HOMEOWNERS DECLARATIONS

THIS IS NOT A BILL

POLICY NUMBER E004792083

> Renewal Issued On: 08/19/2020

Payment notice will be sent separately to: The insured

Insured JOEL LUKOW Judy Lukow 8730 ROTHBURY LN BOYNTON BEACH, FL 33472-5069 AGENCY FLS151
Neumann Resources Inc
3460 FAIRLANE FARMS ROAD STE 2
WELLINGTON, FL 33414

PHONE NUMBER: (561) 790-0558

POLICY PERIOD: 10/11/2020 to 10/11/2021. Each period begins and ends at 12:01 AM standard time at the insured location.

INSURED LOCATION: Same as address shown under Insured.

Coverage is provided where a premium or limit is shown for t he coverage.

SECTION I - PROPERTY COVERAGE COVERAGE A - Dwelling		SECTION II - LIABILITY COVERAGE COVERAGE E - Personal Liability	\$300,000
COVERAGE B - Other Structures	\$7,200	Each Occurrence	
COVERAGE C - Personal Property		~	\$5,000
COVERAGE D - Loss of Use	\$72,000	Each Person	

BREAKDOWN OF PREMIUM: Charges	<u>Limit</u>	<u>Premium</u> \$8,633.00
Section I and II Premium Age of Dwelling Surcharge		\$356.00 Incl
Catastrophic Ground Cover Collapse Coverage Limited Fungi, Wet or Dry Rot, or Bacteria Coverage (Each Loss/Aggregate)	\$10,000/\$20,000	Incl
Coverage E Aggregate Sublimit Loss Assessment Coverage	\$50,000 \$1,000	Incl \$20.00
Personal Injury Coverage Personal Property Replacement Cost without Holdback Screened Enclosure Special Limitation (Total Limit)	\$10,000	\$583.00 Incl
Emergency Management Preparedness and Assistance Trust Fund (EMPAT) Fee Managing General Agency (MGA) Fee		\$2.00 \$25.00

		<u>Premium</u>
<u>Credits</u>		-\$143.00
Age of Insured Credit		-\$98.00
Age of Roof Credit		-\$346.00
Building Code Effectiveness Grading Schedule (BCEGS) Credit		-\$391.00
Deductible Options		-\$72.00
Loss Free Credit	100/	* .
Ordinance or Law Coverage	10%	-\$113.00
Protective Devices Credit		\$127.00
Protective Devices Credit		-\$4,888.00
Residential Windstorm Loss Mitigation Devices Credit		-\$209.00
Secured Community Credit		-\$47.00
Sinkhole Exclusion		Incl
Unscheduled Other Structures - Decreased Limit		

Total Policy Premium:	\$3,185.00





RENEWAL INVOICE

Due Date

05/03/2020

Invoice Number:

79522231 SUBMITTED

Page 1 of 1

Risk Loc

JOEL LUKOW

JUDY LUKOW

8730 ROTHBURY LANE

Boynton Beach, FL 33472

Bill To

JOEL LUKOW

8730 ROTHBURY LANE

Boynton Beach FL 33472

Agent

USAA Insurance Agency, Inc

USAG03

(800) 531-0014

9800 Fredericksburg Bldg H -SVC-W

San Antonio, TX 78288

Address

Payment Burns & Wilcox Ltd.

25917 Network Place

Chicago, IL 60673-1259

PLEASE NOTE: The current policy will automatically expire if payment is not received by the Due Date shown above.

2UO0146409	05/03/2020	05/03/2021	National Casual	ty Company	
Line Code		Tran Code	Effect	ive Date	Amount
PERSONAL UMBRELLA		Premium 05/0		03/2020	\$323.00
			Invoice Total:		\$323.00
Please make (JEWAL	check payable to "Bu	rns & Wilcox, Ltd."		Amount Due:	\$323.00

Please include completed documents with payment

CK H 5182



Online Learning Certificate

This certifies that

John Pala Liceue Numberia

Has successfully completed the Final Exam for

HOME INSPECTION - COMPLETE 14 HOUR C.E. COURSE - v2

Count Namber 0000319
On 05-10-2016

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RICK SCOTT GOVERNOR

KEN LAWSON SECRETARY

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION HOME INSPECTORS LICENSING PROGRAM

LICENSE NUMBER

HI7581

The HOME INSPECTOR
Named below IS CERTIFIED
Under the provisions of Chapter 468 FS
Expiration date: JUL 31, 2018

PALA JOHN P 28 FOREST HILLS LANE BOCA RATON FL 33421





ISSUED 05/12/2016

DISPLAY AS REQUIRED BY LAW

SEQ# 11805120000690

Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy

Inspection Date: 9	9/19/2016				
Owner name and I	ohone #: Joel ar	nd Judy Lukow 973-85	1-6067		
Complete Address	: 8730 Rothbury	Ln, Boynton Beach, FL	33472		ear of Home: 1996
Email: judylukow@	Paol.com				# of Stories: 1
Insurance Compan	y: Unknown				Policy #: Unknown
			<u> </u>		
accompany this for through 7. The in 1. Building Code the HVHZ (Mia A. Built in 6 date after 3 X B. For the provide a p C. Unknown 2. Roof Covering	rm. At least one surer may ask as Was the structur ami-Dade or Brow compliance with the sure of the su	ward counties), South Floring he FBC: Year Built Permit Application Date it in compliance with the with a date after 9/1/1994, the requirements of Answering types in use. Provi	pany this form to validated the mitigated feature the Florida Building Code (SFBC). For homes built in 2002/2 (MM/DD/YYYY). SFBC-94: Year Built 14. Permit Application Daver "A" or "B".	te each attribute n tre(s) verified on the de (FBC 2001 or late-94)? 2003 provide a permanent of the (MM/DD/YYYY)	parked in questions 3 is form. For OR for homes located in a puilt in 1994, 1995, and 199 Product Approval number
OR Year of Ori covering identif	ied.	Replacement OR indicate Permit Application Date	that no information was FBC or MDC Product Approval #	available to verify co Year of Original Installation Replacement	No Information
□ 1 Ass	ohalt/Fiberglass Shingle				
_	ncrete/Clay Tile	3/18/2016 attached			
_		3/18/2016 anacned			
. 3. Meta					
]
5. Mem					
6. Other					
installation B. All roof covroofing per C. One or mor D. No roof cov	n OR have a roofing of the original original of the original origi	ove meet the FBC with a ng permit application date ami-Dade Product Approvite 9/1/1994 and before 3 to not meet the requirement of Answer "A	e on or after 3/1/02 OR the val listing current at time s/1/2002 OR the roof is or nots of Answer "A" or "B" a" or "B".	te roof is original an of installation OR (f iginal and built in 1	d built in 2004 or later. For the HVHZ only) a
A. Plywood by staples of shinglesC mean uplift	l/Oriented strand or 6d nails spaced OR- Any system of less than that req	at 6" along the edge and f screws, nails, adhesives, uired for Options B or C l	ng attached to the roof trude 12" in the fieldOR- E other deck fastening systoelow.	satten decking suppo em or truss/rafter sp	naximum of 24" inches o.c.) orting wood shakes or wood acing that has an equivalent
24"inches o other deck t maximum o	.c.) by 8d common fastening system of f 12 inches in the	n nails spaced a maximun or truss/rafter spacing that field or has a mean uplif	n of 12" inches in the field t is shown to have an equal tresistance of at least 102	dOR- Any system of ivalent or greater ro 3 psf.	offer (spaced a maximum of of screws, nails, adhesives, esistance 8d nails spaced a
24"inches o decking wit	.c.) by 8d commo h a minimum of 2	n nails spaced a maximur 2 nails per board (or 1 nail	n of 6" inches in the field per board if each board i	OR- Dimensional s equal to or less that	rafter (spaced a maximum of lumber/Tongue & Groove in 6 inches in width)OR- own to have an equivalent
•		Address 8730 Rothbury	Ln, Boynton Beach, FL		-

