

DWELLING POLICY DECLARATIONS

Renewal Policy
Name Insured and Mailing Address
Pope, Michael
11152 Westheimer Road
HOUSTON
HARRIS
TX
77042

2324-Certain Underwriters at Lloyds
General Agent : **ALLRISKS LTD**
Insured's Producer : **BRAD SPURGEON INSURANCE AGENCY**
1118 14TH STREET N, TEXAS CITY, TX, 77590
Phone# - **1(409) 945 4746**
Agent Name : **Brad Spurgeon**

Policy No : **NVF-0002715 - 1**

Policy Period : **12 Months**

From : **04/25/2019**

To : **04/25/2020**

12.01 A.M Standard Time at the Described Location

This insurance applies to the Described Location, Coverage for which a Limit of Liability or Premium is shown and Perils Insured Against for which a premium is stated.

The Described Location :

Property Coverages

A - Dwelling
B - Other Structures
C - Personal Property
D - Loss of Use

Limits of Liability

\$204,000
\$10,200
\$12,240
\$40,800

Optional Coverages

Vandalism and Malicious Mischief
Limited Mold Coverage

Included
\$5,000

Liability Coverages

L - Personal Liability
M - Medical Payments to Others

Limits of Liability

\$500,000
\$5,000

In Case of loss under this policy we cover only that part of the loss over the deductible stated for this location(s).

Deductibles

Property Deductible(s) : **\$500**

Wind Coverage Excluded

Other Deductible :

Form(s) and endorsement(s) made a part of this policy for this location(s) :

21610 Kennedy , , GALVESTON , TX , 77554

SEE ARF1779 - SCHEDULE OF FORMS AND ENDORSEMENTS

Mortgagee(s), Additional Insured(s) and Lienholder(s) made a part of this policy for this location(s) :

NATIONSTAR MORTGAGE LLC ISAOA PO BOX 7729 SPRINGFIELD , OH , 45501-7729 # 0599690237

Rating Information :

Occupancy : **Rental - Short Term/Seasonal**
Construction : **Frame**

Year of Construction : **1966** Territory : **7**

Number of Units : **Single Family** Fire District or Town : **GALVESTON**

Protection Class : **2**

Basic Premium (Property+Liability) : **\$791.00**
Surplus Lines Tax : **\$43.70**
Stamp Fee : **\$1.35**
Policy Fee : **\$110.00**
Inspection Fee : **\$0.00**
Filing Fee : **\$0.00**
Total Premium : \$946.05
Minimum Earned Premium : **25.0 %**

THIS DECLARATION TOGETHER WITH THE POLICY JACKET, DWELLING POLICY FORM, AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETES THE ABOVE NUMBERED POLICY.

Date : **02-18-2019**

By :



(REX REGAN)
Correspondent

TEXAS COMPLAINT NOTICE

IMPORTANT NOTICE	AVISO IMPORTANTE
To obtain information or make a complaint:	Para obtener informacion o para someter una queja:
1. You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:	Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de companias, coberturas, derechos o quejas al:
1-800-252-3439	1-800-252-3439
2. You may write the Texas Department of Insurance: P. O. Box 149104 Austin, TX 78714-9104 Fax: (512) 475-1771 Web: http://www.tdi.texas.gov E-mail: ConsumerProtection@tdi.texas.gov	Puede escribir al Departamento de Seguros de Texas: P. O. Box 149104 Austin, TX 78714-9104 Fax: (512) 475-1771 Web: http://www.tdi.texas.gov E-mail: ConsumerProtection@tdi.texas.gov
3. PREMIUM OR CLAIM DISPUTES: Should you have a dispute concerning your premium or about a claim you should contact the agent first. If the dispute is not resolved, you may contact the Texas Department of Insurance.	DISPUTAS SOBRE PRIMAS O RECLAMOS: Si tiene una disputa concerniente a su prima o a un reclamo, debe comunicarse con el agente primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI).
4. ATTACH THIS NOTICE TO YOUR POLICY: This notice is for information only and does not become a part or condition of the attached document.	UNA ESTE AVISO A SU POLIZA: Este aviso es solo para proposito de informacion y no se convierte en parte o condicion del documento adjunto.

TEXAS SURPLUS LINES NOTICE

Insured: **Pope, Michael**
Policy Number: **NVF-0002715-1**
Surplus Lines Agent: All Risks, LTD
10150 York Road, 5th Floor
Hunt Valley, MD 21030
Surplus Lines Agent License ID
1349447

Guaranty Fund Nonparticipation Notice

This insurance contract is with an insurer not licensed to transact insurance in this state and is issued and delivered as surplus line coverage under the Texas insurance statutes. The Texas Department of Insurance does not audit the finances or review the solvency of the surplus lines insurer providing this coverage, and the insurer is not a member of the property and casualty insurance guaranty association created under Chapter 462, Insurance Code. Chapter 225, Insurance Code, requires payment of a 4.85 percent tax on gross premium.

