

INCLIDANCE ADDI ICATION

KLAWRENCE1

ACORD			LICANT INFORM				~ 1 1				DATE (MM/DD/Y 03/09/202	
AGENCY Hub International Florida 10368 W. State Road 84 Suite 201 Davie, FL 33324				CARRIER NAIC CODE American Coastal Insurance Company 12968 COMPANY POLICY OR PROGRAM NAME PROGRAM CODE						8		
					NUMBER LDGS K-P+CI	H/PO	OLS-	FEQ T	'IV \$!	51,726,560)	
CONTACT NAME: Karlene Lawrence)			UNDERV	VRITER				UNDE		E	
(A/C, No, Ext): (954) 924-3040 FAX (954) 206-2071						0	UOTE			ISSUE POLICY	X RENE	=\\\/
(A/C, No): (994) 200-2071 E-MAIL ADDRESS: Karlene.Lawrence@I	lubInternationa	l.con	n	STATUS TRANSA				(Give Date	and/or /	Attach Copy):		_ • •
CODE:	SUBCODE:					С	HANG	E C	DATE	т	ME	AM
AGENCY CUSTOMER ID: KINGCRE-0	4					C	ANCE	-			1	PM
	DDEMIUM				DDEMUM						PPEMIUM	
BOILER & MACHINERY	PREMIUM \$		CYBER AND PRIVACY		PREMIUM \$			YACHT			PREMIUM \$	
BUSINESS AUTO	\$		FIDUCIARY LIABILITY		\$						\$	
BUSINESS OWNERS	\$		GARAGE AND DEALERS		\$						\$	
COMMERCIAL GENERAL LIABILITY	\$		LIQUOR LIABILITY		\$						\$	
COMMERCIAL INLAND MARINE	\$		MOTOR CARRIER		\$						\$	
X COMMERCIAL PROPERTY	\$ 362,957.00	/			\$						\$	
	\$		UMBRELLA		\$						\$	
ACCOUNTS RECEIVABLE / VALUABLI	E PAPERS		GLASS AND SIGN SECTIO	N				STATEME	ENT / SC	CHEDULE OF VA	LUES	
ADDITIONAL INTEREST SCHEDULE HOTEL / MOTEL SUPPLE												
ADDITIONAL PREMISES INFORMATION SCHEDULE INSTALLATION / BUILDER				S RISK SE	CTION			VACANT	BUILDIN	IG SUPPLEMEN	г	
APARTMENT BUILDING SUPPLEMENT INTERNATIONAL LIABILIT				Y EXPOSU	RE SUPPLEMEN	Т		VEHICLE	SCHED	ULE		
CONDO ASSN BYLAWS (for D&O Coverage only) INTERNATIONAL PROPER				RTY EXPOS	SURE SUPPLEME	INT						
CONTRACTORS SUPPLEMENT												
COVERAGES SCHEDULE OPEN CARGO SECTION DEALERS SECTION PREMIUM PAYMENT SUF												
DRIVER INFORMATION SCHEDULE			PROFESSIONAL LIABILITY									
ELECTRONIC DATA PROCESSING SE	CTION		RESTAURANT / TAVERN S	SUPPLEME	INT							
POLICY INFORMATION												
PROPOSED EFF DATE PROPOSED EXP D	ATE BILLING F	PLAN	PAYMENT PLAN	METH	IOD OF PAYMENT	TA	UDIT	DEPO	DSIT			
03/15/2023 03/15/2024	DIRECT	(AGE	ENCY					\$		\$	\$ 362,9) 57.0
APPLICANT INFORMATION												
NAME (First Named Insured) AND MAILING Village Of Kings Creek Condomi 7711 Camino Real		P+4)		GL COD	e	sıc 6531			NAICS	8	FEIN OR SOC 36-309228	
Miami, FL 33143				BUSINES	SS PHONE #: (30)5) 2	79-3	411				
				WEBSITI	E ADDRESS							
CORPORATION JOINT VEN	TURE OF MEMBERS			G	SUBCHAPTER '	"S" CO	RPOR	ATION	X	Condo A	ssociation	
INDIVIDUAL LLC NO. AND NAME (Other Named Insured) AND MAILING	MANAGERS:	IP+4)	PARTNERSHIP	GL COD	TRUST	SIC			NAICS	6	FEIN OR SOC	SEC #
				-								
					SS PHONE #:							
				WEDSIII	E ADDRESS							
CORPORATION JOINT VEN INDIVIDUAL LLC AND	TURE OF MEMBERS MANAGERS:	_	NOT FOR PROFIT OR	3	SUBCHAPTER '	"S" CO	RPOR	ATION				
NAME (Other Named Insured) AND MAILING		IP+4)	I	GL COD		SIC			NAICS	8	FEIN OR SOC	SEC #
				BUSINES	SS PHONE #:				1			
				WEBSIT	E ADDRESS							
CORPORATION JOINT VEN			NOT FOR PROFIT OR	G	SUBCHAPTER '	"S" CO	RPOR	ATION				
INDIVIDUAL LLC NO.	OF MEMBERS MANAGERS:		PARTNERSHIP		TRUST							
ACORD 125 (2016/03)			Page 1	of 4	© 1993	3-201	15 AC	ORD C	ORPO	DRATION. A	Il rights rese	erved.

	ACT INFORMATION				AGENCY CUSTOMER ID: KINGCRE-04 KLAWRENCI					
CONTAG	TTYPE: Inspection Contact				CONTACT TYPE: Accounting Contact					
CONTAG	T NAME: Mireya Villaverde						eya Villaverde			
PRIMAR PHONE			s X	CELL	PRIM PHO		ME X BUS CELL	SECONDARY PHONE # HOME (305) 725-0958	BUS X CELL	
PRIMAR	Y E-MAIL ADDRESS: mireya@vkcmiami.com				PRIMARY E-MAIL ADDRESS: mireya@vkcmiami.com					
	DARY E-MAIL ADDRESS:				SECONDARY E-MAIL ADDRESS:					
PREN	ISES INFORMATION (Attach ACORD	823 for Additiona	al Pr	emises)					
LOC #	STREET			Y LIMITS		EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$		
11	7830 Camino Real		X	INSIDE	Χ	OWNER		OCCUPIED AREA:	100 SQ FT	
BLD #	сіту: Miami	STATE: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT	
1	_{COUNTY:} Miami Dade	_{ZIP:} 33143						TOTAL BUILDING AREA:	50,368 SQ FT	
DESCRI	PTION OF OPERATIONS: Residential Condo	minium - 4 stor	ies v	w/47-Ur	nits			ANY AREA LEASED TO OTH	HERS?Y/N N	
LOC #	STREET 7860-65 Camino Real		СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$		
12			X	INSIDE	Χ	OWNER		OCCUPIED AREA:	100 SQ FT	
BLD #	сіту:Miami	STATE: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT	
1	_{COUNTY:} Miami Dade	_{ZIP:} 33143						TOTAL BUILDING AREA:	82,484 SQ FT	
DESCR	PTION OF OPERATIONS: Residential Condo	minium - 4 stor	ies v	w/78-Ur	nits			ANY AREA LEASED TO OTH	HERS?Y/N N	
LOC #	STREET		СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$		
13	7920 Camino Real		X	INSIDE	Х	OWNER		OCCUPIED AREA:	100 SQ FT	
BLD #	сіту:Miami	STATE: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT	
1	COUNTY: Miami Dade	_{ZIP:} 33143						TOTAL BUILDING AREA:	50,368 SQ FT	
DESCR	PTION OF OPERATIONS: Residential Condo	minium - 4 stor	ies v	w/47-Ur	nits			ANY AREA LEASED TO OTH	HERS?Y/N N	
LOC #	street 7910-15 Camino Real		СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$		
14			Χ	INSIDE	X	OWNER		OCCUPIED AREA:	100 SQ FT	
BLD #	сіту:Miami	STATE: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT	
1	_{COUNTY:} Miami Dade	_{ZIP:} 33143						TOTAL BUILDING AREA:	82,484 SQ FT	
DESCR	PTION OF OPERATIONS: Residential Condo	minium - 4 stor	ies v	ø/78-Ur	nits			ANY AREA LEASED TO OTH	HERS?Y/N N	
NATURE OF BUSINESS										
		ANUFACTURING	_	ESTAURA	NT	SERVICE		DATE	BUSINESS TED (MM/DD/YYYY)	
X co	NDOMINIUMS INSTITUTIONAL O	FFICE	R	ETAIL		WHOLESA	IF		01/11/1980	
DESCRI	DESCRIPTION OF PRIMARY OPERATIONS									
DESCRI	PTION OF PRIMARY OPERATIONS									
	PTION OF PRIMARY OPERATIONS		ATIO	N, SERVICI	E OR F %	REPAIR WORK		ES INSTALLATION, SERVICE %		
RETAIL		.ES:		·	%	REPAIR WORK	OFF PREMIS	ES INSTALLATION, SERVICE		
RETAIL DESCRI 16 Re	STORES OR SERVICE OPERATIONS % OF TOTAL SA	ES: s its, Clubhouse,	Offi	ce, 2 C	% abai	REPAIR WORK	OFF PREMIS	ES INSTALLATION, SERVICE %	OR REPAIR WORK	
RETAIL DESCRI 16 Re ADDIT	STORES OR SERVICE OPERATIONS % OF TOTAL SAU PTION OF OPERATIONS OF OTHER NAMED INSURED sidential 4-story buildings, 1067-un	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	OFF PREMIS	ES INSTALLATION, SERVICE % ORD 45 for more Add	OR REPAIR WORK	
	STORES OR SERVICE OPERATIONS % OF TOTAL SAU PTION OF OPERATIONS OF OTHER NAMED INSURED Sidential 4-story buildings, 1067-un Sidential 4-story buildings, 1067-un LIENHOLDER	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add L INTEREST IN IT LOCATION:	OR REPAIR WORK ditional Interests TEM NUMBER BUILDING:	
RETAIL DESCRI 16 Re	STORES OR SERVICE OPERATIONS % OF TOTAL SAI PTION OF OPERATIONS OF OTHER NAMED INSURED Sidential 4-story buildings, 1067-un	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add L INTEREST IN IT LOCATION:	OR REPAIR WORK	
	STORES OR SERVICE OPERATIONS % OF TOTAL SAU PTION OF OPERATIONS OF OTHER NAMED INSURED Sidential 4-story buildings, 1067-un Sidential 4-story buildings, 1067-un ST DITIONAL INTEREST (Not all fields apply ST DITIONAL LIENHOLDER EACH OF RRANTY LOSS PAYEE -OWNER MORTGAGEE	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add 1 INTEREST IN IT LOCATION: VEHICLE: AIRPORT:	OR REPAIR WORK ditional Interests TEM NUMBER BUILDING:	
RETAIL DESCRI 16 Re	STORES OR SERVICE OPERATIONS % OF TOTAL SAI PTION OF OPERATIONS OF OTHER NAMED INSURED Sidential 4-story buildings, 1067-un Sidential 4-story buildings, 1067-un DITIONAL INTEREST (Not all fields apply ST NAME AND ADDRI DITIONAL LIENHOLDER EACH OF LOSS PAYEE -OWNER MORTGAGEE PLOYEE OWNER	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add L INTEREST IN IT LOCATION: VEHICLE: AIRPORT: ITEM	OR REPAIR WORK ditional Interests TEM NUMBER BUILDING: BOAT:	
RETAIL DESCRI 16 Re	STORES OR SERVICE OPERATIONS % OF TOTAL SAI PTION OF OPERATIONS OF OTHER NAMED INSURED sidential 4-story buildings, 1067-un Sidential 4-story buildings, 1067-un DITIONAL INTEREST (Not all fields apply ST LIENHOLDER LIENHOLDER EACH OF LOSS PAYEE -OWNER MORTGAGEE PLOYEE OWNER ASEBACK REGISTRANT	ES: s its, Clubhouse, to all scenarios	Offi	ce, 2 C	% abaı	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add 1 INTEREST IN IT LOCATION: VEHICLE: AIRPORT:	OR REPAIR WORK ditional Interests TEM NUMBER BUILDING: BOAT: AIRCRAFT:	
ADDI INTERE BR ADDI INTERE	STORES OR SERVICE OPERATIONS % OF TOTAL SAU PTION OF OPERATIONS OF OTHER NAMED INSURED sidential 4-story buildings, 1067-un SIDENTIAL AND ADDRE STORAL INTEREST (Not all fields apply ST NAME AND ADDRE DITIONAL LIENHOLDER EACH OF LOSS PAYEE OWNER MORTGAGEE PLOYEE OWNER ASEBACK DEPARTMENT	ES: s its, Clubhouse, <u>to all scenarios</u> ESS RANK:	Offi	ce, 2 C	% abai	REPAIR WORK na/Gyms and	off PREMIS d 4 pools.	ES INSTALLATION, SERVICE % ORD 45 for more Add L INTEREST IN IT LOCATION: VEHICLE: AIRPORT: ITEM CLASS:	OR REPAIR WORK ditional Interests TEM NUMBER BUILDING: BOAT: AIRCRAFT:	

E-MAIL ADDRESS:

GE	NERAL INFO	RMATION			AGENOTO	JSTOWER ID.			
EXP	LAIN ALL "YES" R	ESPONSES							Y/N
1a.	IS THE APPLIC	ANT A SUB	SIDIARY OF ANOTHER EN	NTITY ?					N
	PARENT COMP	ANY NAME				RELATIONSHIP	DESCRIPTION	% OWNED	
1b.	DOES THE APP	PLICANT HA	VE ANY SUBSIDIARIES?						N
	SUBSIDIARY CO					RELATIONSHIP	DESCRIPTION	% OWNED	
2.	IS A FORMAL S		GRAM IN OPERATION?						N
	SAFETY M		SAFETY POSITION	MONTHLY MEETINGS	OSHA				N
3.	ANY EXPOSUR	RE TO FLAMI	MABLES, EXPLOSIVES, C	HEMICALS?					N
4.	ANY OTHER IN	SURANCE	WITH THIS COMPANY?	(List policy numbers)					N
	LINE OF BUSINI		POLICY NUMBER	<u>, , , , , , , , , , , , , , , , , , , </u>	LINE OF BUSINESS	;	POLICY NUMBER		
5.	ANY POLICY O OPERATIONS?	R COVERAC	GE DECLINED, CANCELLI Applicants - Do not answe	ED OR NON-RENEWED D er this guestion)	URING THE PRIOR 1	THREE (3) YEAR	S FOR ANY PREMISES OR		N
	NON-PAYN	•	AGENT NO LONGER REP	• •					
	NON-RENE	WAL	UNDERWRITING	CONDITION CORRECTED	D (Describe):				
6.	ANY PAST LOS	SSES OR CL	AIMS RELATING TO SEX	JAL ABUSE OR MOLESTA	ATION ALLEGATIONS	S, DISCRIMINATI	ON OR NEGLIGENT HIRING	S?	N
-									N
1.	BRIBERY, ARS	ON OR ANY	OTHER ARSON-RELATE	D CRIME IN CONNECTION	N WITH THIS OR AN	Y OTHER PROPI			
			answered by any applicant ear of imprisonment).	for property insurance. Fa	ailure to disclose the e	xistence of an are	son conviction is a misdemear	nor punishable	
			. ,						
8.	ANY UNCORRE	ECTED FIRE	AND/OR SAFETY CODE	VIOLATIONS?					N
	OCCUR DATE	EXPLANATI	ON		R	ESOLUTION		RESOLVE DATE	
									N
9.	OCCUR DATE			SSION, BANKRUPTCY OF			THE LAST FIVE (5) YEARS'	? RESOLVE DATE	
	OCCURDATE	EXPLANATI	UN		K	ESOLUTION		RESOLVE DATE	
10.	HAS APPLICAN	NT HAD A JU	DGEMENT OR LIEN DUR	ING THE LAST FIVE (5) YI	EARS?				
	OCCUR DATE	EXPLANATI	ON		R	ESOLUTION		RESOLVE DATE	
									N
4.4									N
						יי יפופדפות / ח וס	TED IN FOREIGN COUNTRI	ES2	N
12.				/or ACORD 816 for Propert				L0!	
13.	DOES APPLICA	ANT HAVE O	THER BUSINESS VENTU	RES FOR WHICH COVER	AGE IS NOT REQUE	STED?			N
									N
14.	DOES APPLICA	an i OWN / L	EASE / UPERATE ANY D	RONES? (If "YES", describ	De USE)				
15	DOES APPLICA	ANT HIRF OT	THERS TO OPERATE DR	ONES? (If "YES", describe	use)				N
.0.	_ 220.41 210/								
RE	MARKS / PRO	CESSING	INSTRUCTIONS (ACO	RD 101, Additional Rer	marks Schedule, n	nay be attache	d if more space is requi	red)	
			•		,	·	· · ·	·	

PRIOR CARRIER INFORMATION

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:
	CARRIER				
	POLICY NUMBER				
	PREMIUM	\$	\$	\$	\$
	EFFECTIVE DATE				
	EXPIRATION DATE				

[PHASE 3

AGENCY CUSTOMER ID:	KINGCRE-04

KLAWRENCE1

PRIÓ	R CARRIER INFO	RMATION (continued)									
YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:						
	CARRIER										
	POLICY NUMBER										
	PREMIUM	\$	\$	\$	\$						
	EFFECTIVE DATE										
	EXPIRATION DATE										
	CARRIER										
	POLICY NUMBER										
	PREMIUM	\$	\$	\$	\$						
	EFFECTIVE DATE										
	EXPIRATION DATE										

LOSS HISTORY Check if none (Attach Loss Summary for Additional Loss Information)

ENTER ALL CLAIM	S OR LOSSES (R	EGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCC	CURRENCES THAT N	IAY GIVE RISE TO CLAIMS			
FOR THE LAST	YEARS				TOTAL LOSSES: \$		
DATE OF OCCURRENCE	LINE	TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM	DATE OF CLAIM	AMOUNT PAID	AMOUNT RESERVED	SUBRO- GATION Y/N	CLAIM OPEN Y/N

SIGNATURE

Copy of the Notice of Information Practices (Privacy) has been given to the applicant. (Not required in all states, contact your agent or broker for your state's requirements.)

PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT OR OTHER INVESTIGATIVE REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE AND SUBSEQUENT AMENDMENTS AND RENEWALS. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION, CREDIT SCORING INFORMATION MAY BE USED TO HELP DETERMINE EITHER YOUR ELIGIBILITY FOR INSURANCE OR THE PREMIUM YOU WILL BE CHARGED. WE MAY USE A THIRD PARTY IN CONNECTION WITH THE DEVELOPMENT OF YOUR SCORE. YOU MAY HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND REQUEST CORRECTION OF ANY INACCURACIES. YOU MAY ALSO HAVE THE RIGHT TO REQUEST IN WRITING THAT WE CONSIDER EXTRAORDINARY LIFE CIRCUMSTANCES IN CONNECTION WITH THE DEVELOPMENT OF YOUR CREDIT SCORE. THESE RIGHTS MAY BE LIMITED IN SOME STATES, PLEASE CONTACT YOUR AGENT OR BROKER TO LEARN HOW THESE RIGHTS MAY APPLY IN YOUR STATE OR FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US FOR A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING PERSONAL INFORMATION. (Not applicable in AZ, CA, DE, KS, MA, MN, ND, NY, OR, VA, or WV. Specific ACORD 38s are available for applicants in these states.) (Applicant's Initial):

Applicable in AL, AR, DC, LA, MD, NM, RI and WV: Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS: Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR: Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE INQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print) Elizabeth Fiegehen		STATE PRODUCER LICENSE NO (Required in Florida) W621972
APPLICANT'S SIGNATURE Maryam Sedahy		3113/23	NATIONAL PRODUCER NUMBER
	D 4 6 4	· · · · · · · · · · · · · · · · · · ·	

ACORD 125 (2016/03)



KLAWRENCE1

ADDITIONAL PREMISES INFORMATION SCHEDULE Page 1 of 2

AGENCY		CARRIE		NAIC CODE						
Hub li	nternational Florida				Americ	an (Coastal Insur	ance Company	,	12968
	NUMBER LDGS K-P+CH/POOLS+EQ		EFFECTIVE D 03/15/202		NAMED IN			Condominium		
PREM	ISES INFORMATION									
LOC #	STREET 7845-50 Camino Real			СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
15	7645-50 Callino Real			Х	INSIDE	Χ	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami Dade		3143		1				TOTAL BUILDING AREA:	82,484 SQ FT
DESCRI	TION OF OPERATIONS: Residential Condo	miniu	um - 4 stor	ies	w/78-Ur	hits	•		ANY AREA LEASED TO OTHERS	\$? Y / N:
LOC #	STREET 7840 Camino Real			СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
16	7840 Camino Real			X	INSIDE	X	OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	100 SQ FT
1	COUNTY: Miami Dade	ZIP: 3	3143		-				TOTAL BUILDING AREA:	50,368 SQ FT
DESCRI	TION OF OPERATIONS: Residential Condo			ies	w/47-Ur	hits	I	I	ANY AREA LEASED TO OTHERS	3? Y / N:
LOC #				1	Y LIMITS	-	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
17	7900 Camino Real			x	INSIDE	x	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STAT	E: FL			<u> </u>	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami Dade		3143			<u> </u>			TOTAL BUILDING AREA:	3.775 SQ FT
	PTION OF OPERATIONS: Main Clubhouse - 2			npi	c Size p	ool			ANY AREA LEASED TO OTHERS	-, -
LOC #				-			EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	7900 Camino Real			X	1	X	1			
17				×	INSIDE	×	OWNER	"		SQ FT
BLD #	CITY: Miami	STAT	• =		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
2	COUNTY: Miami Dade	ZIP: 3	3143						TOTAL BUILDING AREA:	SQ FT
L	PTION OF OPERATIONS:								ANY AREA LEASED TO OTHERS	3? Y / N:
LOC #	STREET 7711 Camino Real				Y LIMITS		EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
18				X	INSIDE	X	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STAT			OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami Dade		3143						TOTAL BUILDING AREA:	3,775 SQ FT
DESCRI	TION OF OPERATIONS: Clubhouse/Proper	ty Ma	nagement	Off	ICE - 2-Stories w/pool ANY AREA LEASED TO OTH			ANY AREA LEASED TO OTHERS	3? Y / N:	
LOC #	STREET 7711 Camino Real			СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
18				Χ	INSIDE	X	OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
2	COUNTY: Miami Dade	ZIP: 3	3143		1				TOTAL BUILDING AREA:	SQ FT
DESCRI	PTION OF OPERATIONS:	1							ANY AREA LEASED TO OTHERS	3? Y / N:
LOC #	STREET 7818 Camino Real			CIT	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
19	7818 Camino Real			X	INSIDE	X	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami Dade	ZIP:3	3143		-				TOTAL BUILDING AREA:	992 SQ FT
	PTION OF OPERATIONS: Cabana/Gym Build			wit	h pool				ANY AREA LEASED TO OTHERS	
STATE FACT	ERSON WHO KNOWINGLY AND WITH INTEN MENT OF CLAIM CONTAINING ANY MATERIA MATERIAL THERETO, COMMITS A FRAUDULE	LLY F	ALSE INFORI	MATI CT, W	ON, OR C /HICH IS A	ONC A CR	EALS FOR THE	PURPOSE OF MISL	EADING INFORMATION CON TO CRIMINAL AND [NY: SUBS	CERNING ANY
	TIES. (Not applicable in CO, DC, FL, HI, KS, MA E DISTRICT OF COLUMBIA, WARNING: IT IS A NSURER OR ANY OTHER PERSON. PENALT E INFORMATION MATERIALLY RELATED TO A	CRIM	e to provid Iclude Impf	E FA	LSE OR M	/ISLI ND/C	EADING INFORM OR FINES. IN AL	ATION TO AN INSU	RER FOR THE PURPOSE OF	
IN FLO	FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.									
BELIE OR IN CLAIM CONT, CONC										
ANOTI THE P	SSACHUSETTS, NEBRASKA, OREGON AND HER PERSON FILES AN APPLICATION FOR II URPOSE OF MISLEADING INFORMATION COI ME AND MAY SUBJECT THE PERSON TO CRI	NSURA NCERI	ANCE OR STA	ATEN CT M	IENT OF (CLAI	M CONTAINING	ANY MATERIALLY I	FALSE INFORMATION, OR CO	ONCEALS FOR

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.

ACORD 823 (2011/10)



ADDITIONAL PREMISES INFORMATION SCHEDULE Page 2 of 2

AGENCY					CARRIE		NAIC CODE			
Hub Ir	nternational Florida				Americ	an	Coastal Insu	rance Company		12968
POLICY I	NUMBER LDGS K-P+CH/POOLS+EQ		EFFECTIVE D 03/15/202		NAMED INSURED(S) Village Of Kings Creek Condominium					
PREM	ISES INFORMATION									
LOC #	STREET 7818 Camino Real			CIT	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
19	7010 Callino Real			Χ	INSIDE	X	OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
2	COUNTY: Miami Dade	ZIP:3	3143		1		1		TOTAL BUILDING AREA:	SQ FT
DESCRIP	TION OF OPERATIONS:							·	ANY AREA LEASED TO OTHERS	S? Y / N:
LOC #	STREET 7750 Camino Real			СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
20	7750 Camino Real			X	INSIDE	X	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STAT	E: FL		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami Dade	ZIP:3	3143		1				TOTAL BUILDING AREA:	992 SQ FT
DESCRIP	TION OF OPERATIONS: Cabana/Gym Build	ing -	one story	w/p	ool				ANY AREA LEASED TO OTHERS	6? Y / N:
LOC #	STREET 7750 Camino Real			СІТ	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
20	7750 Camino Real			X	INSIDE	x	OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY: Miami	STATI	E: FL	<u> </u>	OUTSIDE	<u> </u>	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
2	COUNTY: Miami Dade		3143		1		1		TOTAL BUILDING AREA:	SQ FT
	PTION OF OPERATIONS:								ANY AREA LEASED TO OTHERS	
LOC #				СІТ	Y LIMITS	INIT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
20	STREET 7750 Camino Real			X		X	OWNER		OCCUPIED AREA:	SQ FT
ZU BLD#	CITY: Miemi	STAT	E: FL	^	OUTSIDE	^	TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
				<u> </u>			TENANT	# PART TIME EMPL		
3		ZIP: 3	3143						TOTAL BUILDING AREA:	SQ FT
				T		·			ANY AREA LEASED TO OTHERS	5? Y / N:
LOC #	STREET 7711 Camino Real				Y LIMITS	<u> </u>	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
21				X	INSIDE	X	OWNER		OCCUPIED AREA:	100 SQ FT
BLD #	CITY: Miami	STATI			OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
1	COUNTY: Miami-Dade	ZIP:3	3143						TOTAL BUILDING AREA:	200 SQ FT
DESCRIF	TION OF OPERATIONS: Guard building							1	ANY AREA LEASED TO OTHERS	6? Y / N:
LOC #	STREET			CIT		INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
					INSIDE		OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY:	STAT	E:		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
	COUNTY:	ZIP:							TOTAL BUILDING AREA:	SQ FT
DESCRIF	PTION OF OPERATIONS:								ANY AREA LEASED TO OTHERS	3? Y / N:
LOC #	STREET			CIT	Y LIMITS	INT	EREST	# FULL TIME EMPL	ANNUAL REVENUES: \$	
					INSIDE		OWNER		OCCUPIED AREA:	SQ FT
BLD #	CITY:	STAT	E:		OUTSIDE		TENANT	# PART TIME EMPL	OPEN TO PUBLIC AREA:	SQ FT
	COUNTY:	ZIP:]				TOTAL BUILDING AREA:	SQ FT
DESCRIP	PTION OF OPERATIONS:							•	ANY AREA LEASED TO OTHERS	6? Y / N:
ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied) IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT										
IN FLO	DRIDA, ANY PERSON WHO KNOWINGLY AN CATION CONTAINING ANY FALSE, INCOMPLE	ND WI	TH INTENT	то ії	NJURE, D	EFR	AUD, OR DECE			CLAIM OR AN
BELIER OR IN CLAIM CONT	IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL OR COMMERCIAL INSURANCE, OR A CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.									
ANOTH THE P A CRIN	SSACHUSETTS, NEBRASKA, OREGON AND HER PERSON FILES AN APPLICATION FOR IN URPOSE OF MISLEADING INFORMATION CON ME AND MAY SUBJECT THE PERSON TO CRIM	NSURA NCERN MINAL	ANCE OR STA NING ANY FA AND CIVIL PE	ATEN CT M ENAL	IENT OF (IATERIAL TIES.	CLAI THE	M CONTAINING RETO, MAY BE C	ANY MATERIALLY F COMMITTING A FRA	FALSE INFORMATION, OR CO UDULENT INSURANCE ACT, V	ONCEALS FOR WHICH MAY BE
	SHINGTON, IT IS A CRIME TO KNOWINGLY PF AUDING THE COMPANY. PENALTIES INCLUD								URANCE COMPANY FOR TH	E PURPOSE OF



KLAWRENCE1

DATE (MM/DD/YYYY)

PROPERTY S	ECTION
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	ROPERTY	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLANKET SUMMARY

DLAN					
BLKT #	AMOUNT	ТҮРЕ	BLKT #	AMOUNT	ТҮРЕ

		PREMISES #: 11	STREET	ADDRE	_{ss:} 7830 Can	nino	Real, Mia	ami, FL 33 [.]	143				
PR	EMISES INFORMATION	BUILDING #: 1	BLDG D	ESCRIPT	rion: Condo								
	SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU-	CAUSES OF L	oss	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORM	IS AND CON	DITIONS TO APPLY
Bu	ilding K - 47 Units	6,296,		R	Special (Inclu theft)	uding		10,000			5% Hurr Occurre		ed Per
AD	DITIONAL INFORMATION	BUSINESS INCOME /	EXTRA EXPEN	SE - Atta	ch ACORD 810		N	ALUE REPOR	TING INFOR	ΜΑΤΙΟ	ON - Attach A	CORD 811	
	DITIONAL COVERAGES,	OPTIONS, RESTR	RICTIONS, E		RSEMENTS A	AND I	RATING IN	FORMATI	ON				
	OILAGE DESCRIPTION OF PRO	OPERTY COVERED					LIMIT		REFRIG		OPTIONS		
	(Y / N)						\$		AGREEN (Y / N				R CONTAMINATION
							DEDUCTIB	LE			POW	ER OUTAGE	
							\$						
<u> </u>	KHOLE COVERAGE (Required in				ACCEPT (OVERAGE		LIMIT: \$		
MIN	E SUBSIDENCE COVERAGE (Rec				ACCEPT (COVER	RAGE	REJECT	OVERAGE		LIMIT: \$		
	PROPERTY HAS BEEN DESIGN	ATED AN HISTORICAL L	ANDMARK								# OF OPEN S	SIDES ON ST	RUCTURE:
	NSTRUCTION TYPE e Resistive/Superior	DISTANCE HYDRANT FI 300 FT			RE DISTRICT A de		CODE NUM				# BASM'TS	YR BUILT 1975	TOTAL AREA 50,368
ви X	BUILDING IMPROVEMENTS BLDG CODE GRADE TAX CODE ROOF TYPE OTHER OCCUPANCIES X WIRING, YR: 2002 X PLUMBING, YR: 2002 99 TAX CODE Poured OTHER OCCUPANCIES												
X	0040	EATING, YR: YR:	WIND CLASS		SEMI- RESIS	STIVE	-		OR FIREPLA		/OODBURNII SERT		E FALLED:
PRI	MARY HEAT		1 1			SEC	ONDARY HE	AT					
	BOILER SOLID FUE						BOILER	SOLI	D FUEL				
	IF BOILER, IS INSURANCE PLAC	CED ELSEWHERE?	Y/N				IF BOILER, I	S INSURANCE	PLACED EL	SEW	HERE?	Y/N	
RIG	HT EXPOSURE & DISTANCE	LEFT EXP	OSURE & DIST	ANCE		FRO	NT EXPOSUF	RE & DISTANC	E		REAR EXPO	DSURE & DIS	STANCE
BUF	RGLAR ALARM TYPE		CERT	IFICATE	#					EXF	PIRATION DA	" - S	ENTRAL LOCAL TATION GONG
BUF	RGLAR ALARM INSTALLED AND S	ERVICED BY				EXTE	ENT	GI	RADE	# G	UARDS / WAT		CLOCK HOURLY
PRE	EMISES FIRE PROTECTION (Sprin)	klers, Standpipes, CO2 /	Chemical Syst	ems)	% SPF	RNK	FIRE ALARM	I MANUFACTU	RER				CENTRAL STATION X LOCAL GONG
AD	DITIONAL INTEREST	ACORD 45 at	tached for	additi	onal names							I	
		NAME AND ADDRESS		EVIDE		RTIFIC	ATE	-			II	NTEREST IN	ITEM NUMBER
	LOSS PAYEE										LOCATION		BUILDING:
	MORTGAGEE										ITEM CLASS:		ITEM:
											ITEM DESC	RIPTION	
		REFERENCE / LOAN #:]								