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

Page 1 of 4

D. Reinforced Concrete Roof Deck.	or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplif 182 psf.	t resistance of at least
E. Other:		
F. Unknown or unidentified. G. No attic access. Rotoft Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within 5 fect of the inside or outside corner of the roof in determination of WEAKEST type) A. Too Nails Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D Minimal conditions to qualify for rategories B, C, or D. All visible metal connectors are: X. Secured to russ/rafter with a minimum of three (3) and is, and X. Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corresion. B. Clips Metal connectors that do not wrap over the top of the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails. X. C. Single Wraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 12 nail on the opposing side. D. Double Wraps Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter, is secured with a minimum of 12 nails on the front side, and a minimum of 12 nail on the opposing side. D. Double Wraps Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter, is secured with a minimum of 12 nails on the front side, and a minimum of 12 nails on the font side, and is secured to the opposing side. D. Double Wraps Metal Connectors consisting of a single strap that wraps over the top of the truss		
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Total length of non-hip features:).
B. Flat Roof Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of less than 2:12. Roof are with slope less than 2:12 sg ft; Total roof area sg ft X. C. Other Roof Any roof that does not qualify as either (A) or (B) above. 6. Secondary Water Resistance (SWR): standard underlayments or hot-mopped felts do not qualify as an SWR A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplement means to protect the dwelling from water intrusion in the event of roof covering loss. B. No SWR X. C. Unknown or undetermined Inspectors Initials JP_Property Address 8730 Rothbury Ln, Boynton Beach, FL 33472 This verification form is valid for up to five (5) years provided no material changes have been made to the structure.		
less than 2:12. Roof are with slope less than 2:12 sg ft; Total roof area sg ft X C. Other Roof Any roof that does not qualify as either (A) or (B) above. 6. Secondary Water Resistance (SWR): standard underlayments or hot-mopped felts do not qualify as an SWR A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplement means to protect the dwelling from water intrusion in the event of roof covering loss. B. No SWR X C. Unknown or undetermined Inspectors Initials		
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B. No SWR X C. Unknown or undetermined Inspectors Initials JP_Property Address 8730 Rothbury Ln, Boynton Beach, FL 33472 This verification form is valid for up to five (5) years provided no material changes have been made to the structure.		lect the
X C. Unknown or undetermined Inspectors Initials JP_Property Address 8730 Rothbury Ln, Boynton Beach, FL 33472 This verification form is valid for up to five (5) years provided no material changes have been made to the structure.		
This verification form is valid for up to five (5) years provided no material changes have been made to the structure.		
	Inspectors Initials _JP_Property Address 8730 Rothbury Ln, Boynton Beach, FL 33472	_

_	otection level for ALL Glazed openings and (b) check the protection level or .3) as applicable.	el for all No	on-Glaze	d openings	s (.1,	,	•	
0	pening Protection Level Chart		Glazed O	penings			Glazed enings	}
ope for	ce an "X" in each row to identify all forms of protection in use for each ening type. Check only one answer below (A thru X), based on the weakest m of protection (lowest row) for any of the Glazed openings and indicate weakest form of protection (lowest row) for Non-Glazed openings.	Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors	
N/A	Not Applicable- there are no openings of this type on the structure		X	Х	X			Í
А	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						Х	
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)	Χ						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007	I distinguish to the soul	and the second		write Mile			
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM EA 108, or PA/TAS 20							
N	Opening Protection products that appear to be A or B but are not verified							
	Other protective coverings that cannot be identified as A, B, or C							
Х	No Windborne Debris Protection	,				Х		
	 (Level A in the table above). Miami-Dade County PA 201, 202, and 203 Florida Building Code Testing Application Standard (TA American Society for Testing and Materials (ASTM) E 1 			96				
	 Southern Standards Technical Document (SSTD) 12 							
	 For Skylights Only: ASTM E 1886 and ASTM E 1996 							
	 For Garage Doors Only: ANSI/DASMA 115 							
	A.1 All Non-Glazed openings classified as A in the table above, or no No	on-Glazed op	oenings ex	ist				
	A.2 One or More Non-Glazed openings classified as Level D in the table X in the table above	above, and 1	no Non-Gl	azed openir	ngs classi	ified as L	evel B, C, I	N, or
	A.3 One or More Non-Glazed Openings is classified as Level B, C, N, o	r X in the tal	ole above					
	B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb L protected, at a minimum, with impact resistant coverings or products I system of the State of Florida or Miami-Dade County and meet the re Missile Impact" (Level B in the table above):	listed as win	adborne o	lebris prot	ection d	levices in	the prod	uct approva
	 ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 1 	b.) SSTD						
	• SSTD 12 Large Missile – 4 lb. to 8 lb.)							
	• For Skylights Only: ASTM E 1886 and ASTM E 1996 (_						
	B.1 All Non-Glazed openings classified as A or B in the table above, or n							
	B.2 One or More Non-Glazed openings classified as Level D in the table table above	above, and n	io Non-Gla	zed openin	igs classi	fied as Le	evel C, N, o	r X in the
	B.3 One or More Non-Glazed openings is classified as Level C, N, or X is	n the table a	bove					
-	C. Exterior Opening Protection- Wood Structural Panels meeting blywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 20 C.1 All Non-Glazed openings classified as A, B, or C in the table above C.2 One or More Non-Glazed openings classified as Level D in the table above C.3 One or More Non-Glazed openings is classified as Level N or X in the	007 (Level or no Non-G above, and r	C in the t lazed oper to Non-Gla	able above ings exist	€).			in the table
Inspe	ctors Initials _ <i>JP</i> _Property Address							
_	verification form is valid for up to five (5) years provided no materia	al changes	have bee	n made to	the str	ucture.		
	B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155	6					ge 3 of 4	

