## Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

**Policy Period:** 03/01/2018

03/01/2019

For payment status, call: (888) 245-7274

Original New Business Effective Date: 12/31/2006 Reinstatement Date: 03/01/2018

These Declarations are effective as of: 03/01/2018 at 12:01 AM

Form: General

Insured Name and Mailing Address:

PO BOX 229045

HOLLYWOOD, FL 33022-9045

Producer Name and Mailing Address:

8333 NW 53RD ST STE 600 MIAMI, FL 33166-4789

ARTHUR J GALLAGHER & COMPANY

NAIC Number: 19682

Processed by:

NFIP Policy Number: 8702920566 Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 1621 N 14TH AVE RAS PUMP

HOLLYWOOD, FL 33020

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X

Current Zone: AE Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction Program Type: Regular **Building Description:** 

Other Non-Res. One Floor Slab On Grade RAS PUMP

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$777,251

Number of Units:

Type	©overage	Rates	Deduct	Discount	Sub Total	Paning earn	ladon
Building:	500,000	1.000 / .290	1,250	27	2,666.00	Premium Subtossis	2,666.00
Contents						Multiplier	
Contents			•			ICC Premium:	4.00
Location						CRS Discount:	267.00
-						Reserve Fund Assmi-	360.00
						GPLAA Surcharge	250.00
						Redeval Policy Fee	50.00
						Probation Surcharge	.00
						Sodorsement Amount	.00
Covera	ge Limitations M	lay Apply. See Your	s.	Total Premium Paid:	3,063.00		

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

87029205662018 02/01/2018

Hartford Insurance Company of the Midwest

HIC2DEC\_AGT\_3R\_OXP\_000016472609

Policy Number: 87029205722018

## FLOOD POLICY DECLARATIONS

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

Policy Period: 03/01/2018 03/01/2019

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Producer Name and Mailing Address:

Form: General

MIAMI, FL 33166-4789

For payment status, call: (888) 245-7274

These Declarations are effective as of: 03/01/2018 at 12:01 AM

 $\begin{array}{c} \textbf{Insured Name and Mailing Address:} \\ \textbf{CITY OF HOLLYWOOD} \end{array}$ 

P.O. Box 2057 Kalispell MT 59903-2057

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NAIC Number: 19682 NFIP Policy Number: 8702920572

Processed by: Agent/Agency #: 08172-00015-000 Flood Insurance Processing Center

Reference #:

Phone #: (305) 592-6080

Property Location:

**Building Description:** Other Non-Res. One Floor Slab On Grade RAS PUMP #3 RAS PUMP #3

1621 N 14TH AVE RAS PUMP #3 HOLLYWOOD, FL 33020

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AE

Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: N/A Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$1,084,616

Number of Units:

	Туре	Coverage	Rates		Deduct	Discount	Sub Total	Premium Calc	ulation
7	Building	500,000	1.000 /	.290	1,250	. 27	2,666.00	Pizemeum Siloneerikamaa	2,666.00
20	Contents:							Multiplien	
2	Contents							16.C Premium	4.00
& Kating	Location							CRS Discount	267.00
- ⊗3								Reserve Fund Assmt	360.00
<b>b</b> ))								HPJAA Suircharge	250.00
ē								Rederal Policy Fee	50.00
Coverage								Probation Surcharge:	.00
		-						Endorsement Amount:	.00
	Coverag	ge Limitations N	lay Apply. Se	e Your	Policy For	n for Detail	s.	Total Premium Paide	3,063.00

First Mortgage:

Loss Payee:

Second Mortgage:

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

Policy Period: 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

These Declarations are effective

For payment status, call: (888) 245-7274

as of: 03/01/2018 at 12:01 AM

Form: General

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

Insured Name and Mailing Address: CITY OF HOLLYWOOD

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920569 Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

1621 N 14TH AVE RAS PUMP #4

HOLLYWOOD, FL 33020

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AE

Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction

Program Type: Regular

**Building Description:** 

Other Non-Res. One Floor Slab On Grade RAS PUMP #4 RAS PUMP #4

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$972,587

Number of Units:

Type   Coverage   Rates   Deduct   Discount   Sub-Total   Premium Calculation	
Contents Multiplier:  Contents 100 Premium 4.00	٦
Contents 10 Premium 4.00	٦
	7
Location CRS Discount: 267.00	7
Reserve Fund Assmt. 360.00  HFIAA Surcharge 250.00  Federal Policy Fee: 50.00  Probation Surcharge00  Endorsement Amount:00	
HPTAA Surcharge 250.00	7
Federal Policy Fee: 50.00	7
Probation Surcharge: .00	7
Endorsement Amount: .00	٦
Coverage Limitations May Apply. See Your Policy Form for Details.  Total Premium Paid: 3,063.00	

