



Auto, Home & Health Insurance

WALKER INSURANCE AGENCY LLC
3141 SABA LANE
PORT NECHES, TX 77651

Agency Phone: (409) 729-7600

NFIP Policy Number: 0000768216
Company Policy Number: 0000768216
Agent: RONALD WALKER ADMIN



Policy Term: 05/09/2020 12:01 AM through 05/09/2021 12:01 AM
Renewal Billing Payor: INSURED

To report a claim visit or call us at: <https://Nationalgeneral.managemyfloodpolicy.com>
(888) 598-0296

REVISED FLOOD INSURANCE POLICY DECLARATIONS

STANDARD POLICY - DWELLING FORM

DELIVERY ADDRESS	INSURED NAME(S) AND MAILING ADDRESS
CJM LLC DEVELOPMENTS PO BOX 1115 NEDERLAND, TX 77627	CJM LLC DEVELOPMENTS PO BOX 1115 NEDERLAND, TX 77627

COMPANY MAILING ADDRESS	PROPERTY LOCATION
INTEGON NATIONAL INSURANCE COMPANY PO BOX 912063 DENVER, CO 80291-2063	211 SKYLARK AVE BRIDGE CITY, TX 77611-2728

Refer to www.fema.gov/cost-of-flood for more information about flood risk and policy rating.

DESCRIPTION: N/A

RATING INFORMATION

ORIGINAL NEW BUSINESS DATE: 05/09/2020
 REINSTATEMENT DATE: N/A
 BUILDING OCCUPANCY: SINGLE FAMILY
 CONDOMINIUM INDICATOR: NOT A CONDO
 NUMBER OF UNITS: N/A
 PRIMARY RESIDENCE: NO
 ADDITIONS/EXTENSIONS: N - NO ADDITIONS/EXTENSIONS
 BUILDING TYPE: ONE FLOOR
 BASEMENT/ENCLOSURE/CRAWLSPACE TYPE: NO BASEMENT

DATE OF CONSTRUCTION: 01/01/1994
 COMMUNITY NUMBER: 480511 0005 B REGULAR PROGRAM
 COMMUNITY NAME: BRIDGE CITY, CITY OF
 CURRENT FLOOD ZONE: B
 GRANDFATHERED: NO
 FLOOD RISK/RATED ZONE: B
 ELEVATION DIFFERENCE: N/A
 ELEVATED BUILDING TYPE: NON-ELEVATED

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE: LOAN NO: N/A
 SECOND MORTGAGEE: LOAN NO: N/A
 ADDITIONAL INTEREST: LOAN NO: N/A
 DISASTER AGENCY: CASE NO: N/A
 DISASTER AGENCY:

PREMIUM CALCULATION —

	COVERAGE	DEDUCTIBLE	BASIC COVERAGE	BASIC RATE	ADD'L COVERAGE	ADD'L RATE	DED. DISCOUNT/SURCHARGE	PREMIUM
BUILDING	\$225,000	\$4,000	\$60,000	1.110	\$165,000	0.310	(\$194.00)	\$984.00
CONTENTS	\$0	\$0	\$0	1.710	\$0	0.540	\$0.00	\$0.00

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

Endorsement Effective Date: 08/24/2020

ENDORSEMENT PREMIUM: \$0.00

Insured / Mailing Address Changed

ANNUAL SUBTOTAL:	\$984.00
INCREASED COST OF COMPLIANCE:	\$8.00
COMMUNITY RATING DISCOUNT:	0% \$0.00
RESERVE FUND ASSESSMENT:	18.0% \$179.00
PROBATION SURCHARGE:	\$0.00
ANNUAL PREMIUM:	\$1,171.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY SERVICE FEE:	\$50.00
TOTAL:	\$1,471.00
PRORATA PREMIUM ADJUSTMENT:	\$0.00
ADJUSTED ANNUAL PREMIUM:	\$1,471.00

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

Barry S. Karfunkel / President

Jeffrey Weissmann / Secretary

Zero Balance Due - This Is Not A Bill

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

Policy issued by INTEGON NATIONAL INSURANCE COMPANY

Company NAIC: 29742



File: 11116758

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DocID: 134576631

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