

CITIZENS PROPERTY INSURANCE CORPORATION 301 W BAY ST JACKSONVILLE FL 32202

COMMERCIAL PROPERTY POLICY DECLARATIONS

Policy Number: 00043485 - 4

Effective Date: 11/08/2017 to 11/08/2018

Insured Name: FAIRWAY PARK CONDOMINIUM ASSOCIATION, INC.

LOCATION NO. 1	BUILDIN	IG OR SPEC	CIAL CLASS ITEM	NO. 1 CSI	Code: 0331		
BUSINESS DESCRIPTION	: Condominium	s -residentia	I (association risk	only) - without merc	cantile occupar	ncies - Up to 10 units	
DESCRIPTION OF PREMI	SES			8 UNITS			
Location Address ਨ ਲ		Group I Construction Modified Fire Resistive Group I Territory Statewide		oup II Construction AA Group II Territory Seacoast Zone 1	Protection 3 Coastal Ter None	Ungraded No. of Units	
COVERAGES PROVIDED	Insurance at Is Shown.	the Describ	ed Premises App	lies Only For Cove	erages For Wh	ich A Limit Of Insurar	
Coverage	Limit Of Insurance	Covered Causes Of Loss	Total Replacement Cost	Coinsurance	Rates	Premium First Los	
Building (Bldg)	\$1,133,900	Basic	\$1,133,900	100%	Class	\$2,029.00 N/A	
					FHCF Build-U	p Premium: \$82	
			ge limits have been adj				
OPTIONAL COVERAGES	Applicable C		ntries Are Made I	n The Schedule B			
Coverage		Premium	e		Replacement Cost		
				Building Yes	Busin	ess Personal Propert	
DEDUCTIBLE				"			
All Other Perils De	eductible		alendar Year Huri ercentage Deduc				
		Deducti	ble Percentage (Deduc	tible Amount)			
\$2,500			Bldg: 5% (\$56,69	95)			
WINDSTORM MITIGATION	N FEATURES					*	
Terrain B	Year Built 1980	Roof (Reinfo Concrete I		coof Deck leinforced ete Roof Deck	Roof-Wall Connection N/A	SWR N/A	
Building Type Type I	Roof Sha Flat	ipe	Opening Protect None		nd Speed I/A	FBC Wind Design N/A	
*A premium adjustment of or construction techniques						nd loss mitigation featu	
	5 1/ 7 11	1	0 0 0				
Mortgageholder(s) & Oth	er Policyholdei	Interestisi	– See Policy Inte	rest Schedule.			

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POLICY NUMBER: 00043485 - 4		POLICY PERIOR	FROM 11/08/2017	TO 11/08/2018	
	**	at 12:01 a.m. Easte	at 12:01 a.m. Eastern Time		
Transaction: RENEWAL				CR-M	
Pay Plan: Citizens Full Pay		Bill: Insured Bille			
Named Insured and Mailing Address		Agent		Fl. Agent Lic. #	

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

Telephone: 954-925-2590

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENTS.

PREMIUM

COMMERCIAL PROPERTY COVERAGE PART

\$76,029.00

Required Additional Charges:

Telephone: 561-734-8005

Emergency Management Preparedness and Assistance Trust Fund (EMPA) 2012 Florida Insurance Guaranty Association (FIGA) Regular Assessment State Fire Marshal Regulatory Surcharge Tax-Exempt Surcharge

\$4.00 \$99.00 \$76.00 \$1,331.00

TOTAL:

\$77,539.00

The portion of your premium for

Hurricane Coverage is: \$28,162.00

Non - Hurricane Coverage is: \$47,867.00

See Form CDEC-FE-SCH - Commercial Policy Forms And Endorsements Schedule

Authorized By: ANDREW SPARGO

Issued Date: 09/09/2017

Countersigned: 09/09/2017

BY:

Bany J. Gilway

Barry J. Gilway President/CEO and

President/CEO and Executive Director Citizens Property Insurance Corporation

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