#### AMERICAN NATIONAL LLOYDS INSURANCE COMPANY

POLICY NUMBER 42-X-989-5K0-8  $09 - 09 - 2023^{\text{POLICY TERM}}_{\text{ TO}} 09 - 2024$  THIS RENEWAL DECLARATION

REPLACES ALL PRIOR DECLARATIONS, IF ANY, AND WITH POLICY PROVISIONS AND ANY ENDORSEMENTS ISSUED TO FORM A PART THEREOF COMPLETES THIS HOMEOWNERS POLICY

1949 E. SUNSHINE SPRINGFIELD, MISSOURI 65899-0001 (417) 887-0220

INSURED

AND SUBSEQUENT RENEWALS AT 12:01 A.M. (STD)

NAMED INSURED AND P.O. ADDRESS APFFEL, CHRIS 10006 AIRWAYS LN GALVESTON TX 77554-6389

LIENHOLDER/MORTGAGEE

PREMIUM TO BE PAID BY

DISCOUNTS: PROTECTIVE DEVICE

AGENT CUSTOMER SERVICE, CALL PH #281-334-2886 J-K BROWN ENT INC B0638-P 1-375

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

10006 AIRWAYS LN GALVESTON TA 7554-6389 PROPERTY

INSURANCE IS PROV SECTION		ABILITY AND/OR PREMIUM APPLICABLE THERETO LIMITS \$490,200
opariov.	COVERAGE B - OTHER STRUCTURES	\$49,020
	COVERAGE C - PERSONAL PROPERTY COVERAGE D - LOSS OF USE SUBJECT TO MONTHLY MAXIMUM OF \$9,804	\$367,650 \$122,550
SECTION	COVERAGE E - PERSONAL LIABILITY (EACH OCCURRENCE)	\$300,000
	COVERAGE F - MEDICAL PAYMENTS TO OTHERS (EACH PERSON)	\$5,000
CONSTRUC	RATING INFORMATION	LVESTON

- \$5,000 LIMITED FUNGI, OTHER MICROBES, OR ROT REMEDIATION COVERAGE.
- THIS POLICY DOES NOT PROVIDE WIND, HURRICANE AND HAIL COVERAGE. PLEASE CONTACT YOUR AGENT TO OBTAIN COVERAGE THROUGH THE TEXAS WINDSTORM INSURANCE ASSOCIATION.

		LIENHOL	DER(S)/MORTGAGE	E(S)		
		SUBJECT TO THE FOLLO	MING EODMS AND	ENDORSEMENT	S	
SH3.42 SH92764	02-19	SH9194 SH92777	WING FORMS AND 01-12 06-21	-NDO AGENI-NI	SH92565 05-16	l
	TÛTAL					
TOTAL PREMIUMS	\$1480.00				J-K BROWN ENT	INC
DATE	08-04-2023				AUTHORIZED REPRES	ENTATIVE

PRINTED

ENCL #FH883 01-15

#### **ENDORSEMENT DESCRIPTIONS**

ENDONGENIENT DEGONIT HONG						
SI SI SI	13.42 19194 192565 192764 192777	0219 0112 0516 1218 0621	AMERICAN NATL HOMEOWNERS POL WINDSTORM AND HAIL EXCLUSION IDENTITY THEFT PROTECTION HOME SYSTEMS AND SERVICE LINE TEXAS HOME AMENDATORY ENDORS			

# Special Notice to Lienholders and Mortgagees:

This is a continuous form policy. Coverage for the lienholder and/or mortgagee will continue in force until cancelled by written notice.

The company reserves the right to cancel this policy giving the lienholder and/or mortgagee a ten day notice of cancellation.

### IMPORTANT INFORMATION ON HOW TO REPORT A CLAIM

Should you need to report a claim under this policy, please call (Toll-Free) 1-800-333-2860.

