

PO Box 2356  
Bloomington IL 61702-2356



AT1 H-15-2905-FC14 F H 4  
002025 3200  
THE OLIVIAN UDR, INC  
PO BOX 115009  
CARROLLTON TX 75011-5009



## RENEWAL DECLARATIONS

AMOUNT DUE: None  
Payment is due by **BILLED THROUGH SFPP**

Policy Number: 47-CS-K141-7

Policy Period: 12 Months

Effective Dates: JAN 26 2023 to JAN 26 2024

The policy period begins and ends at 12:01 am standard time at the residence premises.

Your State Farm Agent

RUSTY DUBOSE

2633 EASTLAKE AVE E STE 206

SEATTLE WA 98102-3299

Phone: (206) 384-4440

### Renters Policy

#### Location of Residence Premises

809 OLIVE WAY APT 1105  
SEATTLE WA 98101-1977

### Automatic Renewal

If the **POLICY PERIOD** is shown as **12 MONTHS**, this policy will be renewed automatically subject to the premiums, rules, and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

### IMPORTANT MESSAGES

This policy does not provide earthquake coverage. If you are interested in obtaining earthquake coverage, please contact your State Farm agent for more information concerning the coverage and eligibility criteria.

### PREMIUM

Annual Premium

\$129.00

Your premium has already been adjusted by the following:

Home Alert Discount

Home/Auto Discount

Claim Record Discount

**Total Premium**

**\$129.00**

**NAMED INSURED**

WIECHMAN, JOSHUA

**MORTGAGEE AND ADDITIONAL INTERESTS**

**Notice Only:**  
 THE OLIVIAN UDR, INC  
 PO BOX 115009  
 CARROLLTON TX 75011-5009

Loan Number:  
 N/A

**SECTION I - PROPERTY COVERAGES AND LIMITS**

Coverage	Limit of Liability
B Personal Property	\$ 62,900
C Loss of Use	\$ 25,160
<b>Additional Coverages</b>	
Arson Reward	\$1,000
Credit Card, Bank Fund Transfer Card, Forgery, and Counterfeit Money	\$1,000
Debris Removal	Additional 5% available
Fuel Oil Release	\$10,000
Locks and Remote Devices	\$1,000
Trees, Shrubs, and Landscaping	10% of Coverage B amount/\$750 per item

**SECTION II - LIABILITY COVERAGES AND LIMITS**

Coverage	Limit of Liability
L Personal Liability (Each Occurrence)	\$ 500,000
Damage to the Property of Others	\$ 1,000
M Medical Payments to Others (Each Person)	\$ 5,000

**INFLATION**

Inflation Coverage Index: 298.0

**DEDUCTIBLES**

Section I Deductible	Deductible Amount
All Losses	\$ 500

**LOSS SETTLEMENT PROVISIONS**

B1 Limited Replacement Cost - Coverage B

**FORMS, OPTIONS, AND ENDORSEMENTS**

H4-2147 Renters Policy  
HO-2345 Amendatory Endorsement  
HO-2358 Amendatory Endorsement

**ADDITIONAL MESSAGES**

State Farm® works hard to offer you the best combination of price, service, and protection. The amount you pay for homeowners insurance is determined by many factors such as the coverages you have, the type of construction, the likelihood of future claims, and information from consumers reports.

**Other limits and exclusions may apply - refer to your policy**

Your policy consists of these Declarations, the Renters Policy shown above, and any other forms and endorsements that apply, including those shown above as well as those issued subsequent to the issuance of this policy.

This policy is issued by the State Farm Fire and Casualty Company.

**Participating Policy**

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

*Lynne M. Youell*  
Secretary

*Michael J. Lippert*  
President

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