7. Opening Protection: What is the weakest form of wind borne debris protection installed on the structure? First, use the table to determine the weakest form of protection for each category of opening. Second, (a) check one answer below (A, B, C, N, or X) based upon the lowest

N. Exterior Opening Protection (unverified shutter sy protective coverings not meeting the requirements of Ans with no documentation of compliance (Level N in the table)	wer "A", "B", or C" or sy	
N.1 All Non-Glazed openings classified as Level A, B, C,		Non-Glazed openings exist
N.2 One or More Non-Glazed openings classified as Level the table above	D in the table above, and no	Non-Glazed openings classified as Level X in
N.3 One or More Non-Glazed openings is classified as Level	X in the table above	
X None or Some Glazed Openings One or more Glaze		Level X in the table above.
	12	
MITIGATION INSPECTIONS MUST BE Section 627.711(2), Florida Statutes, provide		
Qualified Inspector Name. John Pala	icense Type: Home Inspector	LicenseorCertificate#: HI7581
Inspection Company: Seaside Home Inspections		Phone: 561 654 5496
Oualified Inspector – I hold an active license as a: (cl	neck one)	
x. Home inspector licensed under Section 468.8314, Florida Statute mitigation training approved by the Construction Industry Licensin	s who has completed the sta	
Building code inspector certified under Section 468.607, Florida S		, protection, statement
☐ General, building or residential contractor licensed under Section ☐ Professional engineer licensed under Section 471.015, Florida State	489.111, Florida Statutes.	
Professional architect licensed under Section 481.213, Florida Sta	tutes.	
Any other individual or entity recognized by the insurer as possess verification form pursuant to Section 627.711(2), Florida Statutes.	ing the necessary qualificati	ons to properly complete a uniform mitigation
Individuals other than licensed contractors licensed under Sectunder Section 471.015. Florida Statues, must inspect the structu		
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection.		
Licensees under s.471.015 or s.489.111 may authorize a direct of	emplovee who possesses t	he requisite skill. knowledge, and
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and (print name)	mployee who possesses to	he requisite skill. knowledge, and the inspection or (licensed
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and	mployee who possesses to	he requisite skill. knowledge, and the inspection or (licensed
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and (print name) contractors and professional engineers only) I had my employed	mployee who possesses to	the requisite skill. knowledge, and the inspection or (licensed pection(print name of inspector) and I agree
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and (print name) contractors and professional engineers only) I had my employed to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross negliges subject to investigation by the Florida Division of Insurance Fralicensing agency or to criminal prosecution. (Section 627.711(4) form shall be directly liable for the misconduct of employees as inspection.	I personally performed e (n/a) perform the inspace: 9/1 more provides a false or fraud and may be subject to 1-(7). Florida Statutes) Tif the authorized mitigati	the requisite skill. knowledge, and the inspection or (licensed pection(print name of inspector) and I agree 9/2016 audulent mitigation verification form is administrative action by the appropriate ne Qualified Inspector who certifies this ion inspector personally performed the
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Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and (print name) contractors and professional engineers only) I had my employed to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross negliges subject to investigation by the Florida Division of Insurance Fralicensing agency or to criminal prosecution. (Section 627.711(4 form shall be directly liable for the misconduct of employees as inspection. Homeowner to complete: I certify that the named Qualified In residence identified on this form and that proof of identification versions in the proof of identification of the proof of	I personally performed te (n/a) perform the insponence of the ins	the inspection or (licensed pection(print name of inspector) and I agree pection(print name of inspector) and I agree pection(print name of inspector) and I agree pection period in perio
Licensees under s.471.015 or s.489.111 may authorize a direct of experience to conduct a mitigation verification inspection. I, John Pala am a qualified inspector and (print name) contractors and professional engineers only) I had my employed to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross neglige subject to investigation by the Florida Division of Insurance Fralicensing agency or to criminal prosecution. (Section 627.711(4) form shall be directly liable for the misconduct of employees as inspection. Homeowner to complete: I certify that the named Qualified In residence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified on this form and that proof of identification versidence identified in the proof of identi	I personally performed te (n/a) perform the insponence of the ins	the inspection or (licensed pection(print name of inspector) and I agree pection(print name of inspector) and I agree pection(print name of inspector) and I agree pection period

Photos/Notes:



Roof (2)



Roof (3)



Roof (4)



Roof (5)



Roof (6)



Roof (7)



View front entry



View property identifier



View side (2)



WM garage tag



View front



View rear



View side



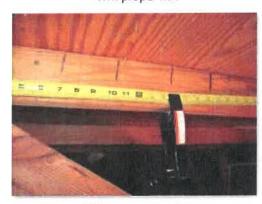
WM garage



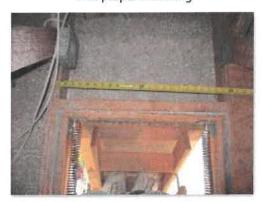
WM proper nail



WM proper sheathing



WM proper spaceing



WM proper spread



WM proper wraps (2)



WM proper wraps (3)



WM proper wraps

The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.

Inspectors Initials JP_Property Address _____

^{*}This verification form is valid for up to five (5) years provided no material changes have been made to the structure.

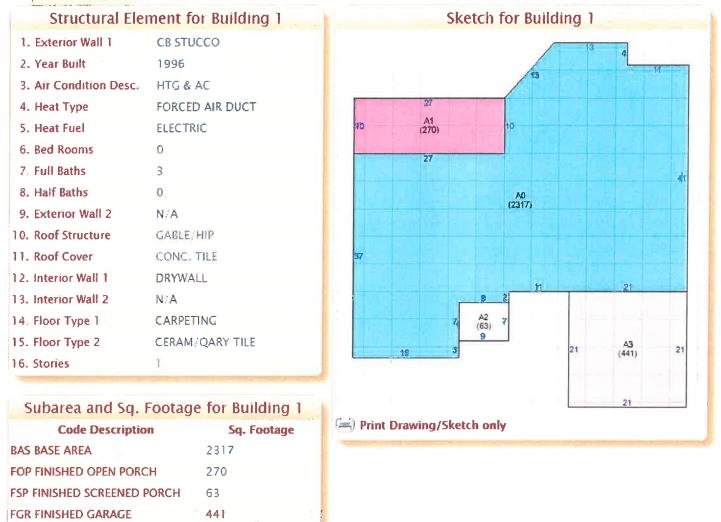
Parcel Control Number: 00-42-45-16-12-000-0010

