



Bankers Insurance Company  
 P.O. Box 33060  
 St. Petersburg, FL 33733  
 1-800-627-0000

BLDR99.001 0418  
 6646289  
 1/19/22

02081000000791

3000 00000 BLDR Renewal Declarations

Policy Number
09 0410004826 7 02

**BUILDERS' RISK DECLARATIONS PAGE**

Date of Issue  
 1/19/22

Policy Period	Effective Date	Producer
From: 1/13/22 To: 1/13/23 12:01 am Standard Time at Property Location	1/13/22 12:01am	00- 0100421

(239)939-1400  
 FIVE COUNTY INSURANCE AGENCY  
 INC  
 14120 METROPOLIS AVE  
 FORT MYERS FL 33912

SPOSEN SIGNATURE HOMES LLC  
 2311 SANTA BARBARA BLVD STE  
 111  
 CAPE CORAL FL 33991-4394

IN RETURN FOR YOUR PAYMENT OF THE PREMIUM, WE PROVIDE THE INSURANCE AS DESCRIBED IN THIS POLICY.

DEPOSIT PREMIUM (Incl Fees): \$ .00  
 DEDUCTIBLES: ALL OTHER PERILS: \$2,500.00 WIND: 5%  
 BUSINESS DESCRIPTION: HOME BUILDER

PREMISES LOCATION: VARIOUS AS PER MONTHLY REPORTS -MONTHLY REPORTING RATE; .036

LOSS PAYABLE NAME AND MAILING ADDRESS: PER SCHEDULE ON FILE WITH AGENT

None

**Premium Information:**

Premium \$52,900.00 \* See Assessment Fee Detail Notice  
 TOTAL AMOUNT DUE \$52,900.00

**Forms, Endorsements and Special Provisions:**

CL 0100 0399	IM 0160 0399	CL 0600 0115	CL 0605 0115
CL 0605 0115	IM 3031 0499	BXXX99.206 1207	IM 7057 0404
IM 7066 0404	IM 7052 0404	IM 7088 0404	BCIM99.166 0211
BCIM99.430 0211	BCIM99.432 0211	IM 7062 0504	IM 7061 0504

THESE DECLARATIONS TOGETHER WITH THE BUILDERS' RISK FORMS AND ENDORSEMENTS ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

Deborah S Brcka St. Petersburg, Florida 1/13/22  
 Countersigned by Authorized Representative Date



THIS IS NOT A BILL



Insured



First Community Insurance Company

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1/19/22

**SCHEDULE OF COVERAGES  
BUILDERS' RISK  
CONTRACTORS' REPORTING FORM**

(The entries required to complete this schedule will be shown below or on the "schedule of coverages".)

	Limit
<b>Course Of Construction Limit</b> - The most "we" pay for loss to any one building or structure is:	\$ <u>1,000,000</u>
<b>Contingent Coverage Limit</b> - The most "we" pay for loss to any one building or structure is:	\$ <u>Not Covered</u>
<b>Difference In Conditions Limit</b> - The most "we" pay for loss to any one building or structure is:	\$ <u>Not Covered</u>
<b>Catastrophe Limit</b> - The most "we" pay for loss in any one occurrence is:	\$ <u>5,000,000</u>

**COVERAGE EXTENSIONS**

Additional Debris Removal Expenses	\$ <u>5,000</u>
Emergency Removal	<u>10 days</u>
Emergency Removal Expenses	\$ <u>10,000</u>
Fraud And Deceit	\$ <u>50,000</u>
Limited Fungus Coverage	\$ <u>15,000</u>
Waterborne Property	\$ <u>10,000</u>

**SUPPLEMENTAL COVERAGES**

Contract Penalty	\$ <u>10,000</u>
Expediting Expenses	\$ <u>10,000</u>
Fire Department Service Charges	\$ <u>1,000</u>

**SUPPLEMENTAL COVERAGES**

Ordinance Or Law (Undamaged Parts Of A Building)	\$ <u>Covered</u>
Ordinance Or Law (Increased Cost To Repair And Cost To Demolish/Clear Site)	\$ <u>50,000</u>
Personal Property	\$ <u>10,000</u>