ACORD 140 (2014/12)

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ADDITIONAL	[PREMISES #: 12		STREET	ADDRE	ss: 7	860-65 Ca	imi	ino Real,	Mi	ami, FL	331	43						
PREMISES INFORMATION	N	BUILDING #: 1		BLDG D		TION:	Condo												
SUBJECT OF INSURANCE		AMOUNT		COINS %	VALU- ATION		JSES OF LOS		INFLATION GUARD %		DED	D T	ED 'PE	BLKT #	FURI	S AND CO	-		APPLY
Building L - 78 Units		10,310	,500	100	R	Spec theft	cial (Includii :) - Detail	ng			10,000				5% Hurr Occurre		Ded	Per	
			/ EXTD/				000 040		 ,								1		
								- r					INFOR	MATIC	ON - Attach A	LUKD 811			
		•	RICTI	UNS, E	NDUR	SEIV	IEN I 5 AN				URIVIATI				OPTIONS				
SPOILAGE DESCRIPTION OF PI	NOFL								\$				FRIG M			KDOWN			
(Y / N)												-	(Y / N	I)		EROUTA		SE	LLING
															FOW	EROUTA	GE	PF	RICE
SINKHOLE COVERAGE (Required in		ide)					ACCEPT CO		\$		REJECT								
· · ·		,									-	-	-		LIMIT: \$				
	•						ACCEPT CO	VER	RAGE		REJECT	OVE	RAGE		LIMIT: \$				
PROPERTY HAS BEEN DESIG	NATE	D AN HISTORICAL	LANDM	IARK										;	# OF OPEN S	IDES ON	SIRU	ICTURE:	
CONSTRUCTION TYPE		DISTANCE		A.T.	FIR	RE DIS	TRICT		CODE NUN	ИВЕ	R PROT	T CL	# STO	RIES	# BASM'TS	YR BUI	LT	TOTAL A	REA
Fire Resistive/Superior		HYDRANT F	FIRE ST.	Mia	mi-Da	ade			130)	4		4	.		197	5	82,484	
BUILDING IMPROVEMENTS			BLD	G CODE RADE	TAX		ROOF TYP	ΡE		от	HER OCCL	JPAN	IES						
X WIRING, YR: 2002 X	PLUM	BING, YR: 2002	99				Poured												
X ROOFING, YR: 2012	HEATI	NG, YR:	WINE	CLASS			EMI- RESISTIN	VE				OR FI			OODBURNIN SERT		ATE ISTAI	_LED:	
OTHER:		YR:		RESISTI	VE						NUFACTU	RER.							
							5			AI [-, [
							-		BOILER			ID FU	L	0514					
IF BOILER, IS INSURANCE PLA	ACED		Y/I						IF BOILER, I				EDEL	SEWF		Y/N		NOT	
RIGHT EXPOSURE & DISTANCE		LEFT EX	PUSUR		ANCE		F	RO	NT EXPOSUR	RE 8	& DISTANC	E			REAR EAP	JOURE &	01517	ANCE	
				0507										EVD			CEN	TRAL	LOCAL
BURGLAR ALARM TYPE				CERT	IFICATE	#								EAP	IRATION DA		STA	TION L	GONG
	0501							VT						# 01			WIT		
BURGLAR ALARM INSTALLED AND	SERV	NCED BY					_	XTE			G	RADE		# G(UARDS / WAT	CHIVIEN			HOURLY
PREMISES FIRE PROTECTION (Spri	nklers	Standpipes, CO2	/ Chem	ical Syste	ems)		% SPRNK	(FIRE ALARM	A M/		REP							AL STATION
		-,p-p,			,		// 0/ 144	`									x	-	
ADDITIONAL INTEREST		40000 45 a	44 la		l -l !4 !													LOCAL	GOING
INTEREST		ACORD 45 a			EVIDE		CERTI	FIC	ATE										
LOSS PAYEE				·	LVIDE	NOL.	ULKI	110/								ITEREST			
															LOCATION: ITEM			BUILDING	:
MORTGAGEE															ITEM CLASS:	DIDTION		TEM:	
															ITEM DESC	RIPTION			
	DEE	ERENCE / LOAN #:																	
								:											
REMARKS (ACORD 101, SEE ATTACHED ACORD			rks 50	cneau	<u>e, ma</u>	y be	attached	IT I	<u>more spa</u>	ICe	is requ	irea							
	, 10	•																	
1																			



KLAWRENCE1

DATE (MM/DD/YYYY)

PROPERTY SE	CTION
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P	KOPERIY	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLANKET SUMMARY

DLAN						
BLKT #	AMOUNT	1	YPE	BLKT #	AMOUNT	TYPE

		PREMIS	SES #: 13	STREET	ADDRES	_{ss:} 7920 Car	nino I	Real, Mia	ami, FL 33	143					
PR	EMISES INFORMATION	BUILDIN	ıg #: 1	BLDG D	ESCRIPT	ION: Condo									
	SUBJECT OF INSURANCE	4	MOUNT	COINS %	VALU- ATION	CAUSES OF L	.oss	INFLATION GUARD %	DED	DED TYPE	BLKT	FORM	S AND CON	IDITIONS	TO APPLY
Bu	ilding M - 47 Units		6,296,00			Special (Inclutheft)			10,000			5% Hurri Occurre		ed Per	
ADI	DITIONAL INFORMATION	BUSINESS	INCOME / EXT		SE - Attac	h ACORD 810			VALUE REPOR	TING INFOR	ΜΑΤΙΟ	N - Attach AC	CORD 811		
AD	DITIONAL COVERAGES,	OPTIONS	, RESTRIC	TIONS, E	NDOR	SEMENTS A	AND R	ATING I	NFORMATI	ON					
	OILAGE DESCRIPTION OF PRO	OPERTY CO	VERED					LIMIT		REFRIG I		OPTIONS			
	(Y / N)						-	\$		AGREEN (Y / N		BREA	AKDOWN O		
								DEDUCTIB	BLE			POW	ER OUTAG	E	SELLING PRICE
								\$							
<u> </u>	KHOLE COVERAGE (Required in					ACCEPT				COVERAGE		LIMIT: \$			
MIN	E SUBSIDENCE COVERAGE (Rec	•				ACCEPT	COVER	AGE	REJECT	COVERAGE		LIMIT: \$			_
	PROPERTY HAS BEEN DESIGN	ATED AN HIS	TORICAL LAN	DMARK								# OF OPEN S	IDES ON S	TRUCTUR	E:
	NSTRUCTION TYPE e Resistive/Superior	HYD	DISTANCE TO PRANT FIRE 300 _{FT}	STAT 2 _{MI} Mia		E DISTRICT de		CODE NUM				# BASM'TS	YR BUILT 1975	г тота 50,3	L AREA 68
ви X	LDING IMPROVEMENTS	LUMBING, YR		DG CODE GRADE	TAX C	ODE ROOF			OTHER OCCI	JPANCIES				I	
Х	0040	EATING, YR:		ND CLASS		SEMI- RESIS	STIVE		HEATIN	G SOURCE II OR FIREPLA			IG DAT	TE TALLED: -	
	OTHER:	YR:		RESISTI	VE X	Other			MANUFACTU						
PRI							SECO	NDARY HE	АТ						
	BOILER SOLID FUE	EL					E	BOILER	SOL	ID FUEL					
	IF BOILER, IS INSURANCE PLAC	CED ELSEWH	IERE?	′ / N			1	F BOILER, I	IS INSURANCE	E PLACED EL	SEW	IERE?	Y / N		
RIG	HT EXPOSURE & DISTANCE		LEFT EXPOSI	IRE & DIST	ANCE		FRON	T EXPOSU	RE & DISTANC	E		REAR EXPO	SURE & DI	STANCE	
BUI	RGLAR ALARM TYPE	1		CERT	IFICATE	#					EXF	PIRATION DAT		CENTRAL STATION	LOCAL GONG
							1						v		8
BUI	RGLAR ALARM INSTALLED AND S	SERVICED BY	,				EXTER	NT	G	RADE	# G	UARDS / WAT	CHMEN	CLO	CK HOURLY
PRE	EMISES FIRE PROTECTION (Sprint	klers, Standp	ipes, CO2 / Cho	emical Syst	ems)	% SPF	RNK F		MANUFACTU	IRER			_	14	TRAL STATION AL GONG
AD		1005				nal namos	ſ						1		
r	DITIONAL INTEREST		RD 45 attac	<u>hed</u> for	additio	<u>mai n</u> ames									
INT			RD 45 attac				RTIFICA	TE				IN	ITEREST IN	I ITEM NUI	MBER
INT								TE				LOCATION:		I ITEM NUI BUILDI	
INT	EREST							TE							
	EREST LOSS PAYEE							ТЕ				LOCATION:		BUILDI	
	EREST LOSS PAYEE							TE				LOCATION: ITEM CLASS:		BUILDI	

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AGENCY CUSTOMER ID:

KINGCRE-04

BURGLAR ALARM TYPE CERTIFICATE # STATION In CARE # STATION In CARE # BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN CLOCK HOURLY															
BUILDET OF INSURANCE ANOUNT BUILDET OF INSURANCE ANOUNT BUILDET OF INSURANCE ANOUNT BUILDET OF INSURANCE 10,310,500 10 R	ADDITIONAL						ino Rea	l, Mian	ni, FL :	33143					
Building N - 78 Units 10,310,500 100 R Secial finduding 10,000 Per S% Hurricane Ded Per Addition of the second s	PREMISES INFORMATIO	N BUILDING #: 1	BLDG D	ESCRIP	TION: C	ondo					DUKT				
ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - ABLAN ACORD 910 ADDITIONAL INFORMATION BUSINESS INCOME / EXTRA EXPENSE - ABLAN ACORD 910 ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SOLUTIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SOLUTIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION BEDUCTORLE S BINNOLE COVERAGE (Required in Florida) ACCEPT COVERAGE RELECT COVERAGE (Required in RL, N, KY and WY) ACCEPT COVERAGE RELECT COVERAGE (Required in RL, N, KY and WY) PROFERENT PROFERENCE S BINNOLE COVERAGE (Required in RL, N, KY and WY) ACCEPT COVERAGE RELECT		AMOUNT	COINS %		CAUS		GUARD 9		DED	TYPE	BLKI #				
ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SPOILage DESCRIPTION OF PROPERTY COVERED UNIT SPOILage DESCRIPTION OF PROPERTY COVERED UNIT SECURITION DEDUCTIBLE DESCRIPTION OF PROPERTY COVERED UNIT SECURITION DEDUCTIBLE DESCRIPTION OF PROPERTY COVERAGE (Y/N) DEDUCTIBLE DESCRIPTION OF PROPERTY COVERAGE (Required in Florida) ACCEPT COVERAGE RELECT COVERAGE LINT: 5 UNIT: 5 U	Building N - 78 Units	10,310,	,500 100	R	theft)	ai (including		1	0,000	Per				Jea	Per
ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SPOLLAGE DESCRIPTION OF PROPERTY COVERED UNIT SPOLLAGE DESCRIPTION OF PROPERTY COVERED UNIT S SOURCE (Y / N DEDUCTIBLE V/ N DEDUCTIBLE DESCRIPTION OF PROPERTY COVERAGE (Y / N DEDUCTIBLE V/ N DEDUCTIBLE DESCRIPTION OF PROPERTY COVERAGE V/ N DEDUCTIBLE DESCRIPTION OF PROPERTY COVERAGE UNIT: S SINURHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LINIT: S SINURHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LINIT: S SINURHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LINIT: S SINURHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LINIT: S SINURHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LINIT: S SINUROUS SUBJECT SOURCE TO THERE STAT DISTANCE TO THERE STAT SOURCE TO THERE STATUSE SOURCE TO															
ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SPOLAGE POSCRIPTION OF PROPERTY COVERED UMIT SPOLAGE POWER OUTAGE POW											_				
ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION SPOLAGE POSCRIPTION OF PROPERTY COVERED UMIT SPOLAGE POWER OUTAGE POW								_							
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MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WY) ACCEPT COVERAGE REJECT COVERAGE LIMIT: S PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE:										L				0L	
PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: CONSTRUCTION TYPE DISTANCE TO HYDRANT FIRE DISTRICT CODE NUMBER PROT CL # STORIES # BASMTS YR BUILT TOTAL AREA Fire Resistive/Superior 300 FT 2 milliami-Dade 130 4 4 1975 82,484 BUILDING IMPROVEMENTS 300 FT 2 milliami-Dade TAX CODE ROOF TYPE OTHER OCCUPANCIES YOROFING, YR: 2012 HEATING, YR: 2002 Selline resistive HEATING SOURCE INCL WOODBURNING DATE YOROFING, YR: YR VIND CLASS Selline resistive HEATING SOURCE INCL WOODBURNING DATE YOROFING, YR: YR YR RESISTIVE Seconbark HEAT BOILER SOLID FUEL INSTALLED YN RESISTIVE SECONDARY HEAT BOILER IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N BURGLAR ALARM TYPE CERTIFICATE # EXPIRATION DATE CENTRAL STATION COCK HOURLY BURGLAR ALARM INSTAL	SINKHOLE COVERAGE (Required	in Florida)			A	CCEPT COVER	RAGE	RE	EJECT C	OVERAG	θE	LIMIT: \$			
CONSTRUCTION TYPE DISTANCE TO TYPE TREE STAT CONSTRUCT ON TYPE TO TAL AREA 1075 82,484 CONSTRUCTION TYPE TIRE STAT CONSTRUCT ON THE OCUPANTION OF TAX CODE NOOF TYPE TO TAL AREA 1075 82,484 DULDNO INPOVEMENTS TO TAX CODE OCODE GRADE WINNO, YR: 2002 X POLIMBING, YR:2002 Y PLUMBING, YR	MINE SUBSIDENCE COVERAGE (R	Required in IL, IN, KY and	WV)		A	CCEPT COVER	RAGE	RE	EJECT C	OVERAG	θE	LIMIT: \$			
Note Notice State Note Notice State Note Note Note Note Note Note Note Note	PROPERTY HAS BEEN DESIG	NATED AN HISTORICAL	LANDMARK									# OF OPEN	SIDES ON	STRU	CTURE:
Note Notice State Note Notice State Note Note Note Note Note Note Note Note															
Note Notice State Note Notice State Note Note Note Note Note Note Note Note															
BUD GOODE GRADE TAX CODE GRADE ROOF TYPE Poured OTHER OCCUPANCIES WIRING, YR: 2002 X ROOFING, YR: 2012 HEATING, YR	CONSTRUCTION TYPE	HYDRANT F	IRE STAT			RICT	CODE N	UMBER	PROT	CL #S	TORIES	# BASM'TS	S YR BUII	LT	TOTAL AREA
Ductor information GRADE Poured Poured X Wining, yr: 2002 X Pulumbing, yr: 2002 Pulumbing, yr: 2002 Pulumbing, yr: 2002 Pulumbing, yr: 2002 Not class OTHER: yr: resistive X Other Manufacturer: Instruction PRIMARY HEAT Solid Fuel secondary Heat Boiler Solid Fuel Instruction If Boiler, is insurance Placed elsewhere? Y/N If Boiler, is insurance Placed elsewhere? Y/N Right Exposure & distance Leff exposure & distance Front exposure & distance Rear exposure & distance BurgLar ALARM INSTALLED AND Serviced BY Certificate # Extent Grade # Guards / watchwen Clock Hourly PREMISES FIRE PROTECTION (Sprinklers, Standpipes, C02 / Chemical Systems) % SPRNK Fire ALARM MANUFACTURER Central station INTEREST ACORD 45 attached for additional names Interest in item / item	Fire Resistive/Superior	300 _{FT}	2 _{MI} Mia		ade		13	0	4		4		1975	5	82,484
WINNON, TR. 2002 HEATING, YR: WIND CLASS SEMI-RESISTIVE HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT DATE INSTALLED: OTHER: YR: RESISTIVE Other MINDACTURER: MINDACTURER: PRIMARY HEAT SOULD FUEL BOILER SOULD FUEL BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N RIGHT EXPOSURE & DISTANCE LEFT EXPOSURE & DISTANCE FRONT EXPOSURE & DISTANCE REAR EXPOSURE & DISTANCE BURGLAR ALARM TYPE CERTIFICATE # EXTENT GRADE # GUARDS / WATCHINEN COCHTRAL LOCA BURGLAR ALARM INSTALLED AND SERVICED BY VIENTH KEYS EXTENT GRADE # GUARDS / WATCHINEN CLOCK HOURLY PREMISES FIRE PROTECTION (Sprinklers, Standpipes, C02 / Chemical Systems) % SPRNK FIRE ALARM MANUFACTURER CENTRAL STATIO MORTGAGEE NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER INTEREST NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER MORTGAGEE NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER: INTEREST NAME AN			GRADE	TAX	-			OTHE	ROCCU	PANCIES	5				
Image: Static Structure of the structure of		PLUMBING, YR: 2002				Pourea				SOURC					
PRIMARY HEAT BOILER BOILER BOILER IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IEFT EXPOSURE & DISTANCE IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REMARY HEAT BOILER BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: SECONDARY HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: SECONDARY HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N Secondary HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: SECONDARY HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: SECONDARY HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: SECONDARY HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: Secondary HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: Secondary HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N REFERENCE / LOAN #: Secondary HEAT BOILER, IS INSURANCE PLACED ELSEWHERE? REFERENCE / LOAN #: Secondary HEAT Secondary								s	STOVE O	R FIREP		SERT	ING D/ IN	STAL	LED:
BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N RIGHT EXPOSURE & DISTANCE LEFT EXPOSURE & DISTANCE BURGLAR ALARM TYPE CERTIFICATE # BURGLAR ALARM INSTALLED AND SERVICED BY CERTIFICATE # PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) % SPRNK MORTGAGEE NAME AND ADDRESS REFERENCE / LOAN #: EVIDENCE:		YR:	RESIST	IVE 4		-			JFACTUR	ER:					
IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SERVICED BY PREMISES FIRE PROTECTION (Sprinklors, Standpipes, CO2 / Chemical Systems) MITH KEYS BURGLAR ALARM INSTALLED AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST INTEREST MORTGAGEE MORTGAGEE MORTGAGEE IFFORTEX / LOAN #: INTEREST // LOAN #: INTEREST						SEC			20115						
RIGHT EXPOSURE & DISTANCE LEFT EXPOSURE & DISTANCE FRONT EXPOSURE & DISTANCE REAR EXPOSURE & DISTANCE BURGLAR ALARM TYPE CERTIFICATE # EXPIRATION DATE CENTRAL STATION WITH KEYS BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN COCK HOURLY PREMISES FIRE PROTECTION (Sprinklers, Standpipes, C02 / Chemical Systems) % SPRNK FIRE ALARM MANUFACTURER CENTRAL STATIO X CENTRAL STATIO LOCAL GONG ADDITIONAL INTEREST ACORD 45 attached for additional names CENTIFICATE CENTRAL STATIO X CENTRAL STATIO LOCAL GONG INTEREST LOSS PAYEE NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER ITEM CLASS: BUILDING: ITEM MORTGAGEE REFERENCE / LOAN #: FREFERENCE / LOAN #: VIENTION INTEREST BUILDING:			V/N									HERE?	V/N		
BURGLAR ALARM INPE CERTIFICATE # EXTENT GRADE EXTENT GRADE # GUARDS / WATCHMEN CLOCK HOURLY PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) % SPRNK FIRE ALARM MANUFACTURER Image: Control of the system s				ANCE		FRO								DISTA	NCE
BURGLARK ALARM INPE CERTIFICATE # STATION UNTE STATION UNTE STATION UNTE GONC BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN CLOCK HOURLY PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) % SPRNK FIRE ALARM MANUFACTURER Image: Control of the main of the															
WITH KEYS BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN I CLOCK HOURLY PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems) % SPRNK FIRE ALARM MANUFACTURER I CENTRAL STATIO ADDITIONAL INTEREST ACORD 45 attached for additional names CENTRAL STATIO COCAL GONG INTEREST NAME AND ADDRESS RANK: EVIDENCE: CENTIFICATE INTEREST IN ITEM NUMBER LOSS PAYEE MORTGAGEE ITEM EVIDENCE: EVIDENCE: IITEM MORTGAGEE REFERENCE / LOAN #: EVIDENCE: EVIDENCE: IITEM IITEM	BURGLAR ALARM TYPE	I	CER	IFICATE	#	I					EXF	PIRATION D			
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ADDITIONAL INTEREST ACORD 45 attached for additional names INTEREST NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE LOSS PAYEE INTEREST BUILDING: MORTGAGEE ITEM ITEM: REFERENCE / LOAN #: EVIDENCE: CERTIFICATE															
ADDITIONAL INTEREST ACORD 45 attached for additional names INTEREST NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER LOSS PAYEE MORTGAGEE ITEM LOCATION: BUILDING: MORTGAGEE REFERENCE / LOAN #: REFERENCE / LOAN #: ITEM ITEM	PREMISES FIRE PROTECTION (Spr	inklers, Standpipes, CO2	/ Chemical Sys	tems)		% SPRNK	FIRE ALAF	RM MANU	UFACTUF	RER				Y	CENTRAL STATION
INTEREST NAME AND ADDRESS EVIDENCE: CERTIFICATE INTEREST IN ITEM NUMBER LOSS PAYEE MORTGAGEE EVIDENCE: V CERTIFICATE LOCATION: BUILDING: MORTGAGEE REFERENCE / LOAN #: V V V V V			Hoohod for	additi	onal n									~	LOCAL GONG
LOSS PAYEE MORTGAGEE REFERENCE / LOAN #:							ATE						INTEREST		
MORTGAGEE MORTGAGEE ITEM CLASS: ITEM: ITEM I	LOSS PAYEE														
REFERENCE / LOAN #:	MORTGAGEE														
													CRIPTION		
						Г									
REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)		1				<u> </u>									
	REMARKS (ACORD 101,	Additional Remai	rks Schedu	le, ma	y be a	ttached if	more sp	ace is	s requi	red)					