Location Address: 8730 ROTHBURY LN

Structural Details

Building 1

Total Square Footage: 3091
Total Area Under Air # 2317



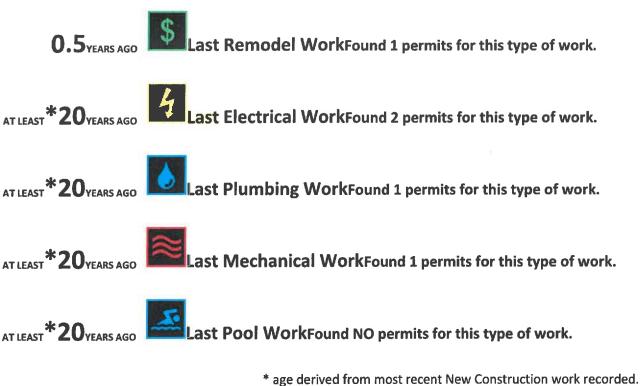
MAJOR SYSTEMS REPORT+

DETAILED PROPERTY IMPROVEMENT HISTORY

8730 ROTHBURY LN BOYNTON BEACH FL 33472

This Major Systems Report+ contains the following information:







BuildFax searched its national database of building permits, and identified the following permit-issuing authority for 8730 ROTHBURY LN **BOYNTON BEACH FL 33472:**

Palm Beach County, Building Division

2300 N. Jog Road

West Palm Beach, FL 33411

(561) 233-5100

No other permit records found between Feb 01, 1981 and Sep 02, 2016.

BuildFax matched 8730 ROTHBURY LN BOYNTON BEACH FL 33472 to the following address from the source shown above: 8730 Rothbury Ln, Boynton Beach, 33472.Please see the last page of this report for additional information and disclaimers.

Below are the details on all permits found on this property.

mit #: B-2016-005533-0000

Permit type

preferred:

BUILDING

Applied date: Mar 08,

2016

Description:

Reroofing 6/12 30SQ TILE

Issued date: Mar 23,

Work class:

Installation of Building

System

Completed

2016

date:

Apr 06, 2016

Permit status:

Complete

Status date:

Mar 23,

Job Cost:

\$ 18,250.00

2016

2014

Permit #: B-2014-025182-0000

Permit type preferred:

BUILDING

Applied date: Nov 19,

2014

Description:

Door - O.H. or Roll-up-

Replacement - Garage R&R 1 -

16x7 Garage Door

Issued date:

Nov 22,

2014

Work class:

Installation of Building System

Completed

Dec 19,

date:

2014

Permit status:

Complete

Status date:

Nov 22, 2014

Job Cost:

\$ 1,500.00

2006

Permit #: B-2006-050181-0000

Permit type

BUILDING

Applied date:

Aug 14,

preferred:

Shutter ACCORDION

2006

Description:

SHUTTERS 12 OP

Issued date: Sep 19,

2006

Work class:

Installation of Building

System

Status date: Sep 19,

2006

Permit status:

Inactive

Job Cost:

\$ 14,000.00

1996

Permit #: B-1996-012013-0000

Permit type preferred:

BUILDING

Applied date: Apr 11,

1996

Description:

Enclosure (Patio Screen)

Issued date: Apr 23,

Work class:

Construct New

Building/Structure

Completed

Jul 19,

1996

Permit status:

Complete

date:

1996

Job Cost:

\$ 1,835.00

Status date:

Apr 23, 1996

nit #: B-1995-013744-0001

Permit type

BUILDING

Issued date:

Mar 01, 1996

preferred:

Roofing (Sub)

Completed

May 24,

Work class:

Description:

Construct New

date:

1996

1996

Building/Structure

Status date:

Mar 01,

Permit status:

Complete

Total sq ft:

3092

Job Cost:

\$ 0.00

Permit #: M-1995-013744-0004

Permit type

preferred:

MECHANICAL

Issued date:

Mar 01,

1996

Description:

HVAC (Sub)

Completed

date:

May 24, 1996

Work class:

Construct New

Building/Structure

Status date:

Mar 01,

1996

Permit status:

Complete

Total sq ft:

3092

Job Cost:

\$ 0.00



Permit type preferred:

ELECTRICAL

Issued date:

Jan 29,

1996

1996

Description:

Security Alarm (Sub)

Completed

date:

May 24,

Work class:

Construct New

1996

Building/Structure

Status date: Jan 29,

Permit status:

Complete

Total sq ft:

3092

Job Cost:

\$ 0.00

ermit #: E-1995-013744-0002

Permit type

preferred:

ELECTRICAL

Issued date:

Jan 19, 1996

Description:

General Electrical

Completed

May 24,

date:

1996

Work class:

Construct New

Building/Structure

Status date:

Jan 19.

1996

Permit status:

Complete

Total sq ft:

3092

Job Cost:

\$ 0.00

Permit #: P-1995-013744-0005

Permit type

PLUMBING

Issued date:

Jan 04, 1996

preferred:

General Plumbing

Completed

May 24,

Description:

Construct New

date:

1996

Work class:

Building/Structure Status date: Jan 04,

1996

Permit status:

Complete

Total sq ft:

3092

Job Cost:

\$ 0.00

1995

Permit #: B-1995-013744-0000

Permit type preferred:

BUILDING

Detached

Applied date: May 02,

1995

Description:

Single-Family Dwelling

Issued date:

May 25, 1995

Completed

May 24,

Work class:

Construct New

Building/Structure

date:

1996

Permit status:

Complete

Status date:

May 25,

1995

Total sq ft:

3092

Job Cost:

\$ 114,800.00

BY EVALUATING THE DATA CONTAINED ON THE SITE, THE EVALUATING PARTY AGREES TO BE BOUND BY THE TERMS OF USE AND ACKNOWLEDGES THAT SUCH AGREEMENT CONSTITUTES A BINDING CONTRACT BETWEEN THE EVALUATING PARTY AND BUILDERADIUS, DBA BuildFax.com.

Report Serial Number: 20160919200836915972-3X0A1W-82620422

Report Generated on 19th September 2016 08:08PM EDT

Inspectors Initials JP_Property Address

This report will be available for approximately 180 days from the date shown above.

Permalink: https://delivery.buildfax.com/reports/files/BuildFaxReport 20160919200836915972-3X0A1W-82620422.html

The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure.

Copy of Agreement, some client & property specific terms, may be completed separately.

