





**ADDITIONAL REMARKS SCHEDULE**

AGENCY Arthur J. Gallagher Risk Management Services, LLC		NAMED INSURED Chatillon Hall Condo Assoc. Inc. Arcadia Venture Group 1020 94th Street Bay Harbor Islands FL 33154	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER:** 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

**SPECIAL CONDITIONS:**

Important Notes for Lenders:

Coverage for the interior of the unit is NOT included. The Unit Owners are responsible for purchasing their own H06 policy.

Any cancellation notices will be sent to the association as they are the insured. The amount of time would be based upon the reason for cancellation (i.e., 10 days non-payment; 45 days non-renewal, etc.).

Lenders of unit owners cannot be added as a loss payee to the association policies as the policy covers common areas.

Property Manager is considered an Employee by definition of Crime Policy. Therefore, covered under this policy while conducting business for the insured association.

Please carefully read all pages to this Certificate of Insurance, specifically, the additional wording sections. If there are additional questions, please email your questions to CertRequests@ajg.com as NO information will be provided over the phone.

Elisa Finale

PROPERTY ADDRESS: 1020 94th Street Apt 201 Bay Harbor Islands FL 33154



ASSURANT®

American Bankers Insurance Company of Florida  
Scottsdale, AZ

Renewal Flood Insurance Policy Declarations

This Declarations Page is part of your Policy.

Policy Term: 09/10/2025 (12:01 a.m.) to 09/10/2026 (12:01 a.m.)

NAIC: 10111

Policy Number: 7800906443

First Mortgagee / Lender Name:

Named Insured and Mailing Address:

CHATILLON HALL CONDOMINIUM INC  
12000 BISCAYNE BLVD STE 406  
C/O LJ SERVICES GROUP  
NORTH MIAMI, FL 33181-2725

Loan Number:

Producer Number: 70005-00001-000

Second Mortgagee / Lender Name:

Premium Payor: INSURED

Property Location:

1020 94TH ST  
BAY HARBOR IS, FL 33154

Loan Number:

Other / Loss Payee:

For Service Please Contact:

ARTHUR J GALLAGHER AND CO  
2255 GLADES RD STE 240W  
AJG RMS LLC  
BOCA RATON, FL 33431-7391  
800-488-3003

Loan Number:

LOCATION AND PROPERTY INFORMATION

Date of Construction: 08/01/1986	Number Of Units: 12
Building Occupancy: Residential Condo Building	Primary Residence: No
Method Used to Determine First Floor Height: FEMA determined	Prior NFIP Claims: 0 claim(s)
Building Description: Entire Residential Condo Building	First Floor Height: 1.00 ft
Property Description: ELEVATED WITH ENCLOSURE ON POSTS, PILES OR PIERS, THREE OR MORE FLOORS	Replacement Cost: \$ 4,132,900

Your property's NFIP flood claims history can affect your premium. Prior Claims counted are from April 1, 2023 and after.

COVERAGE AND PREMIUM INFORMATION

Rate Category: FEMA Rating Engine

Coverage Type	Coverage Limit	Deductible	Premium
Building	\$ 3,000,000	\$ 2,000	\$ 9,043.00
Contents	\$ 0	\$ 0	\$ 0.00
			Increased Cost of Compliance: \$ 75.00
Coinsurance penalty may apply. See your Policy Form for Details.			Community Rating System Discount: \$ -446.00
			<b>Full Risk Premium Excluding Fees and Surcharges:</b> \$ 8,672.00

STATUTORY DISCOUNTS

Annual Increase Cap Discount:	\$ -1,028.00
<b>Discounted Premium:</b>	\$ 7,644.00

FEES AND SURCHARGES

Reserve Fund Assessment:	\$ 1,376.00
Homeowner Flood Insurance Affordability Act of 2014 (HFIAA) Surcharge:	\$ 250.00
Federal Policy Fee:	\$ 564.00

TOTAL PREMIUM, DISCOUNTS, FEES AND SURCHARGES PAID

\$ 9,834.00

Coverage limitations may apply. See your NFIP RCBAP Form for details.

