



AGENCY CUSTOMER ID: 00038610

PROPERTY SECTION

DATE (MM/DD/YYYY)

3/21/2018

AGENCY NAME Mack, Mack & Waltz Insurance Group, Inc.		CARRIER *New		NAIC CODE
POLICY NUMBER PROP MASTER	EFFECTIVE DATE 5/16/2018	NAMED INSURED(S) Plum at Boca Pointe Homeowners Association Inc. (The)		

BLANKET SUMMARY

BLKT #	AMOUNT	TYPE	BLKT #	AMOUNT	TYPE

PREMISES INFORMATION

PREMISES #: **1** STREET ADDRESS: **6680-6688 Via Regina**
BUILDING #: **1** BLDG DESCRIPTION: **5 Units Style A**

SUBJECT OF INSURANCE	AMOUNT	COINS %	VALU- ATION	CAUSES OF LOSS	INFLATION GUARD %	DED	DED TYPE	BLKT #	FORMS AND CONDITIONS TO APPLY
Building	896,529		RC	Special form		2,500	DO		3% HURR CLDYR DED

ADDITIONAL INFORMATION

BUSINESS INCOME / EXTRA EXPENSE - Attach ACORD 810

VALUE REPORTING INFORMATION - Attach ACORD 811

ADDITIONAL COVERAGES, OPTIONS, RESTRICTIONS, ENDORSEMENTS AND RATING INFORMATION

SPOILAGE COVERAGE (Y / N) <input type="checkbox"/>	DESCRIPTION OF PROPERTY COVERED	LIMIT \$	REFRIG MAINT AGREEMENT (Y / N) <input type="checkbox"/>	OPTIONS
		DEDUCTIBLE \$		<input type="checkbox"/> BREAKDOWN OR CONTAMINATION <input type="checkbox"/> POWER OUTAGE <input type="checkbox"/> SELLING PRICE
SINKHOLE COVERAGE (Required in Florida)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
MINE SUBSIDENCE COVERAGE (Required in IL, IN, KY and WV)		ACCEPT COVERAGE	REJECT COVERAGE	LIMIT: \$
<input type="checkbox"/> PROPERTY HAS BEEN DESIGNATED AN HISTORICAL LANDMARK		# OF OPEN SIDES ON STRUCTURE: _____		

CONSTRUCTION TYPE Frame	DISTANCE TO HYDRANT 500 FT	FIRE STAT 1 MI	FIRE DISTRICT Palm Beach	CODE NUMBER	PROT CL 4	# STORIES 2	# BASM'TS	YR BUILT 1986	TOTAL AREA 9,809
BUILDING IMPROVEMENTS		BLDG CODE GRADE 99	TAX CODE	ROOF TYPE	OTHER OCCUPANCIES				
<input type="checkbox"/> WIRING, YR: <input type="checkbox"/> PLUMBING, YR: <input checked="" type="checkbox"/> ROOFING, YR: 2006 <input type="checkbox"/> HEATING, YR: <input type="checkbox"/> OTHER: YR: <input type="checkbox"/>		WIND CLASS <input type="checkbox"/> RESISTIVE <input type="checkbox"/>		SEMI- RESISTIVE	<input type="checkbox"/> HEATING SOURCE INCL WOODBURNING STOVE OR FIREPLACE INSERT		DATE INSTALLED: _____		
PRIMARY HEAT <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N				SECONDARY HEAT <input type="checkbox"/> BOILER <input type="checkbox"/> SOLID FUEL <input type="checkbox"/> IF BOILER, IS INSURANCE PLACED ELSEWHERE? <input type="checkbox"/> Y / N					
RIGHT EXPOSURE & DISTANCE		LEFT EXPOSURE & DISTANCE		FRONT EXPOSURE & DISTANCE		REAR EXPOSURE & DISTANCE			
BURGLAR ALARM TYPE		CERTIFICATE #				EXPIRATION DATE	<input type="checkbox"/> CENTRAL STATION	<input type="checkbox"/> LOCAL GONG	<input type="checkbox"/>
BURGLAR ALARM INSTALLED AND SERVICED BY				EXTENT	GRADE	# GUARDS / WATCHMEN	<input type="checkbox"/>	CLOCK HOURLY	<input type="checkbox"/>
PREMISES FIRE PROTECTION (Sprinklers, Standpipes, CO2 / Chemical Systems)				% SPRNK 0	FIRE ALARM MANUFACTURER				<input type="checkbox"/> CENTRAL STATION <input type="checkbox"/> LOCAL GONG

ADDITIONAL INTEREST

ACORD 45 attached for additional names

INTEREST	NAME AND ADDRESS	RANK: _____	EVIDENCE: _____	CERTIFICATE	INTEREST IN ITEM NUMBER	
<input type="checkbox"/> LOSS PAYEE					LOCATION: _____	BUILDING: _____
<input type="checkbox"/> MORTGAGEE					ITEM CLASS: _____	ITEM: _____
<input type="checkbox"/>					ITEM DESCRIPTION	
<input type="checkbox"/>						
REFERENCE / LOAN #: _____						

ACORD 140 (2014/12)

INS140 (201412)

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