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

87029205692018 02/01/2018

Mortgage Info

Hartford Insurance Company of the Midwest

HIC2DEC\_AGT\_3R OXP\_000016472610

Policy Number: 87029205642018

# FLOOD POLICY DECLARATIONS

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

Policy Period: 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General

For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

Insured Name and Mailing Address: CITY OF HOLLYWOOD

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920564

Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

1621 N 14TH AVE REFUSE STORAGE

HOLLYWOOD, FL 33020

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: X

Current Zone: AE Community Number: 12 5113 0309 F

Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction

Program Type: Regular

**Building Description:** 

Other Non-Res. One Floor Slab On Grade REFUSE STORAGE

REFUSE STORAGE

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost: Number of Units:

\$453,830

Coverage & Rating

	Coverage	Rates	Deduct	Discount	Sub l'otal	Premium Calcul	ation
Building:	450,000	1.000 / .290	1,250	25	2,523.00	Premium Subjetal	2,523.00
Contentis;						Mühphee	
Contents -						ICC Brem tum:	5.00
ocation:						(PRS Discount	253.00
						Reserve Fund Assmt.	341.00
						LLPLA/A/Suitchenge	250.00
						Hederal Policy Dee	50.00
						Probation Surcharge	.00
						Dadorsement Amount	.00
Coverag	e Limitations N	May Apply. See Your	Policy For	m for Details	š.	i great decembration de la comp	2,916.00

First Mortgage:

Loss Payee:

Second Mortgage:

**Disaster Agency:** 

Terence Shields, Secretary

### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

Policy Period: 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

**Insured Name and Mailing Address:** 

For payment status, call: (888) 245-7274

CITY OF HOLLYWOOD PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920565 Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

1621 N 14TH AVE REFUSE WATER CONTROL

HOLLYWOOD, FL 33020

Property Info

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AE

Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction

Program Type: Regular

**Building Description:** 

Other Non-Res. One Floor Slab On Grade

REFUSE WATER CONTROL REFUSE WATER CONTROL

Newly Mapped into SFHA:

Elev Diff: N/A Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$5,172,552

Number of Units:

	Type	Coverage	ini ili Raftes	Deduct	Discount	Sub Total		culation
	Building:	500,000	1.000 / .290	1,250	27	2,666.00	i Bremium Subjects Labor	5,395.00
Rating	Contents:	282,000	1.310 / .600	1,250	28	2,729.00	Michighier	
	Contents		loor Only Abo	ve			ICO Premium:	4.00
	Location:	Ground L	evel				CRS Discount	540.00
9 9			•				Reserve Eund Assm	729.00
8 8 9							HETAA Surcharge	250.00
(Over							Rederal Policy Fee:	50.00
<b>.</b>							Probation Surcharge:	.00
							Endorsement Amount	.00
	Coverag	e Limitations M	lay Apply. See You	r Policy For	m for Details	s.	Total Premium Paid:	5,888.00

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Teneme Shields Terence Shields, Secretary

87029205652018 02/01/2018

Hartford Insurance Company of the Midwest

HIC2DEC\_AGT\_3R OXP\_000016472608

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest



Type: Renewal

Standard Policy

Policy Period: 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General

010101 For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

Insured Name and Mailing Address:

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920563

Agent/Agency #: 08172-00015-000

Reference #:

Address Info

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

1621 N 14TH AVE SLUDGE BLDG

HOLLYWOOD, FL 33020

Primary Residence: N

Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AE

Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Pre-Firm Construction

Program Type: Regular

**Building Description:** 

Other Non-Res. One Floor Slab On Grade Main House SLUDGE BLDG

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$2,624,581

Number of Units:

	Туре :::	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calco	lation
	Building	500,000	1.000 / .290	1,250	27	2,666.00	PiemeneSubresil	2,666.00
& Rating	Contents						Mulhipi comensissississississi	
	Contents						100 Premium I	4.00
Ä	Location:						CPAS Discountain	267.00
<b>3</b>							Reserve Fund Assmi	360.00
Coverage							HHAVA Surenanger	250.00
- <b>5</b>							Federal Policy Fee:	50.00
ر ق							Probation Surcharge	.00
							Endorsement Amount	.00
	Coverag	e Limitations M	lay Apply. See Yo	our Policy For	m for Detail:	S.	i votat Bremium Reid-	3,063.00