This agreement is made and entered into by and between Seaside Home Inspections, referred to as "Inspector" and "Client" In consideration of the promise and terms of this Agreement, the parties agree as follows:

- 1. The client (married clients represent a family obligation), will pay the sum of \$ (see receipt page), for the inspection of the "Property or home," being the residence, and garage or carport, if applicable, located on report.
- 2. The Inspector will perform a primarily visual inspection but not technically exhaustive, and prepare a written report of the apparent condition of the readily accessible installed systems and components of the property existing at the time of the inspection. Latent and concealed defects and deficiencies are excluded from the inspection. We do not report on, (see #8 below),including but not limited to: building codes, lack of or improper installation of stucco & related components, weep screeds, casing beads, drip edges, control joints.
- 3. The parties agree that the "Standards of Practice" (the "Standards") and The Service Details Page shall define the standard of duty and the conditions, limitations, and exclusions of the inspection and are incorporated by reference herein
- 4. The parties agree and understand that the Inspector and its employees and its agents assume no liability or responsibility for the costs of repairing or replacing any unreported defects or deficiencies either current or arising in the future or any property damage, consequential damage or bodily injury of any nature. Even if repairs or replacement are done with or without giving the Inspector the required notice, the Inspector will have no liability to the Client. The Client further agrees that the Inspector/Seaside Home Inspections is liable only up to the cost of the inspection regardless of any local and state laws.
- 5. The parties agree and understand the Inspector is not an insurer or guarantor against defects in the structure, items, components, or systems inspected. Parties agree to make no claims for any monetary amounts greater than the cost of the inspection. Inspector makes no warranty, express or implied, as to the fitness for use, condition, performance or adequacy of any inspected structure, item, component or system.

- 6. This Agreement, represents the entire agreement between the parties and there are no other agreements either written or oral between them. This Agreement shall be amended only by written agreement signed by both parties. A requested and/or refund made, voids all associated reports and future claims. Client has read this entire agreement and accepts and understands this agreement as hereby acknowledged.
- 7. As inspections are often requested by parties not present at the property and signatures may not be obtained before or after the inspection, this agreement is to be considered signed and agreed to if any of the following occur: Payment of invoice; phone, fax, email or otherwise a request for inspection is made; and/or if help/assistance is made in any way that allows access to the property.
- 8. Systems limitations, items, and conditions which are not within the scope of the building inspection include, but are not limited to: self-cleaning oven, trash compactors, radon, formaldehyde, lead paint, asbestos, toxic or flammable materials, molds, fungi, other environmental hazards; termites, wood destroying organisms, wdo, pest infestation; security and fire protection systems; household appliances; humidifiers; paint, wallpaper and other treatments to windows, interior walls, ceilings, and floors; recreational equipment or facilities; pool/spa water purification systems (ozone generator/saltwater, etc.); underground storage tanks, Chinese drywall, environmental concerns, odors, noise, toxic or flammable chemicals, water or air quality, fungus, energy efficiency measurements; motion or photo-electric sensor lighting; concealed or private secured systems; water wells; all overflow drains; heating system's accessories; solar heating systems; heat exchangers; sprinkling systems; water softener or purification systems; central vacuum systems; telephone, intercom or cable TV systems; antennae, lightning arrestors, load controllers; trees or plants; governing codes, ordinances, statutes, and covenants; and manufacturer specifications, recalls, and EIFS. Client understands that these systems, items, and conditions are excepted from this inspection. Appliances are checked that they turn on and appear that they will perform their major function only, ex; oven makes heat, but a temperature test is not performed. Any general comments about these systems, items, and conditions of the written report are informal only and do not represent an inspection. Any comments made on such or informational only.
- 9. The Inspection and report are performed and prepared for the sole and exclusive use and possession of the Client Upon our delivery of the report, we ask for confirmation that it has been received and it is not official unless we receive confirmation of delivery within 20 days. No other person or entity may rely on the report issued pursuant to this Agreement. In the event that any person, not a party to this Agreement, makes any claim against Inspector, its employees or agents, arising out of the services performed by Inspector under this Agreement, the Client agrees to indemnify, defend, and hold harmless Inspector from any and all damages, expenses, costs, and attorney fees arising from such a claim.
- 10. Every effort is made to provide an accurate report, however your report is lengthy and at times entry errors are made that are just that errors, as your inspector is not a robot. Your inspector was likely on a ladder, roof, attic, &/or crawl space prior to sitting at a computer to finish your report. As such we assume no liability for these entry errors. The report is limited to what your inspector sees, and not what your inspector does not see. You have been encouraged to attend the inspection to feel confident in your inspectors ability to perform the inspection to your satisfaction and to should demand the inspection not proceed and there will be no cost to you if you feel otherwise.
- 11. The Inspection will not include an appraisal of the value or a survey. The written report is not a compliance inspection or certification for past or present governmental codes or regulations of any kind.
- 12. This inspection does not determine whether the property is insurable.
- 13. In the event of a claim by the Client that an installed system or component of the premises which was inspected by the Inspector was not in the condition reported by the Inspector, the Client agrees to notify the Inspector at least 72 hours prior to repairing or replacing such system or component as to allow the Inspector to re-inspect and provide an updated report. Furthermore, any legal action for claims/recovery (as previously agreed to a maximum monetary amount equal to the cost of the inspections) must be brought within the 20 days of the inspection or purchase of the property (whichever comes first), or will be deemed waived and forever barred.

14.	Exclusions of s	vstems normall	v ins	pected	

15. Service Detail Page and Scope of Inspection items, listed on previous pages are to be considered as part of this agreement. Service Detail Page:

Permits can only be secured if they are available online, if they are available through the county courthouse and at no charge. At times it may be in the interest of customer to secure these documents themselves. Seaside Home Inspections will make any proper updates to the report, including attaching provided documents, at no additional charge.

Items listed in this report may inadvertently have been left off the Summary Sheet. Customer should read the entire report, including the summary page. A destructive inspection is beyond our scope of authority, to perform or recommend even if prudent.

We are neither pest inspectors or mold inspectors, however a visual inspection showed no signs of either-unless noted above, we recommend to consider a licensed professional confirm this.

Lead paint (lead-paint like), Radon, mold (mold-like) and asbestos (asbestos-like) can only be identified with certainty in a laboratory environment. These items will not be identified with certainty by the inspector/report. Wind and storm shutters of any/all types are not hung and/or necessarily operated, opened or closed, they will only be reported as onsite if present. As such are not part of the inspection. Any comments made on such is informational only.

All slabs that are covered with post-consumer floor coverings limit visibility, and can be believed in satisfactory condition. They are inspected to the extent visibly possible and any deficiencies will be specifically noted if found to be otherwise.