**SUPPLEMENTAL COVERAGES**

Pollutant Cleanup And Removal \$ 25,000  
Rewards \$ 1,000  
Sewer Backup Coverage \$ 10,000  
Testing \$ 10,000  
Transit \$ 10,000  
Trees, Shrubs And Plants \$ 10,000

Earthquake Coverage (check one)

- Not covered
- Earthquake coverage provided as described below:

Earthquake Limit - The most "we" pay for loss to any one building or structure is: \$ Not Covered  
Earthquake Catastrophe Limit - The most "we" pay for loss in any one occurrence is: \$ Not Covered

Flood Coverage (check one)

- Not covered
- Flood coverage provided as described below:

Flood Limit - The most "we" pay for loss in any one occurrence is: \$ Not Covered  
Flood Catastrophe Limit - The most "we" pay for loss in any one occurrence is: \$ Not Covered

**REPORTING CONDITIONS** (check one)

- Reporting Conditions waived
- Reporting Conditions applicable as described below:

Reporting Period (check one)	Adjustment Period (check one)
<input checked="" type="checkbox"/> Monthly	<input checked="" type="checkbox"/> Monthly
<input type="checkbox"/> Quarterly	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Annual	<input type="checkbox"/> Annual

**Additional Premium Due After Expiration** - When premium for the coverage provided by this policy is based upon reports of value any additional premium owed to "us" is due on the due date that appears on the billing notice.



Coverage/Construction	Rate
_____	_____
_____	_____

Premiums See Declarations page

Deposit Premium \$ See Declarations page

Minimum Premium \$ Not applicable

**DEDUCTIBLE**

Deductible Amount \$ See Declarations page

Check if applicable:

Earthquake Coverage \$ Not Covered

Flood Coverage \$ Not Covered

Sewer Backup Coverage \$ Not Covered

**PERMISSION TO OCCUPY (check one)**

Permission to occupy is not granted.

The occupancy and use provisions under Additional Coverage Limitations are deleted, and permission is granted to occupy covered property after the date indicated below:

Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**OPTIONAL COVERAGES AND ENDORSEMENTS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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1/19/22



First Community Insurance Company

P.O. Box 33060

St. Petersburg, FL 33733

1-800-627-0000

**Policy Number**

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1/19/22

**PRIVACY STATEMENT**

This Privacy Statement is provided by Bankers Financial Corporation and its subsidiary companies (collectively called "Bankers"): including but not limited to Bankers Insurance Group; Bankers Insurance Company; Bankers Life Insurance Company; First Community Insurance Company; Bankers Specialty Insurance Company, Bankers Underwriters of Texas, Inc.; Bankers Underwriters, Inc.; Bankers Credit Insurance Services, Inc.; Bankers Insurance Services, Inc.; G.D. Van Wagenen Financial Services, Inc.; Bonded Builders Home Warranty Association; Bonded Builders Insurance Services, Inc.; Bankers Surety Services, Inc.

To our Customers: As your insurance company, we recognize our obligation to keep information about you secure and confidential. Most of the information we use in evaluating your application and servicing your policy comes to us directly from you. In addition, we may collect nonpublic personal information from your application and from any of your transactions with Bankers or other companies. Depending on your insurance coverage, we may also collect information about you from third parties, such as other people proposed for coverage under your policy or the state Motor Vehicle Department concerning your driving report. We may also receive information about you from a consumer reporting agency.

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as permitted by law. In some cases this may mean information can be disclosed to third parties without your authorization; however, we maintain physical, electronic and procedural safeguards that comply with state and federal regulations to guard your nonpublic personal information. Information about you is given to those of our employees who need it in order to provide you with products, benefits or services.

You have the right to obtain access to certain information and the right to request correction of information you feel is inaccurate. A copy of our detailed privacy policy can be found on our website at [www.bankersinsurance.com](http://www.bankersinsurance.com).

To have a copy of our detailed privacy policy mailed to you or to access your information, write: Privacy Compliance, Bankers Insurance Group, PO Box 15707, St. Petersburg, FL 33733.

**Important Notice:**

In compliance with requirements of the Fair Credit Reporting Act (Public Law 91-508), Bankers advises that as part of our routine procedure for reviewing applications for certain types of insurance or renewals of certain policies, we may procure a consumer report including information as to the consumer's character, general reputation, personal characteristics or mode of living. If such insurance is for an individual and is primarily for personal, family or household purposes, such information may be obtained through personal interviews with neighbors, friends or others with whom the consumer is acquainted. Upon request to our company, in the manner as noted above, we will provide in writing a complete and accurate disclosure of the nature and scope of the consumer report requested or advise that no investigation was conducted.



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**SOFT COST SCHEDULE  
SOFT COST AND RENTAL INCOME**

(The entries required to complete this schedule will be shown below or on the "schedule of coverages".)

**Location**

At all jobsites described in the Builders' Risk Declarations Page.

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**SOFT COST**

**LIMIT**

The most "we" pay for soft cost expenses in any 30 day period is:

\$ \_\_\_\_\_

The most "we" pay in any one occurrence for soft cost expenses is:

\$ 50,000

**RENTAL INCOME**

The most "we" pay for loss of rental income in any 30 day period is:

\$ Not Covered

The most "we" pay in any one occurrence for loss of rental income is:

\$ Not Covered

**COVERAGE EXTENSIONS**

Expenses To Reduce Loss

Not Covered

Interruption By Civil Authority

Not Covered





**Policy Number**  
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BUILDERS RISK

**Date**  
1/19/22

**Assessment Fee Detail Notice**

The devastating losses of the recent hurricane seasons left a number of insurance carriers insolvent. Citizens Property Insurance was left with an enormous debt, the reserves in the Florida Hurricane Catastrophe Fund were almost depleted, and the Florida Insurance Guaranty Association was faced with the task of paying the outstanding claims to the policyholders of the insolvent insurers.

In order to cover these deficits, replenish the Florida Hurricane Catastrophe Fund, and pay the claims from insolvent insurance companies, the Office of Insurance Regulation has approved several assessments. In effect, we are all helping our neighbors and ourselves with these fees. We would like you to be prepared for these assessments so we have included the following details to make it a little easier to understand. These assessments will be levied on all new policies, and at the time of renewal on existing policies.

**Florida Citizens Property Insurance Assessment**

[www.citizensfla.com](http://www.citizensfla.com)

It is required by law that Florida Citizens Property Insurance remains solvent. Emergency assessments are levied to cover any deficits (the 2005 High Risk Account deficit was \$1.7 billion). These assessments are collected from policyholders upon issuance or renewal and can be collected for as many years as necessary to cover the deficit. It is important to understand that, while we were very fortunate in 2006, Citizens' deficit from the 2005 season still remains.

We are pleased to inform you that the \$ 0 surcharge in your premium for the assessment by Citizens Property Insurance Corporation has been reduced by \$ 0 due to an appropriation by the Florida Legislature. This appropriation, and thus the reduction, does not apply to First Community Insurance Company, a limited apportionment company (a company with a surplus of \$25 million or less).

**Florida Hurricane Catastrophe Fund Assessment**

[www.sbafla.com/fhcf](http://www.sbafla.com/fhcf)

The Florida Hurricane Catastrophe Fund (FHCF), a tax-exempt state trust fund that is funded by all Florida property and casualty insurance companies, has exhausted nearly all of the \$6 billion in reserves it has accumulated since its inception in 1993, causing the Office of Insurance Regulation to levy an assessment on all direct-written premiums beginning January 1, 2007. The FHCF assessment is expected to be renewed each year for up to 10 years.

Emergency Assessment: \$0

**Florida Insurance Guaranty Association Assessment**

[www.figafacts.com](http://www.figafacts.com)

The Florida Insurance Guaranty Association (FIGA), which was created by the legislature to handle claims from insolvent property and casualty insurance companies, has levied an assessment for the calendar year of 2022. The purpose is to secure funds to handle, adjust and pay covered claims.

Total Fees: \$0

Please contact your agent if you have any questions regarding these assessments.

