

Processed By:
 Progressive Flood Insurance Processing
 P.O. Box 33018
 St. Petersburg, FL 33733-8018
 866-511-0793



Renewal - Manual

Dwelling Policy Form

Policy Declarations

Policy Number: 0FLD451697
 Product Type: Standard Policy

Policy Period: 08/22/2019 to 08/22/2020
 At 12:01 AM Local time at the described location

Named Insured	NAIC: 10872	Agent/Producer Name & Address
STEPHAN REVAK Property Location: 1228 DICK BAY DR SAN LEON, TX 77539-4780		420663 - ROBINSON FAMILY INSURANCE AGENCY LLC 1100 GULF FWY S STE 112 LEAGUE CITY, TX 77573 (281)332-7799
Mailing Address 217 W BAYOU DR DICKINSON, TX 77539		Payor: JP MORGAN CHASE BANK, NA ISAOA/ATIMA

Community Rating Information	Building Information
Community Name: GALVESTON COUNTY* Community Number: 485470 - 0100 - C Current Flood Zone: V18 FIRM Type: PRE Program: Regular NFIP Grandfathering: Grandfathered: Yes Rating Community Number: 485470 - 0000 - A Rating Flood Zone: A11	Occupancy: Single Family Elevated Building: Yes Building Type: Two Floors Elevated - Without Enclosure Replacement Cost: \$260,000 Primary Residence: Yes No Addition(s) and Extension(s) Contents Location: Lowest Floor Above Ground Level and Higher Floors

Coverage Information			
	Limit(s):	Deductible	Premium
Building	\$250,000	\$2,000	\$404.00
Contents	\$100,000	\$2,000	\$185.00
THIS IS NOT A BILL			Deductible Discount: -\$44.00
MORTGAGEE:			ICC Premium: \$6.00
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.			CRS Disc: 0% -\$0.00
COVERAGE LIMITATIONS MAY APPLY.			Reserve Fund Assessment: \$83.00
See Your Policy Form for Detail			Probation Surcharge: \$0.00
Refer to www.fema.gov/cost-of-flood for more information about flood risk and policy rating.			Federal Policy Fee: \$50.00
Optionally Rated: PRE			HFIAA Surcharge: \$25.00
			Total Premium Paid: \$709.00
			Annual Premium: \$709.00

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: 08/09/2019

Mortgagee(s)

First Mortgagee:

JP MORGAN CHASE BANK, NA ISAOA/ATIMA
PO BOX 47020
DORAVILLE, GA 30362-7020

LOAN #:1316792824
ESCROW: YES

Additional Named Insured(s)

First Additional Named Insured:

BARBARA REVAK



PO Box 2767
Bigfork, MT 59911

Mortgagee Bill

Maison Insurance Company
9100 Bluebonnet Centre Blvd.
Ste 502
Baton Rouge, LA 70809

Customer Service: (844) 962-4766

Homeowners Wind and Hail Only

Policy Declaration

Endorsement

Insured Copy

DECLARATION EFFECTIVE: 08/22/2019

Policy Number	From	To		Agent Code
532336	08/22/2019	08/22/2020	12:01 AM STANDARD TIME	3111

NAMED INSURED AND ADDRESS:

AGENT:

Stephan Revak and Barbara Revak
217 W Bayou Dr
Dickinson, TX 77539

Robinson Family Insurance Agency, LLC
1100 Gulf Fwy. S.
Suite #112
League City, TX 77573
Phone#: (281) 332-7799

INSURED LOCATION:

Stephan Revak and Barbara Revak
1228 Dick Bay Dr
San Leon, TX 77539

PREMIUM SUMMARY

BASIC COVERAGES PREMIUM	ATTACHED ENDORSEMENTS PREMIUM	POLICY FEES / SURCHARGES	TOTAL POLICY PREMIUM
\$2,499.00	\$125.00	\$75.00	\$2,699.00

PRODUCT	CONST TYPE	YEAR	USE	# FAMILY	OWNER OCC	PROT CLASS	TERRITORY
WHTX	Frame & Asbestos/Stucco	1972		One	Primary		8

Coverages - Section I

	Limits/Pct	Premium
Coverage A - Dwelling	\$266,000	\$2,068
Coverage B - Contents	\$156,000	\$431
Additional Living Expense	\$53,200	\$0

Annual Policy Premium \$2,624

MGA Fee \$75

Comments: Change to mailing address;

Net Premium Change: \$0.00

Net Fee Change: \$0.00

Total Policy Premium \$2,699

Wind and Hail Deductible \$7,980



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Phone#: (281) 332-7799

MORTGAGEE(S) / ADDITIONAL INTEREST(S)

1st Mortgagee:JP Morgan Chase Bank, NA ISAOA/ATIMA, PO BOX 47020, Doraville, GA 30362-7020; Loan#: 1316792824

POLICY FORMS AND ENDORSEMENTS

<u>Number</u>	<u>Edition</u>	<u>Description</u>	<u>Limit/Pct</u>	<u>Premium</u>
MIC WH TX POLJKT	12 16	Policy Jacket		\$0
MIC TX	06 15	Important Notice for Insureds		\$0
MIC TX Wind	06 15	Windstorm Insurance Dwelling Policy Form		\$0
BILL OF RIGHTS	10 15	Consumer Bill of Rights		\$0
MIC CN TX	02 19	Notice to Policy Holders		\$0
MIC PN	02 14	Privacy Statement		\$0
MIC WH 220	06 15	Automatic Adjusted Building Cost Endorsement		\$0
MIC WH 320	06 15	Extensions of Coverage		\$0
MIC WH 365	06 15	Replacement Cost Endorsement-Personal Property		\$125
MIC WH 112	06 15	Loss Payable Clause		\$0
MIC WH 130	06 15	Mortgage Clause (Without Contribution)		\$0



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IMPORTANT NOTICE

THIS POLICY DOES NOT INCLUDE INSURANCE PROTECTION AGAINST FLOOD LOSSES.

