

DECLARATIONS

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy.

Coverage afforded by this policy is provided by:

State Farm Fire and Casualty Company
PO BOX 88049
Atlanta GA 30356-9901

A Stock Company with Home Offices in Bloomington, Illinois.

32-CC-U984-8

Policy Number

Named Insured and Mailing Address

Tsenovoy, Lev
303 Nina St
New Windsor, NY 12553-6124

The Policy Period begins and ends at 12:01 a.m. Standard Time at the residence premises.

09/08/2022

Effective Date

12 months - Policy Period

09/08/2023

Expiration of Policy Period

Limit of Liability - Section 1

\$343,000

Dwelling

\$257,250

Personal Property

Limit of Liability - Section 2

\$1,000,000

Personal Liability

\$1,000

Medical Payments to Others

Policy Type

Homeowners

A1 - Replacement Cost - Similar Construction

Increased Dwelling Up to \$68,600 - Option ID

Location of Premises

303 Nina St
New Windsor, NY 12553-6124

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 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.

Deductibles - Section I 1/2% \$1,715

ALL LOSSES In case of loss under this policy, the deductible will be applied per occurrence and will be deducted from the amount of the loss.

Earthquake:

Policy Premium

\$ 1166

Forms, Options, & Endorsements

HW-2132 Homeowners Policy

Back-Up of Sewer Or Drain

Amendatory Endorsement

Mortgagee & Addl. Interests

Mortgagee
FREEDOM MORTGAGE CORPORATION ISAOA/
ATIMA
PO Box 5050
Troy, MI 48007-5050
Loan Number: 0117434316

Agent Name & Address

Phillip Williams
PO Box 128
Vails Gate, NY 12584-0128