Off Breakers -----If some components may seem "dead" at the time of inspection, please know that if this is due to the breakers being in the off position and that industry standards and simple safety precautions prevent us from "flipping breakers", as a result "we" will be unable to test these components. Water shut off valves - standard practices prevent us from operating water shut off valves.

Your inspection report is prepared in the opinions and view of the inspector as seen at the time of the visual inspection. You are encouraged to read the entire report and use as guide only, in the home buying process. You should not have the unrealistic expectations that every detail/deficiency will be found by our inspectors, or that every square inch of the home, attic or roof is inspected. Or that we can predict the future. If you feel you are unsatisfied with the view, opinions, report, findings or lack thereof of the inspector, please be aware that the service is guaranteed and you should ask that any monies paid be refunded to you. If you purchase the property it is agreed that you are in acceptance of the report in its entirety and accept them as such. Please review your report for accuracy.

If necessary and at times customer, current owner, buyer, buyer's agent, new owner, prepared for party, and/or building official provided information (verbal, via photos, electronic, fax or otherwise) may be used and accepted as accurate for details on components. They may be used to complete the inspection, amend the report, or re-inspection on or after the visit. This can include (but not limited to) replacement dates, Notice of Acceptance Letters (NOA), repairs done before or after inspection, upgrade dates, inspection dates, provided receipts for repairs, permits, electrical amperage, occupied status, storm protection components or labels and recently contracted service.

Upon our delivery of the report we ask for confirmation that it has been received and is not official unless we receive confirmation of delivery within 20 days of delivery. Re-inspection services are provided at discounted costs and as such only the specific issues that have or may been "corrected" are inspected. After 20 days, regardless of confirmation a general release is to be considered in effect **DEFINITIONS**

- 1. Apparent Condition: Systems and components are rated as follows:
 - (Sat.) Indicates the component is functionally consistent with its original purpose but may show signs of normal wear and tear and deterioration.
 - (Marg.) Indicates the component will probably require repair or replacement anytime within 3-5 years.
 - Indicates the component will need repair or replacement now or in the very near future.

 A system or component that is considered significantly deficient, inoperable or is unsafe.
 - Denotes a condition that is unsafe and in need of prompt attention.
- 2. Installed systems and components: structural components; exterior; interior; roofing; plumbing; electrical; heating; central airconditioning (weather permitting); insulation and ventilation.
- 3. Readily accessible systems and components: only those systems and components where Inspector is not required to remove personal items, furniture, equipment, soil, snow, or other items which obstruct access or visibility

N. Exterior Opening Protection (unverified shutter systems with no documentation) All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B"
with no documentation of compliance (Level N in the table above).
N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist
N.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level X in the table above
N.3 One or More Non-Glazed openings is classified as Level X in the table above
X. None or Some Glazed Openings One or more Glazed openings classified and Level X in the table above.
MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.
Oualified Inspector Name. John Pala License Type: Home Inspector LicenseorCertificate#: HI7581
Inspection Company: Seaside Home Inspections Phone: 561 654 5496
Oualified Inspector - I hold an active license as a: (check one)
X. Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam.
Building code inspector certified under Section 468.607, Florida Statutes.
General, building or residential contractor licensed under Section 489.111, Florida Statutes. Professional engineer licensed under Section 471.015, Florida Statutes.
Professional architect licensed under Section 481.213, Florida Statutes.
Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.
Individuals other than licensed contractors licensed under Section 489.111. Florida Statutes, or professional engineer licensed under Section 471.015. Florida Statues, must inspect the structures personally and not through employees or other persons. Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection.
I, John Pala am a qualified inspector and I personally performed the inspection or (licensed (print name)
contractors and professional engineers only) I had my employee (n/a) perform the inspection(print name of inspector) and I agree to be responsible for his/her work.
Qualified Inspector Signature: Date: 9/19/2016
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7). Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection.
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative. Signature: Date: 9/19/16
Judy Juka 9/9/2016
An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to obtain or receive a discount on an insurance premium to which the individual or entity is not entitled commits a misdemeanor of the first degree. (Section 627.711(7), Florida Statutes)
The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.
Inspectors Initials _JP_Property Address 8730 Rothbury Ln, Boynton Beach, FL 33472
*This verification form is valid for up to five (5) years provided no material changes have been made to the structure

PERSONAL UMBRELLA POLICY QUOTE = Underwritten by: National Casualty Company 4336114-01 This quote is valid Home Office: One Nationwide Plaza o Columbus, Ohio 43215 **QUOTE NUMBER** for 30 days from Administrative Office: 8877 North Gainey Center Drive Issue date and Scottsdale, Arizona 85258 03-01-20 subject to verification ISSUE DATE 1-800-423-7675 • A Stock Company and approval. **GENERAL AGENT** ITEM 1. NAMED INSUREDS AND MAILING ADDRESS **BURNS & WILCOX** Insured's Producer: JOEL LUKOW USAA INSURANCE AGENCY, INC. JUDY LUKOW C/O BURNS AND WILCOX INSURANCE 8730 ROTHBURY LN 100 PINE ST 23RD FLOOR **BOYNTON BEACH FL 33472** CA 94111 SAN FRANCISCO CA001 Program No.: Agent No.: 04072

Part Two. The Declarations with "Policy Provisions-Part One" completes the Policy

From: 05-03-2020

Insurance is afforded for Bodily Injury, Personal Injury, Property Damage Liability and Uninsured Motorists Coverage, subject to the limits of the Company's liability (as indicated in Item 5. of the Declarations) in excess of the retained limit (as indicated in Item 6. of the Declarations) or underlying limit (as Indicated in Item 7. of the Declarations).

12.01 A.M. Standard Time at the location of property involved as stated herein.

Item 3.	The occupation of the insured is: RET. LAW ENFORCEMENT/HMMAKER		
Item 4.	Location of Coverage—if different than mailing address above:		
	8730 ROTHBURY LN BOYNTON BEACH FL 33472		
Item 5.	Limits of Liability		
	(a) Bodily Injury, Personal Injury, and Property Damage Liability Coverage	\$ 1,000,000	each occurrence
	(b) Uninsured Motorists Coverage	\$ 1,000,000	each accident
Item 6.	Retained Limit (Self-Insured Retention)		
	(a) Bodily Injury, Personal Injury, and Property Damage Liability Coverage	\$ None	
	(b) Uninsured Motorists	See Insuring	Agreement II

Endorsements forming a part of this policy (designated by Endorsement number)

Total Premium \$ 323.00

Taxes (if any) \$

Fully Earned Policy Fee \$

To: 05-03-2021

Total Policy Premium \$ 323.00



ITEM 2. POLICY PERIOD

PERSONAL UMBRELLA LIABILITY POLICY DECLARATIONS, CONT.