To prevent delays in claim handling, it is important to make sure that your policy information is up to date and accurate. Contact your insurance agent or company to make changes to your policy or visit [floodsmart.gov/flood](https://www.floodsmart.gov/flood) to learn more about flood insurance.

NFIP POLICY NUMBER: 7800906443

# Chatillon Hall Condominium Association, Inc.

## Property / Hazard Schedule

Insurance Carrier: Century Surety Company  
 Policy Number: CCP-1285540  
 Policy Period: Effective Date: 4/20/2025 Expiration Date: 4/20/2026

Replacement Cost (Building)  Special Including Theft  Actual Cash Value (Fences/Pool)

Additional Wording: Wind/Hail EXCLUDED  
 Equipment Breakdown Coverage Included  
 Coinsurance: 80%

Building	Location	Limits		Description	AOP	Deductible
		Building	Contents			
1	1020 94th St, Bay Harbor Islands, FL 33154	\$3,216,240	\$0	12 Units		\$2,500
	1020 94th St, Bay Harbor Islands, FL 33154	\$2,002	\$0	Fence/Wood		\$1,000
	1020 94th St, Bay Harbor Islands, FL 33154	\$2,024	\$0	Fences		\$1,000
	1020 94th St, Bay Harbor Islands, FL 33154	\$85,907	\$0	Pool		\$2,500

## Windstorm/Hail

Insurance Carrier: Citizens Property Insurance Corporation  
 Policy Number: 03281281-7  
 Policy Period: Effective Date: 4/20/2025 Expiration Date: 4/20/2026

Replacement Cost  WINDSTORM/HAIL ONLY

Additional Wording: Windstorm/Hail ONLY

Building	Location	Limits	Description	Hurricane Deductible	Other
				Per Calendar Year	Windstorm/Hail Deductible
1	1020 94th St, Bay Harbor Islands, FL 33154	\$3,216,000	12 Condo Units	3%	1%
	1020 94th St, Bay Harbor Islands, FL 33154	\$94,000	Inground Pool/Decking	3%	\$1,000
	1020 94th St, Bay Harbor Islands, FL 33154	\$4,000	Pool Fences	\$1,000	\$1,000

## Flood

Insurance Carrier: American Bankers Insurance Company of Florida  
 Policy Number: 7800906443  
 Policy Period: Effective Date: 9/10/2025 Expiration Date: 9/10/2026

Replacement Cost  RCBP

Flood Zone: AE

Building	Location	Limits		# of Units	Deductible
		Building	Contents		
1	1020 94th St Bay Harbor Islands, FL 33154	\$3,000,000	\$0	12	\$2,000

## Crime

Insurance Carrier: Philadelphia Indemnity Insurance Company  
 Policy Number: PCAC004902-0719  
 Policy Period: Effective Date: 4/20/2025 Expiration Date: 4/20/2026

Insuring Agreements	Limit	Deductible
Employee Theft & Client Property	\$40,000	\$250
ERISA Fidelity	\$40,000	\$0
Forgery or Alteration	\$25,000	\$250
Inside the Premises	\$25,000	\$250
Outside the Premises	\$25,000	\$250
Computer Fraud & Funds Transfer Fraud	\$40,000	\$250
Money Orders & Counterfeit Paper Currency	\$25,000	\$250

## GLASS

Insurance Carrier: US Plate Glass Insurance Company  
 Policy Number: FL-101316-07  
 Policy Period: Effective Date: 4/20/2025 Expiration Date: 4/20/2026

Replacement Cost

Building	Location	Limit Per Loss	# Units	Deductible	# Scheduled Plates
1	1020 94th St, Bay Harbor Islands, FL 33154	\$350,000	12	\$0	32

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