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Terence Shields, Secretary

Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest

Standard Policy

Type: Renewal

Policy Period: 03/01/2018 To 03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General Property

For payment status, call: (888) 245-7274

These Declarations are effective as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

Insured Name and Mailing Address: CITY OF HOLLYWOOD PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920562 Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305)592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

1621 N 14TH AVE TRUCK SCALE HOLLYWOOD, FL 33020

Building Description: Other Non-Res.
One Floor Slab On Grade TRUCK SCALE

TRUCK SCALE

Primary Residence: N

Premium Payor: Insured

Current Zone: AE

Flood Risk/Rated Zone: X Community Number: 12 5113 0309 F Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost:

\$79,333

Number of Units:

	- O - VI				3100000 On O 20001								
	Type Co	werage	Re	tes		Deduct	Discount	Sub Total	Premjum Calcul	ation			
CONCLESS WALLES	iBiniiding.iii 8	80,000	1.000	/ .	.290	1,000		800.00	Eremium Subtotal	800.00			
	Contents:								Multiplier				
	Contents Location:						•		i(dC) nemum	5.00			
	Location								GRSDiscount	81.00			
									Reserve Rund Assmi	109.00			
										250.00			
									Lederal Rollov Feetman	50.00			
									Erobation Surcharge	.00			
									lincorsement Amount	.00			
	Coverage Lir	mitations M	ay Apply	. Se	e You	Policy For	m for Details	•	(Köfal Breminin Raids)	1,133.00			

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Terence Shills Terence Shields, Secretary

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest

Newly Mapped to SFHA



Type: Renewal

**Policy Period:** 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General

For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600 MIAMI, FL 33166-4789

**Insured Name and Mailing Address:** 

CITY OF HOLLYWOOD PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920601 Agent/Agency #: 08172-00015-000

Reference #:

Property Info

Coverage & Rating

ortgage Info

Phone #: (305) 592-6080

NAIC Number: 19682

**Building Description:** 

Processed by:

Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

2207 RALEIGH ST HOLLYWOOD, FL 33020-1631

Other Non-Res. One Floor

No Basement/Enclosure/Crawlspace

NON RES

HPD NETWORK CTR

Elev Diff: N/A

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AH

Community Number: 12 5113 0567 H Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction Program Type: Regular

Includes Addition(s) and Extension(s)

Newly Mapped into SFHA: 08/18/2014

Replacement Cost:

Elevated Building: N

\$322,278

Number of Units:

Туре	Coverage	Rates	Deduct	Discount	Sub Total	Premium Cald	ulation
Building:	350,000		1,250			PromineSpigrosile	1,346.00
Contents:	50,000		1,250			Multiplier	437.00
Contents	Lowest F	loor Only Abov	re			ICC Premium	5.00
Location:	Ground L	evel				CRS Discount	.00
		1				Reserve Fund Assmi	268.00
						HIPTAVA Surcharge	250.00
						Federal Policy Fee:	50.00
						Probation Surcharge:	.00
		÷				Endorsement Amount	.00
Coverag	ge Limitations M	lay Apply. See Your	Policy For	m for Detail	s.	Tota Premium Paid:	2,356.00

First Mortgage:

Loss Payee:

**Second Mortgage:** 

## Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest Newly Mapped to SFHA



120101

Type: Renewal

Policy Period: 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Form: General

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600

MIAMI, FL 33166-4789

Insured Name and Mailing Address: CITY OF HOLLYWOOD

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920606

Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

Property Location:

2310 N 23RD AVE

HOLLYWOOD, FL 33020-2010

**Building Description:** 

Other Non-Res. One Floor

No Basement/Enclosure/Crawlspace

BOGGS FIELD

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AH

Community Number: 12 5113 0567 H Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Post-Firm Construction Program Type: Regular Newly Mapped into SFHA: 08/18/2014

Elev Diff: N/A

Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$1,025,087

Number of Units:

	Туре	Coverage	Rafes	Deduct	Discount	Sub Total	Premium Cal	culation
Coverage & Rating	Bittiribing	500,000		1,250			Premium Subtotal	1,564.00
20	Contents:	50,000		1,250			Molnipice	508.00
2	Contents	Lowest F	loor Only Abo	ve			le (e Paemiuna)	4.00
A	Location:	Ground I	evel				GRS Discount	.00
- <b>2</b>							Reserve Fund Assint:	311.00
ğı							HETAA Surchange	250.00
6							Federal Policy Fee:	50.00
<b>j</b>							Probation Surcharge:	.00
							Endorsement Amount	.00
	Coverag	e Limitations N	Yay Apply. See You	r Policy For	m for Detail:	S.	Tropil Scenium Paics	2,687.00