Gross Premium:	\$791.00
Inspection Fee:	\$0.00
Policy Fee:	\$110.00
Premium Tax:	\$43.70
Stamping Fee:	\$1.35
TOTAL:	\$946.05

			ENDORSEMENT NO. _____
ATTACHED TO AND FORMING A PART OF POLICY NUMBER	ENDORSEMENT EFFECTIVE DATE (12.01 A.M STANDARD TIME)	NAMED INSURED	AGENT NO.
NVF-0002715-1	04/25/2019	Pope, Michael	

SCHEDULE OF FORMS

S.No	Document Identifier	- Version Date	Document Name
1	ARF9221	- 3/04	DWELLING POLICY DECLARATION
2	TX-Notice-01		TX COMPLAINT NOTICE
3	TX-SurplusNotice-02		TX SURPLUS LINES NOTICE
4	ARF9077		LLOYDS OF LONDON MINIMUM EARNED CANCELLATION
5	ARF1779	- 10/96	SCHEDULE OF FORMS
6	ARF9141		LLOYDS CERTIFICATE
7	LMA5020		LLOYDS OF LONDON SERVICE OF SUIT CLAUSE
8	LSW1135B	- 6/03	LLOYDS PRIVACY POLICY STATEMENT
9	NMA1191		RADIOACTIVE CONTAMINATION EXCLUSION CLAUSE
10	NMA1331		CANCELLATION CLAUSE
11	NMA2341		LAND, WATER AND AIR EXCLUSION
12	NMA2342		SEEPAGE AND/OR POLLUTION AND/OR CONTAMINATION
13	NMA2802		ELECTRONIC DATE RECOGNITION EXCLUSION (EDRE)
14	NMA2915		ELECTRONIC DATA ENDORSEMENT B
15	NMA2918		WAR AND TERRORISM EXCLUSION ENDORSEMENT
16	NMA2962		BIOLOGICAL OR CHEMICAL MATERIALS EXCLUSION
17	ARF9092		LLOYDS OF LONDON SCHEDULE OF MORTGAGEES
18	L-433	- 03/98	TRAMPOLINE EXCLUSION
19	ARFC922	- (06/15)	ADDITIONAL LIABILITY EXCLUSIONS ENDORSEMENT
20	ARF9097		WIND/HAIL EXCLUSION
21	DL2401	- 7/88	PERSONAL LIABILITY - AGREEMENT
22	DL2411	- 7/88	PREMISES LIABILITY (NON-OWNER OCCUPIED DWGS)
23	DL2402	- 7/88	PERSONAL LIABILITY ADDITIONAL POLICY CONDITIONS
24	DL2416	- 7/88	NO COVERAGE FOR HOME DAY CARE BUSINESS
25	ARF9073		LLOYD'S OF LONDON LEAD CONTAMINATION
26	DP0003	- 7/88	DWELLING PROPERTY 3 SPECIAL FORM
27	LSW1001		SEVERAL LIABILITY NOTICE
28	LMA5021		APPLICABLE OF LAW CLAUSE
29	DP0423	- 09/02	LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE
30	ILP001	- 01/04	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS

AUTHORIZED REPRESENTATIVE

DATE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITED FUNGI, WET OR DRY ROT, OR BACTERIA COVERAGE

FOR USE WITH ALL FORMS

SCHEDULE*

These limits of liability apply to the total of all loss or costs payable under this endorsement, regardless of the number of claims made or the number of locations insured under this endorsement and listed in this Schedule.	
Property Coverage Limit of Liability for the Other Coverage "Fungi", Wet Or Dry Rot, Or Bacteria	\$5,000
*Entries may be left blank if shown elsewhere in this policy for this coverage.	

With respect to the coverage provided under this endorsement, "Fungi" means any type or form of fungus, including mold or mildew, and any mycotoxins, spores, scents or by-products produced or re-leased by fungi.

COVERAGES

OTHER COVERAGES

The following Coverage is added:

12. "Fungi", Wet Or Dry Rot, Or Bacteria

- a. The amount shown in the Schedule above is the most we will pay for:
 - (1) The total of all loss payable caused by "fungi", wet or dry rot, or bacteria;
 - (2) The cost to remove "fungi", wet or dry rot, or bacteria from covered property;
 - (3) The cost to tear out and replace any part of the building or other covered property as needed to gain access to the "fungi", wet or dry rot, or bacteria; and

- (4) The cost of testing of air or property to confirm the absence, presence or level of "fungi", wet or dry rot, or bacteria whether performed prior to, during or after removal, repair, restoration or replacement. The cost of such testing will be provided only to the extent that there is reason to believe that there is a presence of "fungi", wet or dry rot, or bacteria.