Please be prepared to furnish the following information:

- Date and Time of Loss
- Facts of Occurrence
- 2) Location of Loss if other than the residence premises
- Name, Address, and Phone Number of any injured parties 4)
- If applicable, name of law enforcement agency or fire department and the incident number

As a Policyholder, you are required to protect your property from further damage, make reasonable and necessary temporary repairs, and keep an accurate record of repair expenditures.





# **DESCRIPTION OF YOUR HOUSE**

#### NOTICE - REBUILDING COSTS ESTIMATED UNDER IDEAL CONDITIONS

Important information regarding your Declarations Page 2 information for your home.

The listed characteristics of your home/dwelling are based on information gathered from you, to assist you in your insurance purchase. The insured value of your home/dwelling, as reflected in the stated Coverage A amount, is based upon estimated cost of rebuilding your home/dwelling, reflecting the rising trend of such costs. This should be considered the minimum cost to rebuild your home/dwelling under ideal conditions. In the event your home/dwelling is destroyed, your policy will only pay additional monies beyond Coverage A subject to the Extended Replacement, and Building, Ordinance, or Law provisions you have purchased and are filed for your state. The actual cost to rebuild or repair your home/dwelling will vary, especially if the information you have provided is incorrect or incomplete. Rebuilding costs can also vary greatly and are dependent upon: (1) the nature and extent of the damage sustained; (2) the availability of skilled labor and materials; and (3) other market conditions which may exist at the time of loss. If the cost of rebuilding your home/dwelling exceeds the Coverage A amount, Extended Replacement, and Building, Ordinance or Law provisions on your policy, those additional costs will not be covered. We strongly encourage you to review the insured value of your home/dwelling and the Coverage A amount listed on your policy carefully. If you wish to purchase additional coverage, make corrections to the information you have provided, or if you modify or remodel your home/dwelling, please contact your agent immediately.

Address: 10006 AIRWAYS LN GALVESTON, TX 77554-6389  GENERAL INFORMATION  Estimated Replacement Cost ZIP Code Year Built Building Style Building Shape Number of Stories Number of Families Total Living Area - Main Structure Finished Floor Area Exterior Walls, Wood Siding Roofing, Architectural Shingles Attached Structures, Wood Deck	\$490,121.00 77554 1975 1 1/2 Story Rectangular	Code A.D.
Estimated Replacement Cost ZIP Code Year Built Building Style Building Shape Number of Stories Number of Families Total Living Area - Main Structure Finished Floor Area Exterior Walls, Wood Siding Roofing, Architectural Shingles	\$490,121.00 77554 1975 1 1/2 Story Rectangular	Code A.D.
ZIP Code Year Built Building Style Building Shape Number of Stories Number of Families Total Living Area - Main Structure Finished Floor Area Exterior Walls, Wood Siding Roofing, Architectural Shingles	//554 1975 1 1/2 Story Rectangular	Code A.D.
Attached Structures, Attached Garage - SF Special Items, Sash, Wood with Glass, Standard Special Items, Door, Wood, Exterior Partitions, Drywall - Textured Partitions, Stud, 2 x 4 Partitions, Door, Hollow Core, Birch Wall Coverings, Paint Ceilings, Drywall - Textured Floor Coverings, Hardwood Floor Coverings, Hardwood Floor Coverings, Ceramic Tile Floor Coverings, Ceramic Tile Floor Coverings, Molding, Base, 4 in. Interior, Kitchen - Builder's Grade Interior, Full Bath - Builder's Grade Interior, Fireplace - Single Interior, Fireplace - Single Interior, Staircase, Straight, Softwood HVAC, Heating System - Average Cost HVAC, Central Air Cond Same Ducts Miscellaneous, 200 amp Service, Standard Foundation Type, Piers Foundation Type, Slab on Grade Foundation Materials - Main, Concrete Roof Style/Slope, Gable, Slight Pitch Roof Shape, Simple/Standard Floor/Ceiling Structure, Wood Joists & Sheathing Roof Structure, Rafters, Wood w/Sheathing	100 100 496 704 100 20 100 100 100 14 72 14 100 100 100 100 100 100 100 100 100	Square Fee Square Fee Percent Percent Square Fee Square Fee Square Fee Percent Quantity Percent