FLOOD COVERAGE IS AVAILABLE THROUGH AGENTS WHO WRITE FLOOD INSURANCE

IF YOU SHOULD HAVE ANY QUESTIONS REGARDING THIS IMPORTANT PROTECTION, PLEASE CONTACT YOUR AGENT

Douglas N. Rauscy

Authorized Signature

October 29, 2019

Date

HOMEOWNER POLICY DECLARATIONS



SCOTTSDALE INSURANCE COMPANY®

Policy Number

HOS1431070

HOS1418489

Renewal of Number

Home Office:
One Nationwide Plaza Columbus, Ohio 43215
Administrative Office:
8877 North Gainey Center Drive Scottsdale, Arizona 85258
1-800-423-7675
A STOCK COMPANY

Named Insured and Mailing Address:

STEPHAN REVAK AND
BARBARA REVAK
217 W BAYOU DR
DICKINSON TX 77539

General Agent: TEXAS SPECIALTY UNDERWRITERS INC

Insured's Producer: TEXAS SPECIALTY UNDERWRITERS INC

510 TURTLE COVE BLVD STE 200
ROCKWALL TX 75087-5374
(972)771-5653

Agent No.: TSROTX **Program No.:**

Policy Period: From: 08-22-2019 To: 08-22-2020 **Term:** 1 Year

12:01 A.M. Standard Time at the Described Location.

This insurance applies to the Residence Premises, Coverage for which a Limit of Liability or Premium is shown and Perils Insured Against for which a Premium is stated. The Residence Premises:
1228 DICK BAY DR, DICKINSON, TX 77539

Property Coverages:	Limits of Liability	Premiums
A—Dwelling	\$ 295,000	\$ 919
B—Other Structures	\$ 29,500	\$ INCLUDED
C—Personal Property	\$ 177,000	\$ INCLUDED
D—Loss of Use	\$ 59,000	\$ INCLUDED
Additional Perils Insured Against:	Limits of Liability	Premiums
	\$	\$
	\$	\$
	\$	\$
Liability Coverages:	Limits of Liability	Premiums
E—Personal Liability	\$ 300,000	\$ 50
F—Medical Payments to Others	\$ 5,000	\$ 20
	\$	\$
	\$	\$
	\$	\$
Optional Coverages:	Limits of Liability	Premiums
Loss Assessment	\$ 1,000	\$ INCLUDED
Water Backup	\$ 25,000	\$ INCLUDED
	\$	\$
	\$	\$

Deductibles: Property Deductible(s): 1% Wind/Hail: EXCLUDED
Personal Liability Deductible: Earthquake:

Form(s) and endorsement(s) made part of this policy for this location: See Schedule of Forms and Endorsements - Form UTS-SP-2L

Mortgagee(s), Additional Insured(s) and Lienholder(s) made a part of this policy for this location:
See Schedule of Mortgagee(s), Additional Insured(s) and Lienholder(s) - Form UTS-264

Rating Information: Year of Construction: 1972 Territory: 002 Fire District or Town: Protection Class: 04
Construction: FRAME No. of Families: 1 Occupancy: PRIMARY
Feet From Hydrant: 1000 Miles From Fire Station: 5 Square Feet: 2300

Policy Totals: County: GALVESTON Sub-Total Premium: \$ 989.00

Billed to: AGENT \$
No Flat Cancellations
Total Taxes and Fees: \$ 233.20
Total Policy Premium: \$ 1,222.20
Minimum Earned Premium: \$ 247.00

THIS DECLARATIONS PAGE, WITH POLICY JACKET, HOMEOWNERS POLICY FORM, AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETES THE ABOVE NUMBERED HOMEOWNERS POLICY.

ISSUED: 08/23/2019 AR



SCOTTSDALE INSURANCE COMPANY®

SCHEDULE OF TAXES, SURCHARGES OR FEES

Policy No. HOS1431070

Effective Date: 08-22-19

12:01 A.M., Standard Time

Named Insured STEPHAN REVAK AND

Agent No. 42002

Policy Fee	\$	175.00
State Tax	\$	56.45
STAMPING FEE	\$	1.75
Total Taxes and Fees	\$	233.20



SCOTTSDALE INSURANCE COMPANY®

ENDORSEMENT NO. _____

Attached to and forming a part of

Policy No. HOS1431070

Named Insured STEPHAN REVAK AND BARBARA REVAK

Endorsement Effective Date 08-22-2019

12:01 A.M., Standard Time

Agent No. 42002

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TOTAL OR CONSTRUCTIVE TOTAL LOSS PROVISION

It is understood and agreed that in the event of a total loss or constructive total loss under this policy, one hundred percent (100%) of the premium associated with the covered property that sustains the total loss or constructive total loss shall be earned in full and no return premium shall be due to the named insured.

AUTHORIZED REPRESENTATIVE

DATE