

INSURANCE OFFICE OF AMERICA INC 1855 WEST STATE RD 434 LONGWOOD, FL 32750

**Agency Phone:** 

(800) 243-6899

**NFIP Policy Number:** 

Company Policy Number: 6500078724

Agent:

INSURANCE OFFICE OF AMERICA INC

6500078724

Payor:

INSURED

**Policy Term:** 05/05/2025 12:01 AM - 05/05/2026 12:01 AM

Policy Form:

**RCBAP** 

To report a claim visit or call us at: https://TheHartford.ManageFlood.com

(800) 787-5677

## REVISED FLOOD INSURANCE POLICY DECLARATIONS NATIONAL FLOOD INSURANCE PROGRAM

**DELIVERY ADDRESS** 

CASTLE REEF CONDO ASSN 4175 S ATLANTIC AVE NEW SMYRNA BEACH, FL 32169-9619 INSURED NAME(S) AND MAILING ADDRESS

CASTLE REEF CONDO ASSN 4175 S ATLANTIC AVE

NEW SMYRNA BEACH, FL 32169-9619

COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest

PO BOX 913385

DENVER, CO 80291-3385

**INSURED PROPERTY LOCATION** 

4175 S ATLANTIC AVE

RATING INFORMATION

**BUILDING OCCUPANCY:** 

NUMBER OF UNITS:

165 UNITS

PRIMARY RESIDENCE: PROPERTY DESCRIPTION:

SLAB ON GRADE (NON-ELEVATED), 5 FLOOR(S)

0 CLAIM(S)

RESIDENTIAL CONDOMINIUM BUILDING

PRIOR NFIP CLAIMS: MORTGAGEE / ADDITIONAL INTEREST INFORMATION FIRST MORTGAGEF

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

**DISASTER AGENCY:** 

RATE CATEGORY - RATING ENGINE

COVERAGE DEDUCTIBLE \$24,482,000 \$1,250

BUILDING: CONTENTS:

\$23,000

\$1,250

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 machinary & aguityment is elevated appropriately. To learn more about your flood risk, please visit machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts

**ENDORSEMENT EFFECTIVE DATE:** 

ENDORSEMENT PREMIUM:

05/05/2025 12:01 AM \$1,659.00

CHANGES APPLIED TO

Lewide Thompson

Melinda Thompson, SVP. Head of Personal Lines

BUILDING COVERAGE, CONTENTS COVERAGE, RATING ELEMENTS

NEW SMYRNA BEACH, FL 32169-9619

BUILDING DESCRIPTION:

**BUILDING DESCRIPTION DETAIL:** 

ENTIRE RESIDENTIAL CONDOMINIUM BUILDING

N/A

REPLACEMENT COST VALUE. DATE OF CONSTRUCTION:

\$29,679,520,00 05/05/1982

**CURRENT FLOOD ZONE:** 

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:** 

CONTENTS PREMIUM: \$218.00 \$75.00

INCREASED COST OF COMPLIANCE (ICC) PREMIUM:

MITIGATION DISCOUNT:

(\$0.00)COMMUNITY RATING SYSTEM REDUCTION: (\$5,462.00)

**FULL RISK PREMIUM:** \$16,579.00

ANNUAL INCREASE CAP DISCOUNT:

(\$0.00)STATUTORY DISCOUNTS: (\$0.00)

DISCOUNTED PREMIUM:

\$16,579.00 \$2.984.00

\$21 748 00

RESERVE FUND ASSESSMENT:

HFIAA SURCHARGE: \$250.00 \$2,070.00

FEDERAL POLICY FEE:

PROBATION SURCHARGE: \$0.00

TOTAL ANNUAL PREMIUM: \$21,883,00

PRORATA PREMIUM ADJUSTMENT:

\$0.00

ADJUSTED ANNUAL PREMIUM:

\$21,883.00

37478

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

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.

Zero Balance Due - This Is Not A Bill Insurer NAIC Number:

File: 31827222

Policy issued by: Hartford Insurance Company of the Midwest

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Terence Shields, Secretary

DocID: 255602050