POLICY NUMBER	NAMED INSURED	AGENT NO.
PU00146409	JOEL LUKOW	04072

Item 7.	Schedule of Underlying Insurance						
	It is agreed by the insured that insurance policles providing the following coverage: (1) are in force and will be maintained in force (whether collectible or not) for at least the minimum underlying limits of liability stated hereafter; (2) insure all automobiles owned, or leased by or regularly furnished to the insured; (3) insure all premises owned, leased by, or leased to the insured; or (4) insure all watercraft owned by the insured.						
	TYPE OF COVERAGE			MINIMUM UNDERLYING LIMITS*			
	(a) Comprehensive Personal Liability an	d Premises Liability	\$	300,000	each occurrence		
	(a)		\$	500,000	each person		
		Bodily Injury Liability	Υ	each occurrence			
	(b) Automobile Liability	Property Damage Liability	\$	100,000	each occurrence		
		Or					
		Combined Single Limit	\$	500,000	each occurrence		
		Bodily Injury Liability	\$	500,000	each person		
	5		\$	500,000	each occurrence		
	Uninsured/Underinsured Liability	Or	\$	100,000	each occurrence		
	E/	Combined Single Limit	\$	500,000	each occurrence		
	(c) Watercraft Liability	Bodily Injury and Property Damage Liability	\$	300,000	each occurrence		

Res	dences	1	Automobiles	1	Watercraft	0	ATV/UTV	0	Vacant Land	0
	Dwellings	0	Apartments	0	Motorhomes	0	Sailboats	0	Farms	0
										<u> </u>
No.		First Na	ime / Last Nam	ie	DOB		Major	Minor	Accidents	Driver Excluded
1	JOEL	LUKOV	V .		03/11/1	939	0	0	1	NO
2	JUDY	LUKO	V .		10/07/1	946	0	0	Ö	NO
		 		<u> </u>						
								·		
-										



National Casualty Company

SCHEDULE OF FORMS AND ENDORSEMENTS

Policy No. PUO0146409

Quote Number 4336114-01

Named Insured JOEL LUKOW

Effective Date: 05-03-20 12:01 A.M., Standard Time

Agent No. 04072

UMBRELLA FORMS AND ENDORSEMENTS

PU-CERT-U NOTX0105CW	04-19 02-19 03-16	PERSONAL UMBRELLA RENEWAL OFFER PRIVACY STATEMENT CLAIMS REPORTING INFORMATION
NOTX0178CW END 0458 UT-COVPG	05-19 01-17	UNDISCLOSED RENTAL PROPERTY EXCLUSION COVER PAGE
PU-D-1 UT-SP-2L POL 006	03-18 12-95 05-09	QUOTE-PERS UMB LIAB DECLARATIONS SCHEDULE OF FORMS & ENDORSEMENTS PERSONAL UMBRELLA LIABILITY POLICY
END0455 UT-319g-FL	11-18 04-04	EXCLUSION FOR PERMISSIVE REGULAR OPERATO FL - AMENDATORY ENDORSEMENT FL - AMENDATORY ENDT - COMM DISEASE EXCL
END 0216FL UT-372G-FL END 0171	05-09 05-09 10-96	AMENDATORY ENDT - CANCEL & NONRENEWAL SEXUAL ABUSE EXCLUSION
END 0426 END 0452FL	05-09 10-14	PERS UMB LIAB POL EXCESS UM/UIM COV CAR-SHARING AND RIDE-SHARING EXCLUSION BODILY INJURY TO INSURED EXCLUSION
END 0424 POL 006-INDEX-FL-N UT-278q	05-09 05-10 09-06	QUICK REFERENCE PERSONAL UMBRELLA LIABIL POLICYHOLDER NOTICE-COMPANY TELEPHONE NO
UT-292G END 0448	07-01 05-12	MOLD EXCLUSION NEWLY ACQUIRED WATERCRAFT & PERSONAL

INSD: JOEL LUKOW

JUDY LUKOW

8730 ROTHBURY LN

BOYNTON BEACH FL 33472

PRODUCER: Burns & Wilcox Insurance Services

100 Pine Street 23rd Floor San Francisco, CA 94111-5209

EXPIRATION NOTICE—OFFER TO RENEW

RE: POLICY #: PU00146409

Personal Umbrella Policy with NATIONAL CASUALTY COMPANY

	Current Limits	Current Premium
Limit of Liability:	1,000,000.00	223.00
Uninsured Motorists:	1,000,000.00	100.00

	323.00
Total Premium:	
Taxes (if any):	
Fully Earned Policy Fee:	323.00
Total Renewal Premium:	323.00

We thank you for the opportunity to place your insurance coverage and look forward to renewing your current policy. Please complete the following steps to renew your policy.

Step 1 - Review Current Schedule for Accuracy

(If there are updates or additions to your schedule, please make them here.)

No. of	Total No. from current term	Total No. for new term (if changed)
Residences:	1	
Rental Units:	0.	
Apartments:	0	
Vacant Land:	0	
Farms:	0	
Automobiles:	1	
Motorhomes:	0	
ATV/UTV:	0	
Motorcycle	0	

N	o. of	Total No. from current term	Total No. for new term (if changed)
Watercraft	0-100 HP:	0	
	101-200 HP:	0	
	201-300 HP:	0	
	301-400 HP:	0	
	401-500 HP:	0	
	501 & up:	0	
Sailboats	0-25 ft:	0	
	26-40 ft:	0	
Personal V	Vatercraft Y/N	NO	
Watercraft	Over 40ft Y/N	NO	

Drivers currently listed on the policy:

No.	First Name / Last Name	DOB	Major	Minor	Accidents	Driver Excluded	Any Changes?
1	JOEL LUKOW	03/11/1939	0	0	1	NO	
2	JUDY LUKOW	10/07/1946	0	0	0	NO	
-							

Step 2 - Payment Options

Please Note: Coverage cannot be bound without payment. Submitting payment will indicate your request to purchase this coverage. If any changes made in Step 1 result in an increase/decrease in premium an invoice/refund will be sent to you after the policy has been issued.

Please contact USAA at 1-800-531-0014 If you have any additional driving activity or any liability claim over \$5,000 in the past 12 months or would like to review options for higher limits.

