

Residential Declarations Page
Texas Windstorm Insurance Association
P.O. Box 99090 Austin, Texas 78709-9090

Policy Number: TWIA-000401176-04

Policy Period: Jan 10, 2019, to Jan 10, 2020
 12:01 A.M. Standard Time at the property location

Name and Mailing Address of Agent:

Suzanne Lim Brown
 PO Box 19423
 Houston, TX 77224

Name and Mailing Address of Insured:

Kenneth Won
 Letina Won
 74 S Creekside Ct
 Houston, TX 77055-7543

Galveston
TX. WIND/STORM
2019-2020

Early cancellation may result in approximately 25% of your premium being retained by Texas Windstorm Insurance Association.

This policy will be subject to an immediate surcharge if determined necessary by the Texas Insurance Commissioner. Failure to pay the surcharge will result in cancellation of the policy.

Insured : Kenneth Won

COVERAGES - Windstorm and Hail Only

In consideration of the stipulations and conditions herein or added hereto which are made a part of this policy, and of the premiums provided, TWIA does insure the insured named above and legal representatives FROM the inception date shown above TO the expiration date shown above at 12:01 A.M. Standard Time at the location of property against direct loss resulting from the perils of Windstorm and Hail only which have a premium inserted opposite thereto and only on the property described and located as provided hereon.

Item No.	Coverage A/B	Property and Form Description	Coins %	Per Item / Per Occurrence Deductible % Amt	Form Number	Limit of Liability	Premium
1	A	Property Description: Single Family Dwelling 22033 Deaf Smith Drive, Galveston, Galveston County, TX, 77554 <i>Underwriting Details:</i> Stories: 2; Construction: Frame; Roof: Shingles, Asphalt/Fiberglass; Occupancy: Secondary Dwelling <i>Adjustment amounts included in the premium for each item:</i> Building Code Credit (Inland/Seaward IRC) -\$1,190.00 Increased Cost of Construction (5%) \$133.00 Personal Property Replacement Cost \$119.00 Indirect Loss \$115.00 Deductible 2% -\$595.00 <i>Item #1-A forms: 320 431 220 800</i>	80%	2% \$6,660		\$333,000.00	\$2,037.00
1	B	Description: Personal Property located at: 22033 Deaf Smith Drive, Galveston, Galveston County, TX, 77554 <i>Underwriting Details:</i> Stories: 2; Construction: Frame; Roof: Shingles, Asphalt/Fiberglass; Occupancy: Secondary Dwelling	Nil	2% \$1,000		\$50,000.00	\$120.00

Total Limit / Total Premium:	\$383,000.00	\$2,157.00
Total ICC Premium:	\$133.00	
Total Surcharges:		\$0.00

Total Premium + Total Surcharges: \$2,157.00

Original
 Part 1, Page 1 of 2

(This policy contains two parts. To be valid, both parts must be combined and the policy countersigned by the Texas Windstorm Insurance Association.)



Processed By:
e-Ins.net Flood Insurance
Processing
P.O. Box 33018
St Petersburg, FL 33733-8018



Endorsement - Manual

Dwelling Policy Form

Policy Declarations

Policy Number: 0FLD320683
Product Type: Standard Policy
Endorsement Reason: Change Mortgagees

Policy Period: 01/11/2019 to 01/11/2020
At 12:01 AM Local time at the described location
Endorsement Effective: 1/11/2019

Named Insured

NAIC: 10872

Agent/Producer Name & Address

KENNETH WON
Property Location:
22033 DEAF SMITH DR
GALVESTON, TX 77554

**GALVESTON
Home owners
2019**

413760 - SUZANNE BROWN AGENCY, LLC
PO BOX 19423 HOUSTON, TX 77224
(281)558-2210

Mailing Address
74 S CREEKSIDE CT
HOUSTON, TX 77055

Payor: KENNETH WON

Community Rating Information

Community Name: GALVESTON, CITY OF
Community Number: 485469 - 0068 - E
Current Flood Zone: AE
FIRM Type: POST
Program: Regular
NFIP Grandfathering:
Grandfathered: No
Rating Community Number: 485469 - 0068 - E
Rating Flood Zone: AE

