KU X		NFIP Policy Number: Company Policy Number		8705113604 • 87051136042019		
HARTFORD		Agent:		PCS INSURANCE GROUP		
PCS INSURANCE GROUP 3315 HENDERSON BLVD STE 200 TAMPA, FL 33609		Policy Term: Renewal Billing Payor:		12/08/2021 12:01 AM through 12/08/2022 12:01 AM INSURED		
Agency Phone: (813) 868-1010		To report a claim visit or call us at:		https://TheHartford.ManageFlood.com (800) 787-5677		
	L FLOOD INSURA			,	NS	
DELIVERY ADDRESS	RESIDENTIAL CONDOMINIUM					
			INSURED NAME(S) AND MAILING ADDRESS THE MOORINGS OF PINELLAS COUNTY CONDOMINIUM ASSN INC			
	0/07					
C/O AMERI-TECH CON	-	24701 US HIGHWAY 19 N CLEARWATER, FL 33763-5008				
24701 US HIGHWAY 19 N						
CLEARWATER, FL 337	63-5008					
COMPANY MAILING ADDRESS Hartford Insurance Company of the Midwest			PROPERTY LOCATION 366-372 MOORINGS COVE DR BLDG 5			
PO BOX 913385		TARPON SPRINGS, FL 346890000				
DENVER, CO 80291-3385						
Refer to www.fema.gov/cost-of-flood for more info	ormation about flood risk and polic	cy rating. DESCI	RIPTION: RE	SIDENTIAL COND	DOMINIUM	
RATING INFORMATION						
	01/01/2000 N/A		OF CONSTRU IUNITY NUMBI		/30/1974 0259 0019 G REGUL	AR PROGRAM
JILDING OCCUPANCY: TWO TO FOUR FAMILY			COMMUNITY NAME:		TARPON SPRINGS, CITY OF	
	RCBAP LOW RISE 4		ENT FLOOD Z DFATHERED:	ONE: AE NC		
	* NO	-	DFATHERED. D RISK/RATED			
	N/A		TION DIFFER			
BUILDING TYPE:	TWO FLOORS NO BASEMENT		ATED BUILDIN		DN-ELEVATED 99,676	
MORTGAGEE / ADDITIONAL INTEREST INFORMA	TION					
FIRST MORTGAGEE:				LO	DAN NO: N/A	
SECOND MORTGAGEE:				LO	DAN NO: N/A	
ADDITIONAL INTEREST:				LC	DAN NO: N/A	
DISASTER AGENCY:					SE NO: N/A	
PREMIUM CALCULATION - Pre-FI	RM Subsidized			DIS	SASTER AGENCY:	andard
COVERAGE DEDUCTIBLE B		ADD'L COVERAGE	ADD'L RATE	DED. DISCOUI	NT/SURCHARGE	PREMIUM
BUILDING \$499,700 \$5,000 CONTENTS \$0 \$0	\$240,000 1.170	\$259,700	1.160		(\$699.00)	\$5,122.00
CONTENTS \$0 \$0 Coverage limitations may apply. So	\$0 1.640 So torm for d	\$0 Stails	2.190		\$0.00	\$0.00
Coverage mintations may apply. So		letans.	(ANN	UAL SUBTOTAL:	\$5,122.00
				REASED COST OF		\$56.00 (\$1,036.00)
				VE FUND ASSES		\$746.00
					N SURCHARGE:	\$0.00 \$4,888.00
					A SURCHARGE:	\$250.00
In witness whereof, we, as officers of the stock Company declared (FEDERAL POLIC	Y SERVICE FEE: TOTAL:	\$150.00 \$5,288.00
attested. If required by state law, this policy shall not be valid unle	· · · · ·	ve.			TO ME.	<i>\\</i> 0,200.00
Dougles Elliot Doug Elliot, President	Terune Abilds					
					ue - This Is N	Not A Bill
This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy. This is a Residential Condominium Building Association Policy. If, at the time of the loss, the building is not insured within 80% of the replacement cost of the building or						
the maximum amount available for this building, whichever is less, a co-insurance penalty will be applied to the claims settlement.						
					Company NAIC:	37478
File: 182507	769 Page 1 of 1				DocID: 1515	572290