- b. The coverage described in 13.a. only applies when such loss or costs are a result of a Peril Insured Against that occurs during the policy period and only if all reasonable means were used to save and preserve the property from further damage at and after the time the Peril Insured Against occurred.
- c. The amount shown in the Schedule for this coverage is the most we will pay for the total of all loss or costs payable under this Other Coverage regardless of the:
 - (1) Number of locations insured under this endorsement; or
 - (2) Number of claims made.

- d. If there is covered loss or damage to covered property, not caused, in whole or in part, by "fungi", wet or dry rot, or bacteria, loss payment will not be limited by the terms of this Other Coverage, except to the extent that "fungi", wet or dry rot, or bacteria causes an increase in the loss. Any such increase in the loss will be subject to the terms of this Other Coverage.

This Coverage does not increase the limit of liability applying to the damaged covered property.

(This is Other Coverage 9. in Form **DP 00 01**.)

PERILS INSURED AGAINST

COVERAGE A – DWELLING and

COVERAGE B – OTHER STRUCTURES

Paragraph **2.h.(3)** in Form **DP 00 03** is deleted and replaced by the following:

- (3)** Smog, rust or other corrosion;

GENERAL EXCLUSIONS

The following Exclusion is added:

3. "Fungi", Wet Or Dry Rot, Or Bacteria

"Fungi", Wet Or Dry Rot, Or Bacteria meaning, the presence, growth, proliferation, spread or any activity of "fungi", wet or dry rot, or bacteria.

This Exclusion does not apply:

- a. When "fungi", wet or dry rot, or bacteria results from fire or lightning; or
- b. To the extent coverage is provided for in Other Coverages, "Fungi", Wet Or Dry Rot, Or Bacteria with respect to loss caused by a Peril Insured Against other than fire or lightning.

Direct loss by a Peril Insured Against resulting from "fungi", wet or dry rot, or bacteria is covered.

(This is General Exclusion **A.9.** in Form **DP 00 01** and **1.i.** in Form **DP 00 03**.)

All other provisions of this policy apply.



Name:

ENHANCED PROGRAM BENEFITS:

If, for any reason, you or an eligible member of your family are a victim of identity theft within the term of the program, a professional Identity Theft Recovery Advocate will manage your recovery process to help restore your name and credit as close as possible to pre-event status. We will handle the follow-up, paperwork, and phone calls for you, through a limited power of attorney authorization. Once you report an identity theft, the following actions will be taken to manage your recovery: ♦ You will be assigned your own Recovery Advocate. Your Recovery Advocate will document your case and perform the necessary actions to recover your name and credit history.

♦ Your Recovery Advocate will immediately send a Fraud Recovery Packet to you by email, fax or overnight delivery, with a limited power of attorney form, and instructions for immediate action. ♦ Once you return the forms in the Fraud Recovery Packet, your Recovery Advocate will perform the following actions as they may be required by the circumstances of your case: Place fraud alerts at the three major credit bureaus for you; provide you with copies of credit reports from all three credit bureaus and review the reports with you to identify fraudulent activity; assist you in completing the official identity theft affidavit from the Federal Trade Commission to establish your rights as a victim; contact the Social Security Administration, US Postal Service, Department of Motor Vehicles, among others, to reverse any wrongful information, transactions, or misuse of official documentation as applicable to your case; research and document any fraudulent transactions, false accounts, or contracts signed with creditors, banks, utility companies, leasing agents, medical facilities, etc., and follow up to make sure all wrongful activity is removed from your credit file; work with local and federal law enforcement to try to stop the criminal(s) that are misusing your name; notify Law Enforcement: report your situation and the potential risk for identity theft. If your local police are not familiar with investigating identity theft cases, contact the local office of the FBI or the U.S. Secret Service. For incidents involving mail theft, contact the U.S. Postal Inspection Service. ♦ At the close of your case, your Recovery Advocate will provide confirmation of your return to pre-identity theft status and provide post-recovery follow-up for 12 months. ♦ You will have direct access to your Recovery Advocate by phone, email and fax both for the duration of your case and for the post-recovery follow-up period. Internet Identity Monitoring: The Black Market Internet Monitoring Service proactively scans for sensitive personal information that is sold and traded on black market internet sites and chat rooms. The service includes monitoring for credit card and debit card numbers, bank account numbers, social security numbers, driver's licenses numbers, telephone numbers, email addresses, and other sensitive information. By helping to identify stolen card numbers and personal information available on black market internet sites before significant damage can occur, the service reduces risks, costs and headaches related to financial fraud and identity theft.

