floors  
 Slab On Grade  
 High Rise  
 Main House

**Primary Residence:** N

**Premium Payor:** Insured

**Flood Risk/Rated Zone:** AE      **Current Zone:**
**Community Number:** 12 5144 0142 F

**Community Name:** SARASOTA COUNTY \*

**Grandfathered:** No

**Post-Firm Construction**
**Program Type:** Regular

**Newly Mapped into SFHA:**
**Elev Diff:** 2

**Elevated Building:** N

**Includes Addition(s) and Extension(s)**
**Replacement Cost:** \$3,018,273

**Number of Units:** 15

**Coverage & Rating**

| Type   | Coverage  | Rates       | Deduct | Discount | Sub Total | Premium Calculation        |                 |
|--|-----------|-------------|--------|----------|-----------|----------------------------|-----------------|
| Building:  | 3,320,100 | .560 / .046 | 1,250  | 12-      | 2,415.00  | Premium Subtotal:          | 2,415.00        |
| Contents:  |           |             |        |          |           | Multiplier:                |                 |
| Contents   |           |             |        |          |           | ICC Premium:               | 8.00            |
| Location:  |           |             |        |          |           | CRS Discount:              | 606.00          |
|  |           |             |        |          |           | Reserve Fund Assmt:        | 273.00          |
|  |           |             |        |          |           | HFIAA Surcharge:           | 250.00          |
|  |           |             |        |          |           | Federal Policy Fee:        | 800.00          |
|  |           |             |        |          |           | Probation Surcharge:       | .00             |
|  |           |             |        |          |           | Endorsement Amount:        | .00             |
| <b>Coverage Limitations May Apply. See Your Policy Form for Details.</b> |           |             |        |          |           | <b>Total Premium Paid:</b> | <b>3,140.00</b> |

**Mortgage Info**
**First Mortgage:**
**Loss Payee:**
**Second Mortgage:**
**Disaster Agency:**

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Attn: Compliance Department  
P.O. 9729  
Bradenton, FL 34206-9729

If your Policy Form has changed you can go to [www.MyFlood.com/PolicyForm](http://www.MyFlood.com/PolicyForm) to receive an updated copy.

## FLOOD POLICY DECLARATIONS

RCBAP

Renewal

**Mail To:** Agent



ATLAS MORTGAGE & INS CO INC  
7120 BENEVA RD  
SARASOTA, FL 34238-2804

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Standard Policy

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 7120 BENEVA RD  
 SARASOTA, FL 34238-2804

**Insured Name and Mailing Address:**

 ORCHID OAKS CONDO ASSO  
 c/o Wisdom Community Mgmt  
 PO Box 51362  
 Sarasota, FL 34232-0311

**NFIP Policy Number:** 9904627857

**Agent/Agency #:** 00700-00177-000

**Reference #:**
**Phone #:** (941) 366-8424

**NAIC Number:** 23248

**Processed by:**

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Info**
**Property Location:**

 2729-2743 ORCHID OAKS DR BLDG B  
 SARASOTA, FL 34239-6445

**Building Description:**

 Other Residential  
 Three or More Floors  
 Slab On Grade  
 High Rise  
 Main House

**Primary Residence:** N

**Premium Payor:** Insured

**Flood Risk/Rated Zone:** AE      **Current Zone:**
**Community Number:** 12 5144 0142 F

**Community Name:** SARASOTA COUNTY \*

**Grandfathered:** No

**Post-Firm Construction**
**Program Type:** Regular

**Newly Mapped into SFHA:**
**Elev Diff:** 3

**Elevated Building:** N

**Includes Addition(s) and Extension(s)**
**Replacement Cost:** \$3,018,273

**Number of Units:** 15

**Coverage & Rating**

| Type   | Coverage  | Rates       | Deduct | Discount | Sub Total | Premium Calculation        |                 |
|--|-----------|-------------|--------|----------|-----------|----------------------------|-----------------|
| Building:  | 3,320,100 | .390 / .046 | 1,250  | 11-      | 2,119.00  | Premium Subtotal:          | 2,119.00        |
| Contents:  |           |             |        |          |           | Multiplier:                |                 |
| Contents   |           |             |        |          |           | ICC Premium:               | 8.00            |
| Location:  |           |             |        |          |           | CRS Discount:              | 532.00          |
|  |           |             |        |          |           | Reserve Fund Assmt:        | 239.00          |
|  |           |             |        |          |           | HFIAA Surcharge:           | 250.00          |
|  |           |             |        |          |           | Federal Policy Fee:        | 800.00          |
|  |           |             |        |          |           | Probation Surcharge:       | .00             |
|  |           |             |        |          |           | Endorsement Amount:        | .00             |
| <b>Coverage Limitations May Apply. See Your Policy Form for Details.</b> |           |             |        |          |           | <b>Total Premium Paid:</b> | <b>2,884.00</b> |

**Mortgage Info**
**First Mortgage:**
**Loss Payee:**
**Second Mortgage:**
**Disaster Agency:**

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 SARASOTA, FL 34238-2804

**Insured Name and Mailing Address:**

 ORCHID OAKS CONDO ASSO  
 c/o Wisdom Community Mgmt  
 PO Box 51362  
 Sarasota, FL 34232-0311

**NFIP Policy Number:** 9904627842

**Agent/Agency #:** 00700-00177-000

**Reference #:**
**Phone #:** (941) 366-8424

**NAIC Number:** 23248

**Processed by:**

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Info**
**Property Location:**

 2744-2758 ORCHID OAKS DR BLDG A  
 SARASOTA, FL 34239-6443

**Building Description:**

 Other Residential  
 Three or More Floors  
 Slab On Grade  
 High Rise  
 Main House  
 BLDG A

**Primary Residence:** Y

**Premium Payor:** Insured

**Flood Risk/Rated Zone:** AE      **Current Zone:**
**Community Number:** 12 5144 0142 F

**Community Name:** SARASOTA COUNTY \*

**Grandfathered:** No

**Post-Firm Construction**
**Program Type:** Regular

**Newly Mapped into SFHA:**
**Elev Diff:** 4

**Elevated Building:** N

**Includes Addition(s) and Extension(s)**
**Replacement Cost:** \$3,018,300

**Number of Units:** 15

**Coverage & Rating**

| Type   | Coverage  | Rates       | Deduct | Discount | Sub Total | Premium Calculation        |          |
|--|-----------|-------------|--------|----------|-----------|----------------------------|----------|
| Building:  | 3,320,100 | .340 / .046 | 1,250  | 10-      | 2,032.00  | Premium Subtotal:          | 2,032.00 |
| Contents:  |           |             |        |          |           | Multiplier:                |          |
| Contents   |           |             |        |          |           | ICC Premium:               | 8.00     |
| Location:  |           |             |        |          |           | CRS Discount:              | 510.00   |
|  |           |             |        |          |           | Reserve Fund Assmt:        | 230.00   |
|  |           |             |        |          |           | HFIAA Surcharge:           | 250.00   |
|  |           |             |        |          |           | Federal Policy Fee:        | 800.00   |
|  |           |             |        |          |           | Probation Surcharge:       | .00      |
|  |           |             |        |          |           | Endorsement Amount:        | .00      |
| <b>Coverage Limitations May Apply. See Your Policy Form for Details.</b> |           |             |        |          |           | <b>Total Premium Paid:</b> | 2,810.00 |

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**First Mortgage:**
**Loss Payee:**
**Second Mortgage:**
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