To renew your policy, submit your renewal payment and changes before the expiration date of your current policy using one of the following options:

On-line payment

- 1. Make your payment online at www.burnsandwilcox.com (select "Make a Payment" in the top right-hand corner of the main page) AND
- 2. If any changes were made to your policy, return all pages by one of the three options listed below:
 - Email <u>usaa@burns-wilcox.com</u>
 - Fax 415-421-0620
 - Mail (envelope attached):

Burns & Wilcox 25917 Network Place Chicago, IL 60673-1259

Mail Payment

- 1. Make check payable to: Burns & Wilcox
- 2. Return payment and all pages in the attached envelope to:

Burns & Wilcox 25917 Network Place Chicago, IL 60673-1259

USAA GENERAL INDEMNITY COMPANY

(A Stock Insurance Company) 9800 Fredericksburg - San Antonio, Texas 78288 FLORIDA AUTO POLICY

RENEWAL DECLARATIONS (ATTACH TO PREVIOUS POLICY)

amed insured and Address

ADDL INFO ON NEXT PAGE MAIL MCH-M-I RENEWAL 0F

POLICY NUMBER State 05 Veh Terr | 02835 57 09G 7101 8 FL 494 POLICY PERIOD: POLICY PERIOD: (12:01 A.M. standard time) EFFECTIVE MAY 03 2020 TO NOV 03 2020

OPERATORS

01 JOEL LUKOW 02 JUDY LUKOW

JOEL LUKOW 8730 ROTHBURY LN BOYNTON BEACH FL 33472-5069

escription of Vehicle(s)				VEH USE		/SCHOO
H YEAR TRADE NAME MODEL	BODY TYPE	ANNUAL MILEAGE	IDENTIFICATION NUMBER	SYM	Miles One Way	Per Week
5 19 HONDA ACCORD	4D	10000	1HGCV1F55KA071300	P	.7	
	!					
a Vahicle(s) described herein is principally		<u> </u>			1	

EH 05 BOYNTON BEACH FL 33472-5069

This policy provides ONLY those coverages where a premium is shown below. The limits shown may be reduced by policy provisions and may not be combined regardless of the number of vehicles for which a premium is listed unless specifically authorized elsewhere in this policy. VEH VEH . VEH **VEH** LIMITS OF LIABILITY 05 6-MONTH D=DED I **PREMIUM** ("ACV" MEANS ACTUAL CASH VALUE) D=DED | PREMIUM D=DED | PREMIUM D=DED PREMIUM AMOUNT AMOUNT AMOUNT AMOUNT ART A - LIABILITY BODILY INJURY EA PER 500,000 \$ 500,000 632.79 EA ACC PROPERTY DAMAGE EA ACC 100,000 121.20 ART B - PERSONAL INJURY PROTECTION \$10,000 MAXIMUM BENEFITS WORK LOSS N/A FOR NAMED INSD AND RESIDENT RELATIVES 163.56 ART C - UNINSURED MOTORISTS STACKED BODILY INJURY EA PER 500,000 \$ 500,000 243.60 EA ACC ART D - PHYSICAL DAMAGE COVERAGE COMPREHENSIVE LOSS **ACV LESS** 100 37.76 ACV LESS COLLISION LOSS D 500 296.46 RENTAL REIMBURSEMENT STANDARD CLASS 23.63 TOTAL PREMIUM - SEE FOLLOWING PAGE (S)

DDITIONAL INTEREST - LESSOR AMERICAN HONDA FINANCE, HUNT VALLEY EH 05 MD

NDORSEMENTS: ADDED 05-03-20 - A200FL(01)

EMAIN IN EFFECT(REFER TO PREVIOUS POLICY)-A072FL(01) ACCFOR(01) A402FL(02)

RSGPFL(01) 5100FL(02)

NFORMATION FORMS: 50FL (06) AGNA (01) 999FL(03)

1051 RMF731100001 I N WITNESS WHEREOF, we have caused this policy to be signed by our President and Secretary at San Antonio, Texas, on this date MARCH 16, 2020 OUNTERSIGNED BY A. Wayny Born

les Elen Cure MARIA ELENA MCALEXANDER



SUPPLEMENTAL INFORMATION

EFFECTIVE MAY 03 2020 TO NOV 03 2020

The following approximate premium discounts or credits have already been applied to reduce your policy premium costs.

NOTE: Age or senior citizen status, if allowed by your state/location, was taken into consideration when your rates were set and your premiums have already been adjusted.

VEHICLE 05 ANTI-LOCK BRAKE DISCOUNT ANTI-THEFT DISCOUNT AUTOMATIC PAYMENT PLAN DISCOUNT DAYTIME RUNNING LIGHTS DISCOUNT NEW VEHICLE DISCOUNT PASSIVE RESTRAINT DISCOUNT PREMIER DRIVER LEVEL DISCOUNT	- \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	38.77 3.65 75.96 8.70 163.60 27.47 52.23
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VALUABLE PERSONAL PROPERTY

A Personal Articles Floater

DECLARATIONS RENEWAL

Named Insured and Primary Residence

Policy Number

JOEL LUKOW

GIC

02835 57 09

90C

8730 ROTHBURY LN

BOYNTON BEACH, PALM BEACH, FL 33472

Policy Period: 05-03-20 - 05-03-21 From 12:01 A.M. Standard Time at the property location.

CLASS OF PERSONAL PROPERTY	CLASS LIMIT OF LIABILITY		CLASS JAL PREMIUM
1. a. JEWELRY - Blanket Coverage	\$5,000		\$77.00
1. b. JEWELRY - Scheduled Coverage	\$37,450		\$586.00
2. FURS			
3. SILVERWARE			
4. FINE ARTS			
5. CAMERAS			
6. MUSICAL INSTRUMENTS			
7. GUNS			·
8. STAMP COLLECTIONS			
9. COIN COLLECTIONS			
	ANNUAL PI	REMIUM	\$663.00
PREMIUM DUE AT INCEPTION.			
	TOTAL SURC	HARGES	\$33.15
THIS IS NOT A BILL. Statement to follow.	TOTAL ANNUAL P	REMIUM	\$696.15

Policy and Endorsements that are part of your contract with us.

REMAIN IN EFFECT (Refer to prior Policy Packet(s) for documents not attached.):

VPP-FL

(01-18)

FLORIDA SPECIAL PROVISIONS

VPP-P

(02-06)

VALUABLE PERSONAL PROPERTY

VPP-QR CGG

(02-06)

QUICK REFERENCE

ADDED / ATTACHED

VPP-S

SCHEDULE

COUNTERSIGNED BY AGENTINATION

In Witness Whereof, this policy is signed on 03-03-20

VALUABLE PERSONAL PROPERTY

SPECIFICALLY LISTED BELOW ARE SURCHARGES. THESE SURCHARGES ARE PART OF THE TOTAL ANNUAL PREMIUM.

FL HURRICANE CATASTROPHE FUND (FHCF) PREMIUM RECOUPMENT

\$ 33.15