

HOMEOWNER POLICY DECLARATIONS

SCOTTSDALE INSURANCE COMPANY

Policy Number

HOS1950330

Home Office:

One Nationwide Plaza Columbus, Ohio 43215

Administrative Office:

18700 North Hayden Road • Scottsdale, Arizona 85255

1-800-423-7675

A STOCK COMPANY

HOS1927441

Renewal of Number

Named Insured and Mailing Address:

NATHAN M MCDERMOTT
3610 AVENUE Q
GALVESTON TX 77550

General Agent:

TEXAS SPECIALTY UNDERWRITERS INC
972-771-5653

Insured's Producer:

DAVID KIMBROUGH INSURANCE AGENCY
317 SOUTH FRIENDSWOOD DRIVE
FRIENDSWOOD, TEXAS 77546
O-281-996-7661
F-281-996-7666

Agent No.:

TSROTX

Program No.:

Policy Period:

From: 03-01-2023

To: 03-01-2024

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: 3610 AVENUE Q, GALVESTON, TX 77550

Property Coverages:	<u>Limits of Liability</u>	<u>Premiums</u>
A—Dwelling	\$ 165,000	\$ 604
B—Other Structures	\$ 76,000	\$ 278
C—Personal Property	\$ 75,000	\$ 275
D—Loss of Use	\$ 33,000	\$ 116
Additional Perils Insured Against:	<u>Limits of Liability</u>	<u>Premiums</u>
	\$	\$
	\$	\$
	\$	\$
Liability Coverages:	<u>Limits of Liability</u>	<u>Premiums</u>
E—Personal Liability	\$ 500,000	\$ 203
F—Medical Payments to Others	\$ 5,000	\$ 18
	\$	\$
	\$	\$
	\$	\$
Optional Coverages:	<u>Limits of Liability</u>	<u>Premiums</u>
Loss Assessment	\$ 1,000	\$ INCLUDED
Water Backup	\$ 25,000	\$ INCLUDED
	\$	\$
	\$	\$

Deductibles: All Other Perils: 1%
WIND/HAIL DED: EXCLUDED

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: 1960 Territory: 004 Fire District or Town: Protection Class: 02
Construction: FRAME No. of Families: 1 Occupancy: PRIMARY
Feet From Hydrant: 999 Miles From Fire Station: 5 Square Feet: 1200

Policy Totals: County: GALVESTON	Sub-Total Premium: \$	1,494.00
Billed to: AGENT	\$	
	\$	
	\$	
	Total Taxes and Fees: \$	362.13
No Flat Cancellations	Total Policy Premium: \$	1,856.13
	Minimum Earned Premium: \$	374.00

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.