# **DESCRIPTION OF YOUR HOUSE**

Insured: APFFEL, CHRIS Policy Number: 42-X-989-5K0-8

Address: 10006 AIRWAYS LN GALVESTON, TX 77554-6389

# GENERAL INFORMATION

Exterior Wall Framing, Stud, 2 x 4
Construction Type
Site Access, Flat Area/Easy Access
Ceiling Height, Wall Group 1, Wall Height
Ceiling Height, Wall Group 1, Percent of Wall

1 Standard Terrain

100 Percent

8.00 Feet 100 Percent

**DETACHED STRUCTURES** 

Detached Structures, Pool, In-Ground Detached Structures Cost

320 Square Fee \$20,772.00 US Dollars

Be sure to review Coverage B on the declaration page to confirm you have adequate coverage for all structures on the insured property other than your dwelling.

CONSTRUCTION ASSUMPTIONS

Degree of Slope

0-14 Degrees

ADDITIONAL FACTORS

Cost of Labor, Building Materials and Supplies \$360,096.00 US Dollars Cost of Permits and Architect's Plans \$32,048.00 US Dollars \$78,428.00 US Dollars Inflationary Adjustment \$19,549.00 US Dollars \$19,549.00 US Dollars \$19,549.00 US Dollars

For updates or corrections please contact your agent. J-K BROWN ENT INC 3032 MARINA BAY DR STE  $100\,$  LEAGUE CITY TX 77573-4668 PH 281-334-2886 State License 16963

CORELOGIC COSTS INCLUDE LABOR AND MATERIAL, NORMAL PROFIT AND OVERHEAD AS OF DATE OF REPORT. COSTS REPRESENT GENERAL ESTIMATES WHICH ARE NOT TO BE CONSIDERED A DETAILED QUANTITY SURVEY. THESE COSTS INCLUDE GENERALITIES AND ASSUMPTIONS THAT ARE COMMON TO THE TYPES OF STRUCTURES REPRESENTED IN THE SOFTWARE.



# PAGE 3 OF THE DECLARATION (FORM SM-126)

# THE FOLLOWING DEDUCTIBLES APPLY TO YOUR POLICY:

\$4,902 All Peril DEDUCTIBLE

### OTHER DEDUCTIBLES THAT MAY APPLY:

Vacancy Deductible: \$24,510

If your dwelling is vacant for more than 60 consecutive days prior to a loss, and we are not notified of the vacancy in advance, an additional vacancy deductible will apply to any covered loss.

SH-92565 Identity Theft Protection: No deductible applies to stolen identity losses.

SH-92764 Home Systems and Service Line: \$500





# **Liability Exposures Declarations Page - A**

(Refer to Declarations Page 1 for Limit of Liability)

The following is our record of information you have provided about your liability exposures. Your coverage may be affected by the accuracy of the information shown. Please review this information and notify your agent if any of this information is inaccurate or changes. Liability coverage may be excluded or limited for risk exposures which are not identified below. Failure to disclose risk exposures or attempts to conceal risk exposures may be deemed grounds for non-renewal.

DOG AND EQUINE ANIMAL LIABILITY EXPOSURES:

DOGS - No

**EQUINE - No** 

Your policy will be reduced to a maximum of \$10,000 limit on liability coverage for dogs and equine animals that are not listed on this page. Other exclusions may also apply. Please refer to Section II - Exclusions in your policy for all animal exclusions.

PERSONAL LIABILITY EXPOSURES:

TRAMPOLINE - No

SKATEBOARD RAMP - No

SWIMMING POOL - Yes, In ground, Fenced

SILOS - No

**BUSINESS ON PREMISES - No** 

NUMBER OF CHILDREN FOR DAY CARE - No

ADULT DAY CARE - No

INCIDENTAL FARMING (LESS THAN \$2,000 ANNUAL GROSS RECEIPTS, AND 4 OR FEWER LARGE LIVESTOCK) - No

GENERATING POWER ON PREMISES - No