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Terence Shields.
Terence Shields, Secretary

#### Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest Newly Mapped to SFHA



Type: Renewal

**Policy Period:** 03/01/2018

03/01/2019

Original New Business Effective Date: 12/31/2006

Reinstatement Date: 03/01/2018

Form: General

For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600 MIAMI, FL 33166-4789

Insured Name and Mailing Address:  ${\tt CITY}$  of Hollywood

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 8702920596

Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

Processed by:

Flood Insurance Processing Center

P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

6197 TAFT ST HOLLYWOOD, FL 33024-6038

**Building Description:** 

Other Non-Res. One Floor

No Basement/Enclosure/Crawlspace

WEST ANNEX PARKS

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone: AH

Community Number: 12 5113 0564 H Community Name: HOLLYWOOD, CITY OF

Grandfathered: Yes Pre-Firm Construction

Program Type: Regular

Newly Mapped into SFHA: 08/18/2014

Elev Diff: N/A Elevated Building: N

Includes Addition(s) and Extension(s)

Replacement Cost:

\$548,541

Number of Units:

	Туре	Coverage	Rates	Deduct	Discount	Sub Total Pre	mium Calc	ulation
	Building	500,000		1,250		12/2000	iotal	1,564.00
rage & Rating	Contents	50,000		1,250		Multiplieres		508.00
<b></b>	Contents	Lowest F	loor Only Abov	·e		ICC Premiun		4.00
4	Location	Ground I	level			CRS Discoun	ttiii iiiiiiiiii	.00
න						Reserve Func	Assmt:	311.00
<b>50</b>						HILIAA Surci	arge:	250.00
						Federal Polic	y Feeilini	50.00
Š						Probation Su	rcharge:	.00
						Spidorsement	Amount:	.00
	Coverag	e Limitations N	Лау Apply. See Your	Policy For	m for Detail	. Tota Fremi	um Paid:	2,687.00

First Mortgage:

Loss Payee:

Second Mortgage:

## Florida Intracoastal Underwriters

Issued By: Hartford Insurance Company of the Midwest

Standard Policy



Type: Renewal

Policy Period: 03/01/2018 To 03/01/2019

Original New Business Effective Date: 03/01/2015

Reinstatement Date: Form: General Property

010101 For payment status, call: (888) 245-7274

These Declarations are effective

as of: 03/01/2018 at 12:01 AM

Producer Name and Mailing Address:

ARTHUR J GALLAGHER & COMPANY 8333 NW 53RD ST STE 600 MIAMI, FL 33166-4789

Insured Name and Mailing Address: CITY OF HOLLYWOOD

PO BOX 229045

HOLLYWOOD, FL 33022-9045

NFIP Policy Number: 9905544766 Agent/Agency #: 08172-00015-000

Reference #:

Phone #: (305) 592-6080

NAIC Number: 19682

**Building Description:** 

Processed by:

Other Non-Res. Split Level

Split Level City Fire Station

Flood Insurance Processing Center P.O. Box 2057 Kalispell MT 59903-2057

**Property Location:** 

FIRE STATION 40 707 S OCEAN DR HOLLYWOOD, FL 33019-2009

Primary Residence: N Premium Payor: Insured

Flood Risk/Rated Zone: AE **Current Zone:** 

Community Number: 12 5113 0588 H Community Name: HOLLYWOOD, CITY OF

Grandfathered: No Post-Firm Construction Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: Elevated Building: N

No Addition(s) and Extension(s)

Replacement Cost:

\$7,329,000

Number of Units:

Coverage & Rating

2.946	coverage		Deauct	Discount	oud Lotai	Premium Caleu	llation
Building:	500,000	6.580 / .310	5,000	1,378-	11,145.00	Fremium Subsolale	15,918.00
Contents:	176,400	3.510 / .370	5,000	590-	4,773.00	Mültipiter:	
Contents		Floor Only Abov	re			ICC Premium	24.00
ocation	Ground I	Level				eH-Sphiscounts	.00
		>				Reserve Fund Assint	2,391.00
						EHITAVA Sundhange	250.00
						Rederal Policy Fee:	50.00
						Probation Surcharge	.00
						Endorsement Amount	.00
Coverag	e Limitations N	May Apply. See Your	s.	Positive manuscrate	18,633.00		

First Mortgage:

Loss Payee:

Second Mortgage: