

Policy Number: ABC0591234 HOMEOWNERS

Date of Issue: 06/14/2023 Call [Agent Name] at [Agent Number] for Policy Inquires HO SW DS FL 01 01 19

## HOMEOWNERS POLICY DECLARATIONS < New Business, Endorsement, Renewal>

Company Name:	You're Covered Company		
Producer Name:	Swyfft, LLC		
Named Insured:	Happy Homeowner		
Mailing Address:	1234 S. Swyfft St. Tallahassee, FL 32303		
The Insured Location Is Located At The Above Address Unless Otherwise Stated:			
Policy Period			
Effective Date: 0	06/14/2023	12:01 AM standard time at the insured location	
Expiration Date: (	06/14/2024	12:01 AM standard time at the insured location	

We will provide the insurance described in this policy in return applicable policy provisions.	n for the premium and compliance with all
Coverage is provided where a premium	or limit of liability is shown for the coverage.
Section I – Coverages	Limit Of Liability
A. Dwelling	\$ 420,000
B. Other Structures	\$ 8,450
C. Personal Property	\$ 210,500
D. Loss Of Use	\$ 42,200
Section II – Coverages	
E. Personal Liability	\$ 100,000 Each Occurrence
F. Medical Payments To Others	\$ 1,000 Each Person
Section III – Additional Coverages	
	\$
	\$
	\$
Subtotal Annual Premium	\$
Emergency Management, Preparedness and Assistance (EMPA) Trust Fund Annual Surcharge	\$
MGA Fee	\$
<the an="" approved="" change="" due="" premium="" rate="" to=""></the>	\$
<the change="" changes="" coverage="" due="" premium="" to=""></the>	\$
Total Annual Premium and Fees	\$ 3,050.40
Total Hurricane Premium	\$ 1,456.48
Total Non-Hurricane Premium	\$ 1,508.51