KLAWRENCE1

DATE (MM/DD/YYYY)

PROPERTY	SECTION
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	ROPERIT	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLANKET SUMMARY

DLAN					
BLKT #	AMOUNT	ТҮРЕ	BLKT #	AMOUNT	ТҮРЕ

		PREMISES	s #: 15	STREET	ADDRES	_{ss:} 7	845-50 Ca	min	o Real,	Miami, F	L 331	43						
PR	EMISES INFORMATION	BUILDING #	#: 1	BLDG DE	SCRIPT	ION:	Condo											
	SUBJECT OF INSURANCE	AMC	DUNT	COINS %	VALU- ATION	CA	USES OF LOSS	s II	NFLATION GUARD %	DED		ED E PE	BLKT	FORM	S AND CO	ONDIT	IONS TO) APPLY
Bui	ilding O -78 Units	10	,310,500	100	R		cial (Includir t)			10,00				5% Hurri Occurrei		Ded	Per	
ADD	DITIONAL INFORMATION	BUSINESS INC	COME / EXTRA	A EXPENS	E - Atta	ch AC	ORD 810		N	ALUE REPO	RTING	INFORM	ΙΑΤΙΟ	N - Attach AC	ORD 811			
AD	DITIONAL COVERAGES,	OPTIONS, R	RESTRICTI	ONS, E	NDOR	SEN	MENTS AND	D RA	ATING IN	IFORMA [.]	ION							
		OPERTY COVER	RED					L	IMIT					OPTIONS				
· ·	Y / N)							\$	5		A	GREEM (Y / N		BREA	KDOWN	OR C		
								5	DEDUCTIB	LE]	POWE	ER OUTA	GE		ELLING RICE
SIN	KHOLE COVERAGE (Required in I	Florida)					ACCEPT COV	/ERA	GE	REJEC	COVE	RAGE		LIMIT: \$				
MIN	E SUBSIDENCE COVERAGE (Req	uired in IL, IN, F	KY and WV)				ACCEPT COV	/ERA	GE	REJEC	COVE	RAGE		LIMIT: \$				
	PROPERTY HAS BEEN DESIGNA	ATED AN HISTO	RICAL LANDM	IARK										# OF OPEN S	IDES ON	STRU	CTURE:	
	ISTRUCTION TYPE e Resistive/Superior	HYDRA	$0_{FT} = 0_{FT}$	Mia			TRICT	1	CODE NUN	IBER PR	отс∟ 4	# sтоі 4	RIES	# BASM'TS	YR BUI 197		total. 82,48	
ви X	LDING IMPROVEMENTS WIRING, YR: 2002 X PL	UMBING, YR: 2	BLD	G CODE RADE	TAX C		ROOF TYP	E		OTHER OC	UPAN	CIES		I				
X	2042	ATING, YR: YR:		D CLASS	/E)		EMI- RESISTIV	/E		HEATI STOV	OR FI	JRCE IN REPLAC	ICL W	OODBURNIN SERT	G D/ IN	ATE ISTAL	LED:	
PRI	MARY HEAT		1 1				SI	ECON	IDARY HEA	АТ								
	BOILER SOLID FUE	EL						в	DILER	s	LID FU	EL [
	IF BOILER, IS INSURANCE PLAC	ED ELSEWHER	RE? Y/	N				IF	BOILER, I		E PLA		SEWH	IERE?	Y / N			
RIG	HT EXPOSURE & DISTANCE	LE	EFT EXPOSUR	E & DIST/	ANCE		FF	RONT	EXPOSUR	E & DISTAN	CE			REAR EXPO	SURE & I	DISTA	NCE	
BUF	RGLAR ALARM TYPE			CERTI	FICATE	#							EXP	IRATION DAT	E	CEN STAT	TION	LOCAL GONG
BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN CLOCK HOURD								< HOURLY										
	MISES FIRE PROTECTION (Sprink	lore Standning	c CO2 / Chom	ical Sveta	me)											<u> </u>	05117	
	INISES FIRE PROTECTION (Spring	ders, Standpipe:	s, coz / chem	ical Syste	ans)		% SPRNK	FI		MANUFAC	URER					X	1	RAL STATION L GONG
	DITIONAL INTEREST	ACORD	45 attach	ed for a	additie	onal	names											
INTI	EREST	NAME AND ADD	RESS RANK	:	EVIDE	NCE:	CERTIF	FICAT	E					IN	TEREST			3ER
	LOSS PAYEE													LOCATION:		E		3:
	MORTGAGEE													ITEM CLASS:		ľ	ГЕМ:	
														ITEM DESCR	RIPTION			
	•	REFERENCE / LO	OAN #:															

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AGENCY CUSTOMER ID:

KINGCRE-04

KLAWRENCE1

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ADDITIONAL	PREMISES #: 16			_{ss:} 7840 Can	nino	Real, Mi	ami, FL	331	43					
PREMISES INFORMATION	BUILDING #: 1			_{FION:} Condo										
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU-	CAUSES OF LO		INFLATION GUARD %	DED		DED TYPE	BLKT #		ORMS AND CONDITIONS TO AF		
Building P - 47 Units	6,296,000		R	Special (Inclu theft)	ding		10,0	000	Per		5% Hurri Occurrer		Ded	Per
	0,200,000	100					10,0	/00			Occurren			
ADDITIONAL INFORMATION	BUSINESS INCOME / EXTR		SF - Atta					PORT			N - Attach AC	ORD 811	1	
ADDITIONAL COVERAGES,											Alluon Ao			
	•	10143, L						-110			OPTIONS			
SPOILAGE DESCRIPTION OF PRO	JFERTI COVERED					\$			REFRIG M					ONTAMINATION
(Y / N)									(Y / N	I)				SELLING
						DEDUCTI	BLE				POWE	R OUTA	GE	PRICE
						\$				-				
SINKHOLE COVERAGE (Required in				ACCEPT C					OVERAGE		LIMIT: \$			
MINE SUBSIDENCE COVERAGE (Rec				ACCEPT C	OVER	RAGE	REJE	ст со	OVERAGE		LIMIT: \$			
PROPERTY HAS BEEN DESIGN	ATED AN HISTORICAL LAND	MARK									# OF OPEN SI	DES ON	STRL	CTURE:
CONSTRUCTION TYPE	DISTANCE TO		FIF	REDISTRICT		CODE NU	MBER P	ROT	CL # STO	RIES	# BASM'TS	YR BUI	LT	TOTAL AREA
Fire Resistive/Superior		2 _{MI} Mia				13		4	4			197	5	50,368
BUILDING IMPROVEMENTS	BL	DG CODE	1	CODE ROOF T	YPE		OTHER O	CCUP	ANCIES					,
	UMBING, YR: 2002 99	GRADE		Poure										
		ND CLASS			T D (C		HEA	TING	SOURCE I	ICL W	OODBURNIN	G D	ATE	
	EATING, FR.	1		SEMI- RESIS	IIVE		MANUFA			CE INS	SERT	IN	ISTAL	LED:
OTHER: PRIMARY HEAT	YR:	RESISTI	VE		SEC	ONDARY HE	1							
	-,				SEC									
		/ • •				BOILER								
IF BOILER, IS INSURANCE PLAC	LEFT EXPOSU		ANCE			IF BOILER,			LACED EL	SEVVE				NCE
RIGHT EXPOSURE & DISTANCE	LEFT EXPOSO		ANCL		FRO	NT EXPOSU	RE& DIST	ANCE			REAR EAFO		01317	
													CEN	TRAL LOCAL
BURGLAR ALARM TYPE		CERT	IFICATE	#						EXP	IRATION DAT		STA	
													WIT	HKEYS
BURGLAR ALARM INSTALLED AND S	ERVICED BY				EXTI	ENT		GR/	ADE	# GI	JARDS / WAT	CHMEN		CLOCK HOURLY
PREMISES FIRE PROTECTION (Sprint	(lers, Standpipes, CO2 / Che	nical Syste	ems)	% SPR	NK	FIRE ALAR	M MANUFA	CTUR	ER					CENTRAL STATION
													X	LOCAL GONG
ADDITIONAL INTEREST	ACORD 45 attack					1								
INTEREST	NAME AND ADDRESS RAN	К:	EVIDE	NCE: CER	TIFIC	ATE					IN	FEREST		
LOSS PAYEE											LOCATION:			BUILDING:
MORTGAGEE											ITEM CLASS:		1	TEM:
											ITEM DESCR	IPTION		
-	REFERENCE / LOAN #:		lo ma	v be attache	d if	more spa	ace is re	quir	ed)					
		Schodul			uII	more spo		qui	euj					
REMARKS (ACORD 101, A		Schedu	<u>ie, iiia</u>	,										
		<u>Schedul</u>	<u>ie, iiia</u>											
		<u>Schedul</u>	<u>ie, illa</u>	,										
		<u>Schedul</u>	<u>ie, illa</u>											
		<u>Schedul</u>	ie, ma											
		Schedul	<u>ie, ma</u>											
		<u>Schedul</u>	<u>le, ma</u>											
		<u>Schedul</u>												
		<u>Schedul</u>	<u>le, ma</u>											



KLAWRENCE1

DATE (MM/DD/YYYY)

PROPERTY SECTION

P F	KOPERIY	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLAN	KET SUMMARY				
BLKT #	AMOUNT	ТҮРЕ	BLKT #	AMOUNT	TYPE

						1								
	PREMISES #: 17				_{SS:} 7900 Car			imi, FL 33	143					
PREMISES INFORMATION	BUILDING #: 1				ION: Clubho				DED	BLKT				
SUBJECT OF INSURANCE	AMOUNT	COINS	~ ~ ~ ~	ON	CAUSES OF L		INFLATION GUARD %	DED	DED TYPE	#	FURIN		DITIONS TO	APPLY
Clubhouse - Main	496	,300 10			Special (Inclu theft)	uding		10,000	Per		5% Hurri Occurre		ea Per	
Pool Equipment Building	7	,800 10	0 R		Special (Inclu theft)	uding		10,000	Per		5% Hurri Occurre		ed Per	
Patio Lighting	5	,600 10	0 R		Special (Inclu theft)	uding		10,000	Per		5% Hurri Occurre		ed Per	
Pool Equipment	24	,600 10	0 R		Special (Inclu theft)	uding		10,000	Per		5% Hurri Occurre		ed Per	
Pool Patio	85	,000 10	_D R		Special (Inclu theft)	ıding		10,000	Per		5% Hurri Occurre		ed Per	
ADDITIONAL INFORMATION	BUSINESS INCOME	/ EXTRA EXP	ENSE - A	Attac	h ACORD 810		v	ALUE REPOR	TING INFO	ORMATIC	DN - Attach AC	ORD 811		
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MINE SUBSIDENCE COVERAGE (Req	uired in IL, IN, KY and	IWV)			ACCEPT	COVER	RAGE	REJECT	COVERAG	E	LIMIT: \$			
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ACORD 140 (2014/12)

