

BRAD SPURGEON INSURANCE AGENCY INC 1118 14TH STREET N TEXAS CITY, TX 77590

Agency Phone: (409) 945-4746 **NFIP Policy Number:** 0000442285 Company Policy Number: 0000442285 **BRAD SPURGEON** Agent:

01/18/2019 12:01 AM through 01/18/2020 12:01 AM Policy Term:

Renewal Billing Payor: INSURED

To report a claim https://Nationalgeneral.managemyfloodpolicy.com

visit or call us at: (877) 254-6819

## FLOOD INSURANCE POLICY DECLARATIONS

STANDARD POLICY - DWELLING FORM

**DELIVERY ADDRESS** 

**INSURED NAME(S) AND MAILING ADDRESS** 

MARK COYLE 9614 TEICHMAN GALVESTON, TX 77554

PROSPERITY BANK 100 WEST MEDICAL CENTER BLVD WEBSTER, TX 77598

**COMPANY MAILING ADDRESS** 

INTEGON NATIONAL INSURANCE COMPANY

PO BOX 912063

DENVER, CO 80291-2063

PROPERTY LOCATION

9614 TEICHMAN GALVESTON, TX 77554

DATE OF CONSTRUCTION:

**COMMUNITY NUMBER:** 

**CURRENT FLOOD ZONE:** 

FLOOD RISK/RATED ZONE:

**ELEVATED BUILDING TYPE:** 

0.080

0.120

**ELEVATION DIFFERENCE:** 

**COMMUNITY NAME:** 

**GRANDFATHERED:** 

**DESCRIPTION: N/A** 

RATING INFORMATION

ADDITIONS/EXTENSIONS:

**ORIGINAL NEW BUSINESS DATE:** 01/18/2019

**REINSTATEMENT DATE:** 

**BUILDING OCCUPANCY:** SINGLE FAMILY **CONDOMINIUM INDICATOR:** NOT A CONDO

NUMBER OF UNITS: N/A PRIMARY RESIDENCE: NO

N - NO ADDITIONS/EXTENSIONS **BUILDING TYPE:** ONE FLOOR

BASEMENT/ENCLOSURE/CRAWLSPACE TYPE: NO ENCLOSURE OR CRAWLSPACE

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE: PROSPERITY BANK

100 WEST MEDICAL CENTER BLVD WEBSTER, TX 77598

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

**DISASTER AGENCY:** 

LOAN NUMBER: 105875

01/08/2019

**ELEVATED** 

ΑE

NO

ΑE

5

**GALVESTON COUNTY** 

LOAN NUMBER: N/A

485469 0019 E REGULAR PROGRAM

LOAN NUMBER: N/A

CASE FILE NUMBER: N/A **DISASTER AGENCY:** 

PREMIUM CALCULATION —

ADD'L COVERAGE ADD'L RATE DED. DISCOUNT/SURCHARGE COVERAGE DEDUCTIBLE BASIC COVERAGE BASIC RATE

**BUILDING** \$250,000 \$3,000 \$60,000 0.280 \$190,000 CONTENTS \$10,000 \$3,000 \$10,000 0.380 \$0

Coverage limitations may apply. See your policy form for details.

Standard

**PREMIUM** (\$48.00)\$272.00 \$32.00 (\$6.00)

IN WITNESS WHEREOF, I have signed this policy below and hereby enter into this Insurance Agreement

**RESERVE FUND ASSESSMENT: 15.0%** PROBATION SURCHARGE:

INCREASED COST OF COMPLIANCE: \$5.00 COMMUNITY RATING DISCOUNT: (\$46.00)\$39.00 \$0.00

\$304.00

\$302.00

\$250.00

29742

ANNUAL PREMIUM: HFIAA SURCHARGE:

ANNUAL SUBTOTAL:

FEDERAL POLICY SERVICE FEE: \$50.00 TOTAL: \$602.00

Barry S. Karfunkel / President

Jeffrey Weissmann / Secretary

Zero Balance Due - This Is Not A Bill

Company NAIC:

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

Policy issued by INTEGON NATIONAL INSURANCE COMPANY

DocID: 82097709

File: 10221543

Page 1 of 2

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