TO BEGIN MONITORING:

promos.privacy.com/allrisks

TO FILE A CLAIM: 888-717-8580

Terms and Conditions

Persons who are eligible for this benefit are called "Members" and include persons who pay for this service (or have this service paid for on their behalf) and their immediate families (spouse/domestic parent plus dependants under the age of 25, and all IRS dependents – regardless of age – who share the same permanent address as the Member named above, or are in an assisted living facility, skilled nursing home, hospice, or have been deceased twelve (12) months of less. ♦ You may access recovery services under this program immediately, contingent upon the dealership's prompt remittance for this service to the provider or its agent. You will continue to be a Member until the expiration of the term you selected (Membership Period). ♦ The benefits under this program are non-transferable. Purchase price may be refunded at Member's request within 10 days of purchase if no claims have been made. Benefits not utilized will cease with no cash value. ♦ For purposes of benefits under this program, Identity Theft is defined as fraud that involves the use of a Member's name, address, social security number, bank or credit /debit card account number, or other identifying information without the knowledge of the Member which is used to commit fraud or other crimes. ♦ No services will be provided for losses resulting from fraudulent or illegal acts of the registered customer and/or customer negligence whether acting alone or in collusion with others material misrepresentation by customer. Further, Company, Privacy Maxx, Inc. and/or their service provider(s) ("Provider") reserve the right to refuse or terminate services where it is deemed that the individual is committing fraud or other illegal acts, making untrue statements, or failing to perform his/her portion of the recovery plan. ♦ A business entity does not qualify for benefits under this consumer contract. ♦ Identity theft events that pre-date the effective date of the initial term of this contract are not eligible for services under this contract if the event was known to the individual prior to the effective date of the initial term. ♦ Benefits are only available to residents of the United States. In the event of identity theft occurs outside of the United States, identity recovery is only performed with agencies and institutions in the United States or territories where U.S. law applies. ♦ The Provider will not provide credit counseling or repair to credit that legitimately belongs to a Member. ♦ The Provider cannot be held responsible for failure to provide or for delay in providing services when such failure or delay is caused by conditions beyond its control. ♦ Services do not cover reimbursement for financial losses of any kind from identity theft or recovery services there from. ♦ This agreement is not a contract of insurance.

Policyholder Notice

Reporting a Claim

To report a claim under your Lloyds Homeowner Policy, please contact Claim Reporting:

- By phone, 24 hours a day, 7 days a week at 1-877-346-0300, the representative will ask for a code: 2804

Please be ready to provide us with the following information: the name on the policy, the policy number, your agent's name, the date the loss occurred, the type of loss, and any other facts that may be relevant to our review of your claim.

All Other:

- 32.93% Syndicate NVA 2007 at Lloyd's
- 7.28% Syndicate ARG 2121 at Lloyd's
- 16.47% Syndicate KLN 0510 at Lloyd's
- 10.98% Syndicate CGM 2488 at Lloyd's
- 8.23% Syndicate ATL 1206 at Lloyd's
- 6.59% Syndicate APL 1969 at Lloyd's
- 2.70% Syndicate AFB 2623 at Lloyd's
- 0.59% Syndicate AFB 0623 at Lloyd's
- 3.29% Syndicate ARK 4020 at Lloyd's
- 0.77% Syndicate AMA 1200 at Lloyd's
- 1.37% Syndicate AES 1225 at Lloyd's
- 2.20% Syndicate AUW 0609 at Lloyd's
- 2.20% Syndicate XLC 2003 at Lloyd's
- 2.20% Syndicate WBC 5886 at Lloyd's
- 2.20% Syndicate MSP 0318 at Lloyd's

Texas only:

- 36.99% Syndicate NVA 2007 at Lloyd's
- 8.18% Syndicate ARG 2121 at Lloyd's
- 18.50% Syndicate KLN 0510 at Lloyd's
- 9.25% Syndicate ATL 1206 at Lloyd's
- 7.40% Syndicate APL 1969 at Lloyd's
- 3.03% Syndicate AFB 2623 at Lloyd's
- 0.67% Syndicate AFB 0623 at Lloyd's
- 3.70% Syndicate ARK 4020 at Lloyd's
- 0.86% Syndicate AMA 1200 at Lloyd's
- 1.54% Syndicate AES 1225 at Lloyd's
- 2.47% Syndicate AUW 0609 at Lloyd's
- 2.47% Syndicate XLC 2003 at Lloyd's
- 2.47% Syndicate WBC 5886 at Lloyd's
- 2.47% Syndicate MSP 0318 at Lloyd's

**Ed Broking LLP
Authorised Signatory**



Ag 14/6/18