REFERENCE / LOAN #:

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AGENCY CUSTOMER ID:

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DEDUCTIBLE POWER OUTAGE PRICE SINKHOLE COVERAGE (Required in Florida) ACCEPT COVERAGE REJECT COVERAGE LIMIT: \$ MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV) ACCEPT COVERAGE REJECT COVERAGE LIMIT: \$ PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK # OF OPEN SIDES ON STRUCTURE: # # CONSTRUCTION TYPE DISTANCE TO HYDRANT FIRE STAT FIRE STAT FIRE DISTRICT CODE NUMBER PROT CL # STORIES # BASM'TS YR BUILT TOTAL AREA BUILDING IMPROVEMENTS DISTANCE TO HYDRANT FIRE STAT FIRE GODE CODE ROOF TYPE OTHER OCCUPANCIES WIRING, YR: PLUMBING, YR: BUILDING IMPROVEMENTS BLOG CODE TAX CODE ROOF TYPE OTHER OCCUPANCIES WIRING, YR: PLUMBING, YR: WIND CLASS SEMI-RESISTIVE SECONDARY HEAT DOILD FUEL INSTALLED BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N IF BOILER, IS INSURANCE PLACED ELSEWHERE? Y/N RIGHT EXPOSURE & DISTANCE LEFT EXPOSURE & DISTANCE FRONT EXPOSURE & DISTANCE REAR EXPOSURE & DISTANCE BURGLAR ALARM INSTALLED AND SERVICED BY <th>ADDITIONAL</th> <th>DDEMICE # 17</th> <th></th> <th></th> <th>-</th> <th>7000 Camina</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	ADDITIONAL	DDEMICE # 17			-	7000 Camina								
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BURGLAR ALARMINTPE CERTIFICATE * EXTENT GRADE STATION LATE STATION LATE WITH KEYS BURGLAR ALARM INSTALLED AND SERVICED BY EXTENT GRADE # GUARDS / WATCHMEN Image: Contract of the contr			055		. "						EVE			ENTRAL LO
ADDITIONAL INTEREST NAME AND ADDRESS RANK: EVIDENCE: CENTIFICATE Interest Interest <t< td=""><td>BURGLAR ALARMITTPE</td><td></td><td>GER</td><td>TIFICATE</td><td>#</td><td></td><td></td><td></td><td></td><td></td><td>EAF</td><td>TRATION DAT</td><td>- s</td><td></td></t<>	BURGLAR ALARMITTPE		GER	TIFICATE	#						EAF	TRATION DAT	- s	
ADDITIONAL INTEREST ACORD 45 attached for additional names INTEREST NAME AND ADDRESS EVIDENCE: CERTIFICATE LOSS PAYEE INTEREST INTEREST IN ITEM NUMBER MORTGAGEE INTEREST BUILDING:	BURGLAR ALARM INSTALLED AND	SERVICED BY				EXTE	NT		GRA	DE	# GI	UARDS / WAT	CHMEN	CLOCK HOURLY
ADDITIONAL INTEREST ACORD 45 attached for additional news INTEREST NAME AND ADDRESS EVIDENCE: CERTIFICATE LOSS PAYEE MORTGAGEE LOCATION: BUILDING:	PREMISES FIRE PROTECTION (Spri	nklers, Standpipes, CO	2 / Chemical Sys	tems)		% SPRNK	FIRE ALAR	M MAN	IUFACTUR	ER				CENTRAL STAT
INTEREST NAME AND ADDRESS RANK: EVIDENCE: CERTIFICATE LOSS PAYEE MORTGAGEE INTEREST IN ITEM NUMBER			-											LOCAL GONG
LOSS PAYEE LOCATION: BUILDING: MORTGAGEE ITEM CLASS: ITEM:		<u> </u>		additi	ona									
MORTGAGEE ITEM:				-								IN	ITEREST IN	
	INTEREST			EVIDE	NCE:	CERTIFICA	TE							
ITEM DESCRIPTION	INTEREST			EVIDE	NCE:	CERTIFICA	ATE							BUILDING:
	INTEREST LOSS PAYEE			EVIDE	INCE:		ATE							
REFERENCE / LOAN #·	INTEREST LOSS PAYEE			EVIDE	NCE:	CERTIFIC						ITEM CLASS:		
	INTEREST LOSS PAYEE	NAME AND ADDRESS	RANK:	EVIDE	INCE:							ITEM CLASS:		
REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)	INTEREST LOSS PAYEE MORTGAGEE	NAME AND ADDRESS	RANK:									ITEM CLASS:		



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DATE (MM/DD/YYYY)

PF	ROE	PER	TΥ	SE	СТ	ION

	OPERIY	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLAN	<u>NEI SUIVIIVIART</u>					
BLKT #	AMOUNT	T	YPE	BLKT #	AMOUNT	ТҮРЕ

	PREMISES #: 18			_{ss:} 7711 Ca			ami, FL 33	143					
PREMISES INFORMATION	BUILDING #: 1			_{ION:} Clubho	ouse/C								
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF		INFLATION GUARD %	DED	DED TYPE	BLKT #	FURM	S AND CO		
Property Management Office	462,800	100	R	Special (Incl theft)	luding		10,000	Per		5% Hurr Occurre		ed Per	r
Pool Equipment	17,900	100	R	Special (Incl theft)	luding		10,000	Per		5% Hurr Occurre		ed Per	r
Pool Heater	5,600	100	R	Special (Incl theft)	luding		10,000	Per		5% Hurr Occurre		ed Per	r
Pool Patio	14,300	100		Special (Incl theft)			10,000	Per		5% Hurr Occurre	icane D nce	ed Per	r
Pool Equipment Building	6,600	100	R	Special (Incl theft)	uding		10,000	Per		5% Hurr Occurre		ed Per	r
ADDITIONAL INFORMATION B	BUSINESS INCOME / EXTR	A EXPENS	SE - Atta	h ACORD 810			VALUE REPOR		RMATIC	DN - Attach A	CORD 811		
ADDITIONAL COVERAGES, OF	PTIONS, RESTRICT	IONS, E	NDOR	SEMENTS	AND F	RATING	NFORMATI	ON					
SPOILAGE DESCRIPTION OF PROPE	ERTY COVERED					LIMIT		REFRIG		OPTIONS			
COVERAGE (Y / N)						\$		AGREE (Y /		BREA	KDOWN O		
						DEDUCTI	BLE		7	POW	ER OUTAG	E	SELLING PRICE
						\$							
SINKHOLE COVERAGE (Required in Flo	rida)			ACCEPT	COVER	RAGE	REJECT	COVERAGE		LIMIT: \$			
MINE SUBSIDENCE COVERAGE (Requir	ed in IL, IN, KY and WV)			ACCEPT	COVER	AGE	REJECT	COVERAGE		LIMIT: \$			
PROPERTY HAS BEEN DESIGNATE										# OF OPEN S	IDES ON S		(c:
CONSTRUCTION TYPE Joisted Masonry	DISTANCE TO HYDRANT FIRE S 300 FT	TAT 2 _{MI} Mia		E DISTRICT		CODE NU			ories 2	# BASM'TS	YR BUIL ⁻ 1975	т тота 3,77	AL AREA 75
BUILDING IMPROVEMENTS		DG CODE GRADE	TAX C	ODE ROOF			OTHER OCCU	JPANCIES					
X ROOFING, YR: 1998 HEAT OTHER:	ING, YR: WII	RESISTI		SEMI- RESI	STIVE		HEATIN STOVE MANUFACTU		INCL W	/OODBURNIN SERT	IG DA' INS	TE TALLED:	
					SECO	ONDARY HE	AT						
BOILER SOLID FUEL						BOILER	SOL	ID FUEL			1		
IF BOILER, IS INSURANCE PLACED	ELSEWHERE? Y	/ N				IF BOILER,	IS INSURANCE	PLACED EI	LSEWH	HERE?	Y / N		
RIGHT EXPOSURE & DISTANCE	LEFT EXPOSU	RE & DIST	ANCE		FRO	NT EXPOSU	RE & DISTANC	E		REAR EXPO	OSURE & DI	ISTANCE	
BURGLAR ALARM TYPE		CERT	FICATE	#					EXF	PIRATION DAT	"= ^s	CENTRAL STATION WITH KEY	LOCAL GONG
BURGLAR ALARM INSTALLED AND SER	VICED BY				EXTE	INT	G	RADE	# G	UARDS / WAT			OCK HOURLY
PREMISES FIRE PROTECTION (Sprinkler	rs, Standpipes, CO2 / Che	nical Syste	ems)	% SP	RNK	FIRE ALAR	M MANUFACTU	IRER					NTRAL STATION
ADDITIONAL INTEREST	ACORD 45 attacl	ned for :	additi	onal names								1250	
	ME AND ADDRESS RAN		EVIDEI		RTIFIC	ATE				IN	ITEREST IN		IMBER
LOSS PAYEE										LOCATION:		BUILD	
MORTGAGEE										ITEM CLASS:		ITEM:	
										ITEM DESC	RIPTION		

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	PPE		0705	40000	_{ss:} 7711 Ca	mino	Real Mia	ami FL 23	3143					
ADDITIONAL	PREMISES					0		ann, i L 30						
PREMISES INFORMATION	BUILDING				_{TION:} Pool			1	DED		1			
SUBJECT OF INSURANCE	AM	OUNT	COINS %	Allon	CAUSES OF		INFLATION GUARD %	DED	DED TYPE	BLKT #	FURINS AND C			APPLY
Swimming Pool		61,600	100	R	Special (Incl theft)	uaing		10,00	0 ^{Per}		5% Hurricane Occurrence	Ded	Per	
Pool Lighting (9)		2,870	100	R	Special (Incl theft)	uding		10,00	0 ^{Per}		5% Hurricane Occurrence	Ded	Per	
ADDITIONAL INFORMATION	BUSINESS IN	ICOME / EXTR	A EXPENS	SE - Atta	ach ACORD 810		۱ ۱	VALUE REPO	RTING INFOR	MATIO	DN - Attach ACORD 81	1		
ADDITIONAL COVERAGES,	OPTIONS, I	RESTRICTI	ONS, E	NDOF	RSEMENTS	AND	RATING IN	NFORMAT	ION		1			
SPOILAGE DESCRIPTION OF PRO	OPERTY COVE	RED					LIMIT		REFRIG	ΜΑΙΝΤ	OPTIONS			
COVERAGE (Y / N)							\$		AGREE (Y /		BREAKDOWN	I OR C	ONTAMIN	IATION
							DEDUCTIB	BLE			POWER OUT	AGE		
							\$							
SINKHOLE COVERAGE (Required in	Florida)				ACCEPT	COVF	- · · · · · · · · · · · · · · · · · · ·	REJECT	COVERAGE		LIMIT: \$			
MINE SUBSIDENCE COVERAGE (Red		KY and W/V			ACCEPT			-	COVERAGE		LIMIT: \$			
PROPERTY HAS BEEN DESIGN					AUGEPT	JUVE		REJECT	JUTLINAGE		# OF OPEN SIDES ON	1 6701		
PROPERTY HAS BEEN DESIGN	ATED AN HISTC		AKK								# OF OPEN SIDES ON	ISIKU	CIURE:	
CONSTRUCTION TYPE	DIS	STANCE TO		FI	RE DISTRICT		CODE NUM	MBER PRO	T CL # STO	RIES	# BASM'TS YR BU	JILT	TOTAL A	REA
Fire Resistive	HYDRA 30	$\begin{bmatrix} 1 \\ 0 \end{bmatrix}_{FT} \begin{bmatrix} 1 \\ 2 \end{bmatrix}$	MI				130		4 ·	1	197	′5	100	
BUILDING IMPROVEMENTS			G CODE	ТАХ	CODE ROOF	TYDE		OTHER OCC		-				
		G	RADE	144	Othe			OTHER OCC	OFANCIES					
WIRING, YR:	UMBING, YR:				Oulie							DATE		
	EATING, YR:	WIN	D CLASS		SEMI- RESI	STIVE	-	STOVE	OR FIREPLA	CEIN	SERT I	NSTAL	_LED:	
OTHER:	YR:		RESISTI	VE		_		MANUFACT	JRER:					
PRIMARY HEAT						SEC	ONDARY HE							
BOILER SOLID FUE	EL						BOILER	SO	LID FUEL					
IF BOILER, IS INSURANCE PLAC	ED ELSEWHER	RE? Y/	N				IF BOILER, I	IS INSURANC	E PLACED EI	SEWI	HERE? Y/N			
RIGHT EXPOSURE & DISTANCE	L	EFT EXPOSUR	E & DIST	ANCE		FRC	ONT EXPOSUR	RE & DISTAN	CE		REAR EXPOSURE &	DIST/	ANCE	
BURGLAR ALARM TYPE			CERT	IFICATE	#					EX			ITRAL TION	LOCAL GONG
										_			H KEYS	
BURGLAR ALARM INSTALLED AND S	ERVICED BY					EXT	ENT	0	GRADE	# G	UARDS / WATCHMEN		CLOCK	HOURLY
PREMISES FIRE PROTECTION (Sprint	klore Standning	ns CO2 / Chorr	vical Svet	ome)	% 65	RNK						+		
PREMISES FIRE PROTECTION (Sprin	kiers, Stanupipe	5, CO2 / Chen	lical Syste	51115)	% SP	KNK		MANUFACT	URER			-	-	AL STATION
L													LOCAL	GONG
ADDITIONAL INTEREST					onal names						1			
INTEREST	NAME AND ADD	DRESS RANK	K:	EVIDE	INCE: CE	RTIFIC	CATE				INTEREST	<u>. IN IT</u>		ER
LOSS PAYEE											LOCATION:		BUILDING	
MORTGAGEE											ITEM CLASS:		TEM:	
											ITEM DESCRIPTION			
	REFERENCE / L	OAN #:												
REMARKS (ACORD 101, A		Remarks S	chedul	e, ma	v be attach	ed if	more sna	ice is requ	uired)					
			onouu	0, 1110	y so allaon	<u>ou n</u>	more opa		anouj				-	



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DATE (MM/DD/YYYY)

PROPERTY	SECTION
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	PROPERTY	SECTION	03/	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BLAN	<u>KET SUMMARY</u>				
BLKT #	AMOUNT	ТҮРЕ	BLKT #	AMOUNT	ТҮРЕ