Building Information

Occupancy: Single Family
Elevated Building: Yes
Building Type: One Floor
Elevated - Without Enclosure
Replacement Cost: \$250,000
Primary Residence: No
No Addition(s) and Extension(s)
Contents Location:
Lowest Floor Only Above Ground Level

Coverage Information

	Limit(s):	Deductible	Premium
Building	\$250,000	\$2,000	\$320.00
Contents	\$100,000	\$2,000	\$185.00

THIS IS NOT A BILL
MORTGAGEE
The Reform Act of 1994 requires you to notify the WYO company for the policy within 60 days of any changes in the service of the loan.
COVERAGE LIMITATIONS MAY APPLY.
See Your Policy Form for Detail
Refer to www.fema.gov/cost-of-flood for more information about flood risk and policy rating.

Deductible Discount:	-	\$38.00
ICC Premium:		\$5.00
CRS Disc:	15%	-\$71.00
Reserve Fund Assessment:		\$60.00
Probation Surcharge:		\$0.00
Federal Policy Fee:		\$50.00
HFIAA Surcharge		\$250.00
Total Premium Paid:		\$761.00
Endorsement Premium:		\$0.00
Annual Premium:		\$761.00

Special Provisions

This policy covers only one building. If you have more than one building on your property, please make sure each is covered. See Section III Property Covered within your flood policy for the NFIP definition of 'building' or contact your agent, broker or insurance

Forms and Endorsements

ASI FLD IMPINF 08, ASI FLD SOC 08, DW 04 2016

This Declarations Page, in conjunction with the policy, constitutes your Flood Insurance Policy. IN WITNESS WHEREOF, we have signed this policy below and hereby enter into this Insurance

Kevin Milkey
Executive Vice President, American Strategic Insurance

Date: 01/16/2019

Processed By:
e-Ins.net Flood Insurance
Processing
P.O. Box 33018
St. Petersburg, FL 33733-8018



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KENNETH WON
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GALVESTON, TX 77554

413760 - SUZANNE BROWN AGENCY, LLC
PO BOX 19423 HOUSTON, TX 77224
(281)558-2210

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74 S CREEKSIDE CT
HOUSTON, TX 77055

Payor: KENNETH WON

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Kevin Milkey
Executive Vice President, American Strategic Insurance

Date: 01/30/2019

183061
172 0FLD320683

**Galveston
Flood**



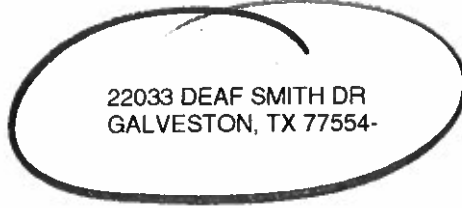
Washington, D.C. 20472
U.S. Department of Homeland Security

FEMA

FEBRUARY 28, 2019



T1369 P1 *****AUTO**5-DIGIT 77055
KENNETH WON
74 S CREEKSIDE CT
HOUSTON, TX 77055-7543



To correct any personal information on this form, please contact your insurance agent.

ACKNOWLEDGEMENT OF RECEIPT

An additional copy of this form has been provided for you to keep with the other documents you received. Return the original signed and dated form to **"NFIP Policy Information Acknowledgement, PO Box 1521, Lanham-Seabrook, MD 20703-9906"** in the envelope provided.

By signing, dating and returning this document in the pre-stamped, enclosed envelope, you acknowledge that:

- You have received your Declarations Page, and a Summary of Coverage from your insurance company.
- We have provided you with your property's loss history and the NFIP Flood Insurance Claims Handbook.
- You understand that you have the option to purchase **BOTH** building and contents coverage as part of your policy or;
- You may purchase building or contents coverage separately.

The person(s) listed on the policy as the Named Insured(s) should sign and date this form.

Thank you for your cooperation—and for protecting your property with the National Flood Insurance Program.

Signature of Named Insured: _____ **Date:** _____

Printed Full Name: _____

Signature of Named Insured: _____ **Date:** _____

Printed Full Name: _____