	PREMISES #: 19						ami, FL 33′	43					
PREMISES INFORMATION	BUILDING #: 1	BLDG DE	SCRIPT	_{ION:} Caban									
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF	LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORM	IS AND CO	NDITIONS T	O APPLY
Cabana/Gym	135,800		R	Special (Inc theft)			10,000			5% Hurr Occurre		ed Per	
Pool Equipment	17,900	100	R	Special (Inc theft)	cluding		10,000	Per		5% Hurr Occurre		ed Per	
Pool Patio	35,300	100	R	Special (Inc theft)	cluding		10,000	Per		5% Hurr Occurre		ed Per	
Pool Heater	5,600	100	R	Special (Inc theft)	cluding		10,000	Per		5% Hurr Occurre		ed Per	
ADDITIONAL INFORMATION	BUSINESS INCOME / EXTR		E - Atta	ch ACORD 810	0		VALUE REPOR	TING INFOR	MATIC	N - Attach A	CORD 811		
ADDITIONAL COVERAGES, O	PTIONS. RESTRICT	IONS. E	NDOR	SEMENTS		RATING II	NFORMATIO	ON					
SPOILAGE DESCRIPTION OF PROP	•					LIMIT		REFRIG I	MAINT	OPTIONS			
COVERAGE (Y / N)						\$		AGREEN (Y / N		BREA	AKDOWN C	OR CONTAN	INATION
						DEDUCTIE	BLE		7	POW	ER OUTAG		SELLING PRICE
						\$							TRIOL
SINKHOLE COVERAGE (Required in Flo	orida)			ACCEPT	T COVER	AGE	REJECT C	OVERAGE		LIMIT: \$			
MINE SUBSIDENCE COVERAGE (Require	ired in IL, IN, KY and WV)			ACCEPT	T COVER	AGE	REJECT C	OVERAGE		LIMIT: \$			
PROPERTY HAS BEEN DESIGNATI	ED AN HISTORICAL LAND	MARK								# OF OPEN S	DES ON S	TRUCTURE	:
	DISTANCE TO							01 # 070		# DAON/170		T TOTA	4854
CONSTRUCTION TYPE Joisted Masonry	DISTANCE TO HYDRANT FIRE S 300 FT	TAT 2 _{MI} Mia				CODE NUI		CL # STO		# BASM'TS	YR BUIL 1975		. AREA
Joisted Masonry BUILDING IMPROVEMENTS		2 _{MI} Mia DG CODE GRADE		de	F TYPE er			1		# BASM'TS			AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN	HYDRANT FIRE S 300 FT BL MBING, YR: 99	2 _{MI} Mia DG CODE GRADE	mi-Da	ide CODE ROOF Othe	er		OTHER OCCU			OODBURNIN	1975	5 992	AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII	2 _{MI} Mia DG CODE GRADE ND CLASS	mi-Da	Ide CODE ROOF Othe SEMI- RES	er		OTHER OCCU	PANCIES SOURCE II SR FIREPLA		OODBURNIN	1975	992	AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN	HYDRANT FIRE S 300 FT BL MBING, YR: 99	2 _{MI} Mia DG CODE GRADE	mi-Da	Ide CODE ROOF Othe SEMI- RES	er Sistive		OTHER OCCU OTHER OCCU HEATING STOVE C MANUFACTUR	PANCIES SOURCE II SR FIREPLA		OODBURNIN	1975	5 992	AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER:	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII	2 _{MI} Mia DG CODE GRADE ND CLASS	mi-Da	Ide CODE ROOF Othe SEMI- RES	er Sistive Secc	130	OTHER OCCU OTHER OCCU HEATING STOVE C MANUFACTUR	PANCIES SOURCE II SR FIREPLA		OODBURNIN	1975	5 992	. AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT PRIMARY HEAT	MBING, YR: YR: MBING, YR: MBING, YR: M	2 _{MI} Mia DG CODE GRADE ND CLASS	mi-Da	Ide CODE ROOF Othe SEMI- RES	er SISTIVE SECC	130 DNDARY HE BOILER	OTHER OCCU OTHER OCCU HEATING STOVE C MANUFACTUR	SOURCE I SOURCE I R FIREPLA RER: D FUEL		/OODBURNIN SERT	1975	5 992	. AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL	MBING, YR: YR: MBING, YR: MBING, YR: M	2 MI Miai DG CODE SRADE ND CLASS RESISTI	mi-Da	Ide CODE ROOF Othe SEMI- RES	er Sistive Secc	130 DNDARY HE BOILER IF BOILER, I	4 OTHER OCCU HEATING STOVE (C MANUFACTUR AT SOLI	D FUEL		/OODBURNIN SERT	1975 NG DA INS	TE STALLED:	. AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN X ROOFING, YR: 1998 OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED	MBING, YR: 99 TING, YR: WI YR: VI D ELSEWHERE? Y	2 MI Miai DG CODE SRADE ND CLASS RESISTI	mi-Da	Ide CODE ROOF Othe SEMI- RES	er Sistive Secc	130 DNDARY HE BOILER IF BOILER, I	HEATING STOVE C MANUFACTUI AT SOLI IS INSURANCE	SOURCE II R FIREPLA RER: D FUEL			1975 NG DA INS	TE STALLED:	. AREA
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN X ROOFING, YR: 1998 OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED	MBING, YR: 99 TING, YR: WI YR: VI D ELSEWHERE? Y	2 _{MI} Mia DG CODE GRADE ND CLASS RESISTI / N RE & DIST/	mi-Da	Ide CODE ROOF Othe SEMI- RES C Other	er Sistive Secc	130 DNDARY HE BOILER IF BOILER, I	HEATING STOVE C MANUFACTUI AT SOLI IS INSURANCE	SOURCE II R FIREPLA RER: D FUEL			1975	ISTANCE	
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE	MBING, YR: 99 TING, YR: WI YR: VI D ELSEWHERE? Y	2 _{MI} Mia DG CODE GRADE ND CLASS RESISTI / N RE & DIST/	MI-DA	Ide CODE ROOF Othe SEMI- RES C Other	er Sistive Secc	130 DNDARY HE BOILER IF BOILER, I	HEATING STOVE C MANUFACTUI AT SOLI IS INSURANCE	SOURCE II R FIREPLA RER: D FUEL		IERE?	1975	TE STALLED:	
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE	MBING, YR: YR: DELSEWHERE? VERET EXPOSU	2 _{MI} Mia DG CODE GRADE ND CLASS RESISTI / N RE & DIST/	MI-DA	Ide CODE ROOF Othe SEMI- RES C Other	er Sistive Secc	DNDARY HE BOILER IF BOILER, I NT EXPOSU	A OTHER OCCU STOVE C MANUFACTUR AT SOLI SINSURANCE RE & DISTANCE	SOURCE II R FIREPLA RER: D FUEL	NCL W CE INS	IERE?	1975	ISTALLED: ISTALLED: ISTANCE CENTRAL STATION WITH KEYS	
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE	MBING, YR: YR: DELSEWHERE? LEFT EXPOSU	2 _{MI} Mia DG CODE SRADE ND CLASS RESISTI' / N RE & DIST/ CERTI	TAX C	#	er SISTIVE SECC FROM	DNDARY HE BOILER IF BOILER, IT EXPOSU	A OTHER OCCU STOVE C MANUFACTUR AT SOLI SINSURANCE RE & DISTANCE	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS		1975	ISTANCE	
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUM ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkle)	MBING, YR: YR: DELSEWHERE? LEFT EXPOSU	2 _{MI} Mia DG CODE SRADE ND CLASS RESISTI' / N RE & DIST/ CERTI	TAX C	#	er SISTIVE SECC FROM	DNDARY HE BOILER IF BOILER, IT EXPOSU	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS		1975	ISTALLED:	
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUM ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkler ADDITIONAL INTEREST	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY ACORD 45 attacc	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS		1975	ISTALLED:	LOCAL GONG CK HOURLY
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER IF BOILER IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkle) ADDITIONAL INTEREST INTEREST NA	HYDRANT 300 FI FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS	/OODBURNIN SERT IERE? REAR EXPC IRATION DAT	1975	ISTALLED:	LOCAL GONG CK HOURLY TRAL STATION AL GONG
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled ADDITIONAL INTEREST INTEREST LOSS PAYEE	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY ACORD 45 attacc	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS	IERE?	1975 NG DA INS Y / N DSURE & D TE 1 TCHMEN	ISTALLED: ISTALLED: ISTANCE CENTRAL STATION WITH KEYS CLOC CENT LOCA	LOCAL GONG CK HOURLY FRAL STATION AL GONG
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER IF BOILER IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkle) ADDITIONAL INTEREST INTEREST NA	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY ACORD 45 attacc	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS	IERE?	1975 NG DA Y / N DSURE & D TE 1 TCHMEN 1 NTEREST II 1	ISTALLED: ISTALLED: ISTALLED: ISTANCE CENTRAL STATION WITH KEYS CLOC CENT LOCA	LOCAL GONG CK HOURLY FRAL STATION AL GONG
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled ADDITIONAL INTEREST INTEREST LOSS PAYEE	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY ACORD 45 attacc	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS		1975 NG DA Y / N DSURE & D TE 1 TCHMEN 1 NTEREST II 1	ISTALLED:	LOCAL GONG CK HOURLY FRAL STATION AL GONG
Joisted Masonry BUILDING IMPROVEMENTS WIRING, YR: PLUN X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACEE RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkle) ADDITIONAL INTEREST INTEREST NA LOSS PAYEE MORTGAGEE	HYDRANT 300 FT FIRE S MBING, YR: 99 TING, YR: WII YR: WII DELSEWHERE? Y LEFT EXPOSU RVICED BY ACORD 45 attacc	2 MI Mia DG CODE SRADE ND CLASS RESISTI / N RE & DIST/ MICAL System mical System	mi-Da TAX C VE	Ide CODE ROOF Othe SEMI- RES Other # % SI onal name	er SISTIVE SECC FROM EXTE	DNDARY HE BOILER IF BOILER, I IT EXPOSUI	A OTHER OCCU STOVE C STOV	SOURCE II SOURCE II REFIREPLA REFI D FUEL PLACED EL	NCL W CE INS	IERE?	1975 NG DA Y / N DSURE & D TE 1 TCHMEN 1 NTEREST II 1	ISTALLED:	LOCAL GONG CK HOURLY FRAL STATION AL GONG

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AGENCY CUSTOMER ID:

KINGCRE-04

KLAWRENCE1

ADDITIONAL		PREMISES #: 19	STR			ss. 7	'818 Can	nino	Real, Mi	iam	i, FL 33	143							
PREMISES INFORMAT	ION	BUILDING #: 2			SCRIPT														
SUBJECT OF INSURANCE	_	AMOUNT			VALU- ATION	СА	USES OF L	oss	INFLATION GUARD %	N	DED	DED TYPI	BLK	FO	MS AND CO	ONDI	TIONS TO	APPLY	
Swimming Pool		61	600 10		R	thef		ding		v	10,000		#	Occuri					
Pool Equipment Build	•	7	800 10	00	R		cial (Inclu t)				10,000	Per		Occuri	5% Hurricane Ded Per Dccurrence 5% Hurricane Ded Per				
Pool Patio Lighting (6	5)	3	150 10	00	R	Spe thef	cial (Inclu ť)	ding			10,000	Per		5% Hu Occuri		Ded	l Per		
ADDITIONAL INFORMATION													FORMAT	ION - Attach	ACORD 811				
		•	RICTION	S, El	NDOR	SEI	MENISA	NDF		INFO	JRMAII				•				
COVERAGE		ERTI COVERED							\$				RIG MAIN REEMEN		S EAKDOWN	OR C		ΑΤΙΟΝ	
(Y / N)										BIF		- '	(Y / N)		WER OUTA		SE	LLING	
									\$									ICE	
SINKHOLE COVERAGE (Requir	red in Flo	rida)					ACCEPT	OVER			REJECT	OVERA	GE	LIMIT: \$					
MINE SUBSIDENCE COVERAGI			WV)				ACCEPT C				REJECT			LIMIT: \$					
PROPERTY HAS BEEN DE	SIGNATE	D AN HISTORICAL	LANDMAR	(I					# OF OPEN	SIDES ON	STRU	JCTURE:		
CONSTRUCTION TYPE		DISTANCE	TO		FIR		STRICT		CODE NU	ЛВЕ	R PROT	CL #	STORIE	S # BASM'T	YR BUII	LT	TOTAL A	REA	
Fire Resistive		HYDRANT F	IRE STAT						13	0	4		1		1975	5	100		
			BLDG CO GRAD	DDE E	TAX (CODE	ROOF T	YPE		от	HER OCCL	PANCIE	S		1	1			
		ibing, yr: Ing, yr:	WIND CL	ASS			EMI- RESIS				HEATIN	SOUR	CE INCL	WOODBUR	ING D	ATE			
ROOFING, YR: OTHER:		YR:		SISTIV	~		EIVII- RESIS	IIVE		МА	J STOVE (NUFACTU		PLACE I	NSERT	IN	STAI	_LED:		
				510110	<u> </u>			SECC	NDARY HE	1									
BOILER SOLI	ID FUEL								BOILER	[SOL	D FUEL]					
IF BOILER, IS INSURANCE	PLACED	ELSEWHERE?	Y/N						IF BOILER,	IS IN	ISURANCE	PLACE		VHERE?	Y/N				
RIGHT EXPOSURE & DISTANCE		LEFT EX	POSURE &	DISTA	NCE			FROM	IT EXPOSU	JRE 8		E		REAR EX	POSURE & I	DIST	ANCE		
BURGLAR ALARM TYPE			c	ERTIF	ICATE	#							E	(PIRATION E		STA	ITRAL TION H KEYS	LOCAL GONG	
BURGLAR ALARM INSTALLED	AND SER	VICED BY						EXTE	NT		G	RADE	#	GUARDS / W	ATCHMEN		CLOCK	HOURLY	
PREMISES FIRE PROTECTION (Sprinkler	s, Standpipes, CO2	/ Chemical	Syste	ms)		% SPR	NK	FIRE ALAR	M MA	ANUFACTU	RER					CENTR/	AL STATION GONG	
ADDITIONAL INTERES	т	ACORD 45 a	ttached	for a															
INTEREST	NAM	IE AND ADDRESS	RANK:		EVIDE	NCE:	CER	TIFICA	ATE						INTEREST			ER	
LOSS PAYEE														LOCATIO	N:		BUILDING		
MORTGAGEE														ITEM CLASS:			TEM:		
														ITEM DES	CRIPTION				
		ERENCE / LOAN #:																	
REMARKS (ACORD 10	01, Add	litional Remai	ks Sche	dule	<u>ə, ma</u>	y be	attache	d it r	nore sp	ace	is requ	ired)							
1																			



KLAWRENCE1

DATE (MM/DD/YYYY)

PROPERTY SECTION	PF	ROP	ERT	TY S	SE	CTI	ON
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E P	RUPERIT	SECTION	03	/09/2023
AGENCY NAME Hub International Florida		CARRIER American Coastal Insurance Company		NAIC CODE 12968
POLICY NUMBER TBD-BLDGS K-P+CH/POOLS+EQ		NAMED INSURED(S) Village Of Kings Creek Condominium		

BI ANKET SUMMARY

BLAN	<u>NEI SUIVIIVIART</u>				
BLKT #	AMOUNT	ТҮРЕ	BLKT #	AMOUNT	ТҮРЕ

	PREMISES #: 20			_{iS:} 7750 Cami		Real, Mia	ami, FL 331	43				
PREMISES INFORMATION	BUILDING #: 1			_{ION:} Cabana/C								
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOS	ss II	NFLATION GUARD %	DED	DED E TYPE	BLKT #	FORMS AND C	ONDITIONS TO AP	PLY
Cabana/Gym	135,800	100	R	Special (Includ theft)	ding		10,000	Per		5% Hurricane Occurrence	Ded Per	
Pool Equipment	17,900	100	R	Special (Includ theft)	ding		10,000	Per		5% Hurricane Occurrence	Ded Per	
Pool Heater	5,600	100	R	Special (Includ theft)	ding		10,000	Per		5% Hurricane Occurrence	Ded Per	
Pool Equipment Building	7,800	100		Special (Includ theft)			10,000	Per		5% Hurricane Occurrence	Ded Per	
Cabana/Gym - Contents	16,500	100	R	Special (Includ theft)	ling		10,000	Per		5% Hurricane Occurrence	Ded Per	
ADDITIONAL INFORMATION	BUSINESS INCOME / EXTR	A EXPENS	E - Attac	h ACORD 810		,	VALUE REPOR			N - Attach ACORD 81		
ADDITIONAL COVERAGES, O	PTIONS. RESTRICT	IONS. E	NDOR	SEMENTS AN		ATING II	NFORMATIO	DN				
SPOILAGE DESCRIPTION OF PROP	ERTY COVERED				1	LIMIT		REFRIG N	IAINT	OPTIONS		
COVERAGE (Y / N)						\$		AGREEM (Y / N		BREAKDOWN	OR CONTAMINAT	ION
					I	DEDUCTIE	BLE		1	POWER OUTA	GE SELLI PRICE	
					:	\$						
SINKHOLE COVERAGE (Required in Flo	orida)			ACCEPT CC	OVERA	GE	REJECT C	OVERAGE		LIMIT: \$		
MINE SUBSIDENCE COVERAGE (Require	red in IL, IN, KY and WV)			ACCEPT CC	OVERA	GE	REJECT C	OVERAGE		LIMIT: \$		
PROPERTY HAS BEEN DESIGNATE	ED AN HISTORICAL LAND	MARK							;	# OF OPEN SIDES ON	STRUCTURE:	
CONSTRUCTION TYPE	DISTANCE TO			E DISTRICT		CODE NUI	MBER PROT	CI # 5TO		# BASM'TS YR BUI	LT TOTAL ARE	
Joisted Masonry	HYDRANT FIRE S	™ 2 _{MI} Miar				130		1		197 197		•
	BU											
	00	DG CODE GRADE	TAX C	ODE ROOF TY	/PE		OTHER OCCU	PANCIES				
	MBING, YR: 99		TAX C	Other			HEATING	SOURCE IN	ICL W		ATE	
X ROOFING, YR: 1998 HEAT	MBING, YR: 99	BRADE		Other SEMI- RESIST			HEATING	SOURCE IN OR FIREPLAC	ICL W	OODBURNING D SERT IN	ATE ISTALLED:	
	MBING, YR: 99	RADE		Other SEMI- RESIST Other	IVE	IDARY HE	HEATING STOVE C	SOURCE IN OR FIREPLAC	ICL W	oodburning d Sert In		
X ROOFING, YR: 1998 HEAT OTHER:	MBING, YR: 99	BRADE		Other SEMI- RESIST Other	IVE SECON	IDARY HE	HEATING STOVE C MANUFACTUR	SOURCE IN OR FIREPLAC		OODBURNING D SERT IN		
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT		ID CLASS		Other SEMI- RESIST Other	SECON	OILER	HEATING STOVE C MANUFACTUR	SOURCE IN DR FIREPLAC RER: D FUEL				
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL		RADE	/E X	Other SEMI- RESIST Other	SECON BI	OILER BOILER, I	HEATING STOVE C MANUFACTUR AT	B SOURCE IN DR FIREPLAC RER: D FUEL			ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED	MBING, YR: 99 TING, YR: WIN YR: DELSEWHERE? Y	RADE	/E X	Other SEMI- RESIST Other	SECON BI	OILER BOILER, I	HEATING STOVE C MANUFACTUF AT SOLI	B SOURCE IN DR FIREPLAC RER: D FUEL		IERE?	ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED	MBING, YR: 99 TING, YR: WIN YR: DELSEWHERE? Y	RADE	/E X	Other SEMI- RESIST Other	SECON BI	OILER BOILER, I	HEATING STOVE C MANUFACTUF AT SOLI	B SOURCE IN DR FIREPLAC RER: D FUEL		IERE?	DISTALLED:	LOCAL
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE	MBING, YR: 99 TING, YR: WIN YR: DELSEWHERE? Y	RADE	/E X	Other SEMI- RESIST Other	SECON BI	OILER BOILER, I	HEATING STOVE C MANUFACTUF AT SOLI	B SOURCE IN DR FIREPLAC RER: D FUEL		IERE? Y/N REAR EXPOSURE &	DISTANCE	LOCAL GONG
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE	MBING, YR: 99 TING, YR: WIN YR: DELSEWHERE? Y	RADE	/E X	Contraction of the semi-resist of the semi-resist of the semi-resist of the semi-resist of the semi-resistence of	SECON BI	oiler Boiler, I	HEATING STOVE C MANUFACTUF AT SINSURANCE RE & DISTANCE	B SOURCE IN DR FIREPLAC RER: D FUEL		IERE? Y/N REAR EXPOSURE &	DISTALLED:	GONG
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE	MBING, YR: 99 TING, YR: WIN YR: VICED BY	RESISTIN N RESISTIN RE & DISTA	/E X	Contraction of the semi-resist of the semi-resist of the semi-resist of the semi-resist of the semi-resistence of	SECON B ^I IF FRONT	OILER BOILER, I EXPOSU	HEATING STOVE C MANUFACTUF AT SINSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IERE? Y/N REAR EXPOSURE & IRATION DATE	DISTANCE CENTRAL STATION WITH KEYS CLOCK HO CENTRAL CENTRAL	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkles	MBING, YR: 99 TING, YR: WIN YR: VINCED BY RVICED BY	ID CLASS RESISTIN RE & DISTA CERTI	ANCE FICATE :	Other SEMI- RESIST Other Image: semi-resist of the se	SECON B ^I IF FRONT	OILER BOILER, I EXPOSU	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IERE? Y/N REAR EXPOSURE & IRATION DATE	DISTANCE CENTRAL STATION WITH KEYS CLOCK HC	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkler ADDITIONAL INTEREST	MBING, YR: 99 TING, YR: 99 YR: WIN DELSEWHERE? Y LEFT EXPOSUL RVICED BY rs, Standpipes, CO2 / Cher	RESISTIV	/E X	Other SEMI-RESIST Other	SECON BI FRONT EXTEN	OILER BOILER, I EXPOSUI	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IERE? Y / N REAR EXPOSURE & IRATION DATE	ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled) ADDITIONAL INTEREST INTEREST	MBING, YR: 99 TING, YR: WIN YR: VINCED BY RVICED BY	RESISTIV	ANCE FICATE :	Other SEMI-RESIST Other	SECON B ^I IF FRONT	OILER BOILER, I EXPOSUI	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IERE? Y / N REAR EXPOSURE & IRATION DATE JARDS / WATCHMEN INTEREST	ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled) ADDITIONAL INTEREST INTEREST LOSS PAYEE	MBING, YR: 99 TING, YR: 99 YR: WIN DELSEWHERE? Y LEFT EXPOSUL RVICED BY rs, Standpipes, CO2 / Cher	RESISTIV	/E X	Other SEMI-RESIST Other	SECON BI FRONT EXTEN	OILER BOILER, I EXPOSUI	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IRATION DATE	ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled) ADDITIONAL INTEREST INTEREST	MBING, YR: 99 TING, YR: 99 YR: WIN DELSEWHERE? Y LEFT EXPOSUL RVICED BY rs, Standpipes, CO2 / Cher	RESISTIV	/E X	Other SEMI-RESIST Other	SECON BI FRONT EXTEN	OILER BOILER, I EXPOSUI	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IRATION DATE	ISTALLED:	
X ROOFING, YR: 1998 HEAT OTHER: PRIMARY HEAT BOILER SOLID FUEL IF BOILER, IS INSURANCE PLACED RIGHT EXPOSURE & DISTANCE BURGLAR ALARM TYPE BURGLAR ALARM INSTALLED AND SER PREMISES FIRE PROTECTION (Sprinkled) ADDITIONAL INTEREST INTEREST LOSS PAYEE	MBING, YR: 99 TING, YR: 99 YR: WIN DELSEWHERE? Y LEFT EXPOSUL RVICED BY rs, Standpipes, CO2 / Cher	RESISTIV	/E X	Other SEMI-RESIST Other	SECON BI FRONT EXTEN	OILER BOILER, I EXPOSUI	HEATING STOVE C MANUFACTUF AT SOLI IS INSURANCE RE & DISTANCE	SOURCE IN R FIREPLAC RER: D FUEL [PLACED ELS RADE		IRATION DATE	ISTALLED:	

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KLAWRENCE1

				7750.00		Deel Mie		440					,
ADDITIONAL	PREMISES #: 20	STREET ADDRESS: 7750 Camino Real, Miami, FL 33143											
PREMISES INFORMATION	BUILDING #: 2	BLDG DESCRIPTION: POOL											
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF		INFLATION GUARD %	DED	DED TYPE	BLKT	FURIN		DITIONS TO APPL	Y
Swimming Pool	61,600	100	R	Special (Incl theft)	uding		10,00			5% Hurr Occurre		ed Per	
Pool Patio	31,400	100	R	Special (Incl theft)	uding		10,00	0 Per		5% Hurr Occurre		ed Per	
Pool Patio Lights (6)	2,300	100	R	Special (Incl theft)	uding		10,00	0 Per		5% Hurr Occurre		ed Per	
ADDITIONAL INFORMATION	BUSINESS INCOME / EXTR	A EXPENS	SE - Atta	ch ACORD 810		v	ALUE REPO	RTING INFO	RMATIO	ON - Attach A	CORD 811		
ADDITIONAL COVERAGES, C	OPTIONS, RESTRICT	IONS, E	NDOF	RSEMENTS	AND I	RATING IN	IFORMAT	ION		- i			
SPOILAGE DESCRIPTION OF PRO COVERAGE (Y / N)	PERTY COVERED					LIMIT \$ DEDUCTIBI \$	LE	REFRIG AGREE (Y /	MENT	BREA	AKDOWN OF	R CONTAMINATION SELLING PRICE	
SINKHOLE COVERAGE (Required in F	lorida)			ACCEPT	COVER	RAGE	REJECT	COVERAGE		LIMIT: \$			
MINE SUBSIDENCE COVERAGE (Requ	uired in IL, IN, KY and WV)			ACCEPT	COVER	RAGE	REJECT	COVERAGE		LIMIT: \$			
PROPERTY HAS BEEN DESIGNA	TED AN HISTORICAL LAND	MARK								# OF OPEN S	IDES ON ST	RUCTURE:	-
CONSTRUCTION TYPE	DISTANCE TO HYDRANT FIRE S 300 FT		FIF	REDISTRICT		CODE NUM			ORIES 1	# BASM'TS	YR BUILT 1975	TOTAL AREA	
		MI OG CODE	TAY	CODE ROOF	TVDE		OTHER OCC	-	•		1370	100	
BUILDING IMPROVEMENTS	0	RADE		Othe			UTHER OCC	UPANCIES					
WIRING, YR: PLU	JMBING, YR:			Oure			HEATIN			VOODBURNIN	IG DAT	F	
	ATING, YR:	DCLASS	_	SEMI- RESI	STIVE	-	STOVE	OR FIREPL	ACE IN	SERT		TALLED:	
OTHER:	YR:	RESISTI	VE		-		MANUFACT	JRER:					
					SEC	ONDARY HEA	лт						
BOILER SOLID FUEL	- 🔲 🚬					BOILER	SO	LID FUEL					
IF BOILER, IS INSURANCE PLACE	ED ELSEWHERE?	N				IF BOILER, IS	S INSURANC	E PLACED E	LSEW	HERE?	Y / N		
RIGHT EXPOSURE & DISTANCE	LEFT EXPOSU	RE & DIST	ANCE		FRO	NT EXPOSUR	E & DISTAN	CE		REAR EXPO	OSURE & DI	STANCE	
BURGLAR ALARM TYPE		CERT	IFICATE	#					EXI	PIRATION DA	" – s		LOCAL GONG
BURGLAR ALARM INSTALLED AND SE	RVICED BY	-			EXT	ENT	(GRADE	# G	UARDS / WAT			RLY
PREMISES FIRE PROTECTION (Sprinkl	ers, Standpipes, CO2 / Cher	nical Syste	ems)	% SP	RNK	FIRE ALARM	MANUFACT	URER				CENTRAL ST	
ADDITIONAL INTEREST	ACORD 45 attach	ed for	additi	onal names	3								
INTEREST N.	AME AND ADDRESS RAN		EVIDE		RTIFIC	ATE				IN	TEREST IN	ITEM NUMBER	
LOSS PAYEE										LOCATION:		BUILDING:	
MORTGAGEE										ITEM CLASS:		ITEM:	
										ITEM DESC	RIPTION		
R	EFERENCE / LOAN #:												
REMARKS (ACORD 101, Ac		chedul	e, ma	y be attach	ed if	more spa	<u>ce is req</u>	uired)					

Applicable in AL, AR, DC, LA, MD, NM, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. *Applies in MD Only.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in FL and OK

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony (of the third degree)*. *Applies in FL Only.

Applicable in KS

Any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.

Applicable in KY, NY, OH and PA

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties* (not to exceed five thousand dollars and the stated value of the claim for each such violation)*. *Applies in NY Only.

Applicable in ME, TN, VA and WA

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties (may)* include imprisonment, fines and denial of insurance benefits. *Applies in ME Only.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)	STATE PRODUCER LICENSE NO (Required in Florida)
THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE RE KNOWLEDGE.		
THE UNBERGIONER IN THE ORIGINAL PROPERTY AND	THE ADDUCANT AND DEDBEOENTO THAT DEAD	NARLE INCURRY USE DEEN MADE TO ODTAIN THE

Elizabeth Fiegehen

PRODUCER'S SIGNATURE Aur Maryam Sedghy

	è
APPLICANT'S SIGNATURE	-

	(Required in Florida) W621972
a /	NATIONAL PRODUCER NUMBER
シットン	10200450

AGENCY CUSTOMER ID: KINGCRE-04 KLAWRENCE1 PAGE 1 OF 1

DATE (MM/DD/YYYY) 03/09/2023

							_		00/00/2020
	PREMISES #:17			_{SS:} 7900 Camino		ni, FL 331	43		
PREMISES INFORMATION	BUILDING #: 1			_{ION:} Clubhouse (I					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	T ORANG AND CONDITIONO TO AIT ET
Clubhouse Contents	55,000		R	Special (Including theft)		10,000			5% Hurricane Ded Per Occurrence
	PREMISES #:18			_{SS:} 7711 Camino		ni, FL 331	43		
PREMISES INFORMATION	BUILDING #: 1			_{ION:} Clubhouse/C					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	TORMO AND CONDITIONO TO ALLET
Guard House	8,000	100	R	Special (Including theft)		10,000	Per		5% Hurricane Ded Per Occurrence
	PREMISES #:18	STREET	ADDRE	_{ss:} 7711 Camino	Real, Miar	ni, FL 331	43		
PREMISES INFORMATION	BUILDING #: 1	BLDG DE	SCRIPT	ION: Clubhouse/C	Office				
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU-	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
Building ID Signs (13)	6,240		R	Special (Including theft)		10,000			5% Hurricane Ded Per Occurrence
	PREMISES #:	STREET	ADDRE	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU-	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
			Allon						
	PREMISES #:	STREET	ADDRE	SS:					·
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRE	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE		ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRE	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRE	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRES	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	TION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRES	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
	PREMISES #:	STREET	ADDRES	SS:					
PREMISES INFORMATION	BUILDING #:	BLDG DE	SCRIPT	ION:					
SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY

KINGCRE-04

* Code BOLAW; Description Building Ord. or Law Full A, B&C Coverage Combined 2.5% per bldg.;

* Code EBK; Description Equipment Breakdown; Limit 1 \$10,000,000; Deductible \$10,000;

LOC #:

ADDITIONAL	REMARKS	SCHEDULE
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Page <u>1</u> of <u>1</u>

AGENCY		NAMED INSURED Village Of Kings Creek Condominium 7711 Camino Real			
Hub International Florida					
POLICY NUMBER		Miami, FL 33143			
TBD-BLDGS K-P+CH/POOLS+EQ					
	NAIC CODE				
American Coastal Insurance Company 12	2968	EFFECTIVE DATE: 03/15/2023			
ADDITIONAL REMARKS					
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORE	•				
FORM NUMBER: ACORD 140 FORM TITLE: PROPERTY SECTION	l				
PROPERTY ENHANCEMENT ENDORSEMENT This endorsement modifies insurance provided under the Building and Personal Property Coverage Form Condominium Association Coverage Form Standard Property Policy - Declaration Cause of Loss - Special Form 1.a) Coverage Debris Removal Limit of Liability \$50,000 1.b) Fire Department Service Charge \$100,000 1.c) Pollutant Clean-Up and Removal \$150,000 1.d) Electronic Data \$100,000 2.a) Newly Acquired Property 90 days 2.b) Personal Effects (1) Sublimit Per Person \$5,000 (2) Sublimit Per Described Premises \$25,000 2.c) Valuable Papers & Records \$500,000 2.d) Property of Others \$25,000 2.e) Outdoor Property \$100,000 Except trees, shrubs, law 2.f) Accounts Receivable \$500,000 2.g) Fire Extinguisher Recharge \$10,000 2.h) Lock Replacement \$7,500 2.i) Reward Reimbursement \$25,000 2.j) Inventory and Appraisals of Loss \$2,500 2.k) Wind Driven Precipitation \$250,000 3.0 Outdoor Signs \$20,000 4.e) "Fungus", Wet Rot, Dry Rot and Bacteria \$50,000 4.f) Property in Transit \$100,000 4.g) Off Premises Power Failure \$50,000 (Subject to a 24 H AC 00 01 08 17	ns or plan	nts \$10,000 Except any one tree, shrub or plant \$5,000			



Commercial Property Quote POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act of 2002, as amended ("TRIA"), that you now have a right to purchase insurance coverage for losses arising out of acts of terrorism, **as defined in Section 102(1) of the Act**, **as amended:** The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Any coverage you purchase for "acts of terrorism" shall expire at 12:00 midnight December 31, 2027, the date on which the TRIA Program is scheduled to terminate, or the expiry date of the policy whichever occurs first, and shall not cover any losses or events which arise after the earlier of these dates.

YOU SHOULD KNOW THAT COVERAGE PROVIDED BY THIS POLICY FOR LOSSES CAUSED BY CERTIFIED ACTS OF TERRORISM IS PARTIALLY REIMBURSED BY THE UNITED STATES UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. HOWEVER, YOUR POLICY MAY CONTAIN OTHER EXCLUSIONS WHICH MIGHT AFFECT YOUR COVERAGE, SUCH AS AN EXCLUSION FOR NUCLEAR EVENTS. UNDER THIS FORMULA, THE UNITED STATES PAYS 80% OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURER(S) PROVIDING THE COVERAGE. YOU SHOULD ALSO KNOW THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A USD100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS USD100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED USD100 BILLION, YOUR COVERAGE MAY BE REDUCED.

THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

	I hereby elect to purchase coverage for acts of terrorism for a prospective premium provided in the Commercial Property Quote.						
×	I hereby elect to have coverage for acts of terrorism excluded from my policy. I understand that I will have no coverage for losses arising from acts of terrorism.						
Maryam	Sedghy	American Coastal Insurance Company					
Policyholder/	Applicant's Signature	Company					

Maryan Sedy Print Name

Policy Number

All coverages are as per the standard forms and endorsements in use by American Coastal Insurance Company at the time of binding unless otherwise noted.

Please note that this quote or binder is based on the coverage, terms and conditions listed herein, which may be different from those requested in your original submission. It is incumbent upon you to review the terms of this quote carefully with your Insured and reconcile any differences in the terms requested in the original submission. American Coastal Insurance Company and AmRisc, LLC disclaim any responsibility for your failure to reconcile with the Insured any differences between the terms quoted herein and those terms originally requested.

LMA9184 09 January 2020



Commercial Property Quote

Catastrophe Management Contact Information

The Village of Kings Creek Condominium Association

Like all Florida properties, your Association is exposed to potential catastrophic losses due to hurricane. In order to provide you with the best and most prompt customer service in the event of a catastrophe, we want to make sure our contact records are complete and up-to-date

Please complete and return this form with the remaining documents required at binding.

Insured Contact 1

Contact Name Maryam Sedghy				
Title President			Email Address	maryam66@comcast.net
Office Number	Cell Number	305-	510-7979	Fax Number

Insured Contact 2

Contact Name						
Title		Email Address				
Office Number	Cell Number		Fax Number			

Management Company (if applicable)

Company Name Association Self Ma	anaged	
Contact Name Mireya Villaverde	Email Address	mireya@vkcmiami.com
Office Number 305-279-3411	Cell Number 305-725-0958	Fax Number 305-271-5952

Retail Agent

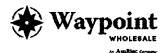
Company Name	HUB International				
Contact Name	Karlene Lawrence		Email Address Karlene.Lawre	ence@HubInte	ernational.com
Office Number	954-924-3048	Cell Number		Fax Number	954-206-2071

Wholesaler (if applicable)

Company Name AmWINS		
Contact Name Lisa Motherway		Email Address lisa.motherway@amwins.com
Office Number 561-455-8017	Cell Number	Fax Number

All coverages are as per the standard forms and endorsements in use by American Coastal Insurance Company at the time of binding unless otherwise noted.

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Commercial Property Quote

Rental Occupancy Disclosure

As a condition of binding, we need to know the total number of short term rental units (or % of total) in your association's building(s). We are aware that this percentage changes throughout the year and thus only need to verify the estimated percentage of short term rentals at the time of binding and/or at renewal.

As an admitted insurance carrier domiciled in the state of Florida, American Coastal Insurance Company is required to participate in the Florida Hurricane Catastrophe Fund (FHCF) for reinsurance coverage. However, by law the FHCF does not provide reinsurance coverage for Condominium Associations and Homeowner Associations that are primarily used for short term rentals. Short term rentals are defined by the FHCF as units that are non-owner occupied and rented for six (6) or more rental periods by different parties during the course of a twelve (12) month period. As such, our intent at American Coastal is to not provide coverage for properties that are primarily used for short term rentals. Please complete the questions below and return prior to binding.

Total Number of units 375 of 1067 Total (rental and non-rental)

Total Percentage (%) of short term rental units (circle appropriate range)

(1)0% to 25% Short Term Rentals)

2) 25.1% to 50% Short Term Rentals

3) 50.1% to 75% Short Term Rentals

4) 75.1% to 100% Short Term Rentals

Maryam Sedghy Policyholder/Applicant's Signature

Maryan Sed

Title/Position

3/13/2

Date

All coverages are as per the standard forms and endorsements in use by American Coastal Insurance Company at the time of binding unless otherwise noted.

Please note that this quote or binder is based on the coverage, terms and conditions listed herein, which may be different from those requested in your original submission. It is incumbent upon you to review the terms of this quote carefully with your Insured and reconcile any differences in the terms requested in the original submission. American Coastal Insurance Company and AmRisc, LLC disclaim any responsibility for your failure to reconcile with the Insured any differences between the terms quoted herein and those terms originally requested.



Commercial Property Quote

American Coastal Insurance Company

Election Not To Buy Separate Flood Insurance

I, <u>The Village of Kings Creek Condominium Association</u>, have elected NOT to purchase, separate flood insurance for the property to be insured by American Coastal Insurance Company ("American Coastal") and affirm the following:

I UNDERSTAND AMERICAN COASTAL INSURANCE COMPANY DOES NOT PROVIDE COVERAGE FOR DAMAGE CAUSED BY FLOOD.

MY PROPERTY WILL NOT BE COVERED FOR ANY LOSS CAUSED BY OR RESULTING FROM FLOOD.

I UNDERSTAND FLOOD INSURANCE MAY BE PURCHASED FROM A PRIVATE FLOOD INSURER OR THE NATIONAL FLOOD INSURANCE PROGRAM.

I WILL HAVE NO COVERAGE FOR LOSSES CAUSED BY FLOOD.

I UNDERSTAND MY APPLICATION FOR COVERAGE MAY BE DENIED IF I DO NOT SIGN THIS FORM.

I UNDERSTAND MY POLICY MAY BE NONRENEWED IN THE FUTURE IF I DO NOT SIGN THIS FORM.

The Florida Department of Financial Services, Office of Insurance Regulation and American Coastal Insurance Company strongly recommends that property owners in "Special Flood Hazard Areas" obtain flood coverage.

I have read and I understand the information above, and I chose **NOT** to purchase flood coverage.

I understand that execution of this form does **NOT** relieve me of any obligation I may have to my mortgagee to purchase flood insurance.

Maryam Sedghy

Application/Policy Number: olicyholder/Applicant's Signature Date

zabeth Fisgehen

Agért's Signature Elizabeth Fiegehen Printed Name 3/9/2023 Date

AC FW01 06 07

All coverages are as per the standard forms and endorsements in use by American Coastal Insurance Company at the time of binding unless otherwise noted.

Please note that this quote or binder is based on the coverage, terms and conditions listed herein, which may be different from those requested in your original submission. It is incumbent upon you to review the terms of this quote carefully with your Insured and reconcile any differences in the terms requested in the original submission. American Coastal Insurance Company and AmRisc, LLC disclaim any responsibility for your failure to reconcile with the Insured any differences between the terms quoted herein and those terms originally requested.

Insured: The Village of Kings Creek Condominium Association

Bldg	Address	County	Num Bldgs	Year Built	Building	Contents	Other F	BI/ Rents	Total Value	Num Units	Bldg SqFt	ISO Constr
1	7830 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$6,296,000	\$0	\$0	\$0	\$6,296,000	47	50,368	6
2	7860/65 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$10,310,500	\$0	\$0	\$0	\$10,310,500	78	82,484	6
3	7920 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$6,296,000	\$0	\$0	\$0	\$6,296,000	47	50,368	6
4	7910/15 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$10,310,500	\$0	\$0	\$0	\$10,310,500	78	82,484	6
5	7845/50 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$10,310,500	\$0	\$0	\$0	\$10,310,500	78	82,484	6
6	7840 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$6,296,000	\$0	\$0	\$0	\$6,296,000	47	50,368	6
7	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$496,300	\$55,000	\$0	\$0	\$551,300	1	3,775	2
8	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$462,800	\$0	\$0	\$0	\$462,800	1	3,775	2
9	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$135,800	\$0	\$0	\$0	\$135,800	1	992	1
10	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$135,800	\$16,500	\$0	\$0	\$152,300	1	992	1
11	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$8,000	\$0	\$0	\$0	\$8,000	1	101	1
12	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$100,800	\$0	\$100,800	1	1,000	6
13	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$24,600	\$0	\$24,600	1	150	3
14	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$85,000	\$0	\$85,000	1	1,000	6
15	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$7,800	\$0	\$0	\$0	\$7,800	1	150	1

Insured: The Village of Kings Creek Condominium Association

Bldg	Address	County	Num Bldgs	Year Built	Building	Contents	Other F	BI/ Rents	Total Value	Num Units	Bldg SqFt	ISO Constr
16	7900 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$5,600	\$0	\$5,600	1	150	3
17	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$61,600	\$0	\$61,600	1	600	6
18	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$17,900	\$0	\$17,900	1	150	3
19	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$5,600	\$0	\$5,600	1	150	3
20	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$35,300	\$0	\$35,300	1	1,000	6
21	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$7,800	\$0	\$0	\$0	\$7,800	1	150	1
22	7818 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$3,150	\$0	\$3,150	1	101	3
23	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$61,600	\$0	\$61,600	1	600	6
24	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$17,900	\$0	\$17,900	1	150	3
25	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$5,600	\$0	\$5,600	1	150	3
26	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$31,400	\$0	\$31,400	1	1,000	6
27	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$7,800	\$0	\$0	\$0	\$7,800	1	150	1
28	7750 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$2,300	\$0	\$2,300	1	150	3
29	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$61,600	\$0	\$61,600	1	600	6
30	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$17,900	\$0	\$17,900	1	150	3

Insured: The Village of Kings Creek Condominium Association

Bldg	Address	County	Num Bldgs	Year Built	Building	Contents	Other F	Bl/ ents	Total Value	Num Units	Bldg SqFt	ISO Constr
31	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$5,600	\$0	\$5,600	1	150	3
32	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$14,300	\$0	\$14,300	1	1,000	6
33	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$6,600	\$0	\$0	\$0	\$6,600	1	150	1
34	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$2,870	\$0	\$2,870	1	150	3
35	7711 CAMINO REAL MIAMI FL 33143	MIAMI-DADE	1	1975	\$0	\$0	\$6,240	\$0	\$6,240	1	101	3
					\$51,088,200	\$71,500	\$566,860	\$0	\$51,726,560			

Insured: The Village of Kings Creek Condominium Association

	g Prot n Clas		ACIC Class	ACIC Occupancy	Location	EC_Zone	Terrain	Group2 Constr	Roof Cover	Roof Shape	Roof Wall Attach	Roof Deck Attach		Open Prot	FBC Wind Speed	FBC Wind Des	Des Exp
1	01	N	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
2	01	Ν	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
3	01	N	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
4	01	N	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
5	01	Ν	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
6	01	Ν	0333	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Superior	Level B	Flat	N/A	Level C Reinforced Concrete RF	N	None	N/A	N/A	N/A
7	01	Ν	0331	Building & Contents	Miami	Seacoast 2	All HVHZ Locations	Ordinary	N/A	Нір	N/A	N/A	N	None	N/A	N/A	N/A
8	01	Ν	0331	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Hip	N/A	N/A	N	None	N/A	N/A	N/A
9	01	N	0331	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Flat	N/A	N/A	N	None	N/A	N/A	N/A
10	01	Ν	0331	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Flat	N/A	N/A	N	None	N/A	N/A	N/A
11	01	N	0331	Building & Contents	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Hip	N/A	N/A	N	None	N/A	N/A	N/A

Insured: The Village of Kings Creek Condominium Association

	Prot Class		ACIC Class	ACIC Occupancy	Location	EC_Zone	Terrain	Group2 Constr	Roof Cover	Roof Shape	Roof Wall Attach	Roof Deck Attach		Open Prot	FBC Wind Speed	FBC Wind Des	Des Exp
12	01	Ν	1190	1190-1 Pool-In Grnd Cncrt or Mtl	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
13	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
14	01	Ν	1190	1190-2 Pool-In Ground Other	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
15		Ν	0331		Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Нір	N/A	N/A	N	None	N/A	N/A	N/A
16	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
17	01	Ν	1190	1190-1 Pool-In Grnd Cncrt or Mtl	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
18	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
19	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
20	01	Ν	1190	1190-2 Pool-In Ground Other	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
21	01	Ν	0331		Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Hip	N/A	N/A	N	None	N/A	N/A	N/A
22	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A

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	Prot Class		ACIC Class	ACIC Occupancy	Location	EC_Zone	Terrain	Group2 Constr	Roof Cover	Roof Shape	Roof Wall Attach	Roof Deck Attach	Sec Wtr	Open Prot	FBC Wind Speed	FBC Wind Des	Des Exp
23	01	N	1190	1190-1 Pool-In Grnd Cncrt or Mtl	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
24	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
25	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
26	01	Ν	1190	1190-2 Pool-In Ground Other	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
27	01	Ν	0331		Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Нір	N/A	N/A	N	None	N/A	N/A	N/A
28	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
29	01	Ν	1190	1190-1 Pool-In Grnd Cncrt or Mtl	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
30	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
31	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
32	01	Ν	1190	1190-2 Pool-In Ground Other	Miami	Seacoast 1	All HVHZ Locations	Superior	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
33	01	N	0331		Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	Hip	N/A	N/A	N	None	N/A	N/A	N/A

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	Prot Class		ACIC Class	ACIC Occupancy	Location	EC_Zone	Terrain	Group2 Constr	Roof Cover	Roof Shape	Roof Wall Attach	Roof Deck Attach		Open Prot	FBC Wind Speed	FBC Wind Des	
34	01	N	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A
35	01	Ν	1190	1190-6 Open Sided f,JM or N-C	Miami	Seacoast 1	All HVHZ Locations	Ordinary	N/A	N/A	N/A	N/A	N	None	N/A	N/A	N/A

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Bldg Num	Wind Ded	AOP Ded	Bldg Val	Roof Cover Val	AS ISO	BCEGS	Vandl Excl	Cov A	Cov BC Limit	CovA/B/C Limit
1	.05	10,000	RCV	RCV	N	Ungraded	N	Y	\$157,400	\$0.00
2	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$257,763	\$0.00
3	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$157,400	\$0.00
4	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$257,763	\$0.00
5	.05	10,000	RCV	RCV	Ν	Ungraded	N	Y	\$257,763	\$0.00
6	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$157,400	\$0.00
7	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$12,408	\$0.00
8	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$11,570	\$0.00
9	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$3,395	\$0.00
10	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$3,395	\$0.00
11	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$200	\$0.00
12	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$2,520	\$0.00
13	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$615	\$0.00
14	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$2,125	\$0.00
15	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$195	\$0.00
16	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$140	\$0.00
17	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$1,540	\$0.00
18	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$448	\$0.00
19	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$140	\$0.00
20	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$883	\$0.00
21	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$195	\$0.00
22	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$79	\$0.00

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Bldg Num	Wind Ded	AOP Ded	Bldg Val	Roof Cover Val	AS ISO	BCEGS	Vandl Excl	Cov A	Cov BC Limit	CovA/B/C Limit
23	.05	10,000	RCV	RCV	N	Ungraded	N	Y	\$1,540	\$0.00
24	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$448	\$0.00
25	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$140	\$0.00
26	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$785	\$0.00
27	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$195	\$0.00
28	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$58	\$0.00
29	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$1,540	\$0.00
30	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$448	\$0.00
31	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$140	\$0.00
32	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$358	\$0.00
33	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$165	\$0.00
34	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$72	\$0.00
35	.05	10,000	RCV	RCV	Ν	Ungraded	Ν	Y	\$156	\$0.00

The Village of Kings Creek Condominium Association Insured:

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Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

To the best knowledge of the applicant and the producer, the above information is true and complete.

Applcant Printed Name

Title

Producer Printed Name

Elizabeth Fiegehen

Producer Signature

Title

Date

Agent

3/9/2023

HesidenT_

Applicant Signature

Date 3/13/73 Maryam Sedgky

<u>Clizabeth Fiegehen</u>