

State Farm Lloyds  
A Lloyds Company In Richardson, Texas  
  
PO Box 2356  
Bloomington IL 61702-2356

AT2 H-25-2149-FA87 F H 4  
3200  
MORA, ISMAEL  
13555 BRETON RIDGE ST APT 313  
HOUSTON TX 77070-5820



RENEWAL DECLARATIONS

AMOUNT DUE: None

Payment is due by BILLED THROUGH SFPP

Policy Number: 53-C7-Y953-6

Policy Period: 12 Months  
Effective Dates: DEC 14 2024 to DEC 14 2025  
The policy period begins and ends at 12:01 am standard time at the residence premises.

Your State Farm Agent  
HIEN APPLE CHFC  
12661 STATE HIGHWAY 249  
STE 500  
HOUSTON TX 77086-3342  
  
Phone: (281) 890-8822

Renters Policy

Location of Residence Premises  
13555 BRETON RIDGE ST APT 313  
HOUSTON TX 77070-5820

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 CONTAINS A POLLUTION EXCLUSION (INCLUDING BUT NOT LIMITED TO ASBESTOS AND LEAD) LOCATED UNDER SECTION II - EXCLUSIONS.  
The Inflation Coverage provision may change your deductible. Refer to page 11 of your policy.

PREMIUM

Annual Premium	\$172.00
Your premium has already been adjusted by the following:	
Home Alert Discount	Claim Record Discount
Loyal Customer	
Total Premium	\$172.00

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20 001060 H



NAMED INSURED	MORTGAGEE AND ADDITIONAL INTERESTS
MORA, ISMAEL	

SECTION I - PROPERTY COVERAGES AND LIMITS

Coverage	Limit of Liability
B Personal Property	\$ 14,100
C Loss of Use	\$ 12,690
Additional Coverages	
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)	\$ 100,000
Damage to the Property of Others	\$ 1,000
M Medical Payments to Others (Each Person)	\$ 1,000

INFLATION

Inflation Coverage Index: 315.3
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DEDUCTIBLES

Section I Deductible	Deductible Amount
All Losses	\$ 500

LOSS SETTLEMENT PROVISIONS

B2 Depreciated Loss Settlement - Coverage B
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OCT 25 2024



FORMS, OPTIONS, AND ENDORSEMENTS

H4-2143 Renters Policy  
HO-2333.1 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 State Farm Lloyds.

SERVICE OF PROCESS - Service of Process may be had upon the State Official duly designated for such purpose in the state in which the property insured hereunder is located if State Farm Lloyds is licensed in such state; or upon the Commissioner of Insurance of the State of Texas; or upon the duly appointed Attorney-in-Fact for State Farm Lloyds at Richardson, Texas. Underwriters at State Farm Lloyds have complied with the laws of the State of Texas regulating Lloyds plan insurance and said statutes are hereby made a part of the policy. The entire assets of State Farm Lloyds supports its policies, but each individual underwriter's liability is several and not joint and is limited by law to the amount fixed by his/her underwriter's contract and subscription and no underwriter is liable as a partner. This policy is made and accepted subject to the foregoing stipulations and conditions together with such other provisions, agreements or conditions as may be endorsed hereon or added hereto, and no agent or other representative of State Farm Lloyds shall have the power to waive any provision or condition of this policy. This policy is non-assessable and no contingent liability of any kind and character attaches to the insured named herein.

In Witness Whereof, State Farm Lloyds has caused this policy to be signed by its President and Secretary.

By:

*Chris Schell*  
Secretary  
State Farm Lloyds, Inc.  
Attorney-in-Fact

State Farm Lloyds

*Rob Stewart*  
President  
State Farm Lloyds, Inc.  
Attorney-In-Fact

**Your coverage amount....**

It is up to you to choose the coverage and limits that meet your needs. We encourage you to periodically review your coverages and limits with your agent.

# Important Notice About Your Policy

Thank you for selecting State Farm® insurance.

To complete the renewal of your policy, we may obtain and use credit information on you or another member(s) of your household as a part of the insurance credit scoring process.

This information may be used in determining the price you are being charged. If credit information was used to complete the renewal of your policy, the name of the person whose credit information was obtained will be shown on your Renewal Declarations.

If you have questions about this disclosure, contact your State Farm agent. Your agent’s address and phone number are listed on the front of your Renewal Declarations. You may also contact the Texas Consumer Hot Line at:

1-800-STATEFARM (1-800-782-8332)  
State Farm Lloyds  
P.O. Box 2356  
Bloomington, IL 61702-2356

For more information or other questions, contact the Texas Department of Insurance at:

Texas Department of Insurance:  
1-800-578-4677  
P.O. Box 12030  
MC-PC-PCL  
Austin, TX 78711-2030  
Web: <http://www.tdi.texas.gov>  
E-mail: [ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)  
Other Information: [www.helpinsure.com](http://www.helpinsure.com)

Section 559.053 of the Texas Insurance Code requires an insurer or its agents to disclose to its customers whether credit information will be obtained on the applicant or insured or on any other member(s) of the applicant’s or insured’s household and used as part of the insurance credit scoring process.

If credit information is obtained or used on the applicant or insured, or on any member of the applicant’s or insured’s household, the insurer shall disclose to the applicant the name of each person on whom credit information was obtained or used and how each person’s credit information was used to underwrite or rate the policy. An insurer may provide this information with this disclosure or in a separate notice.

Adverse effect means an action taken by an insurer in connection with the underwriting of insurance for a consumer that results in the denial of coverage, the cancellation or nonrenewal of coverage, or the offer to and acceptance by a consumer of a policy form, premium rate, or deductible other than the policy form, premium rate, or deductible for which the consumer specifically applied.

Credit information is any credit-related information derived from a credit report itself, or provided in an application for personal insurance. The term does not include information that is not credit-related, regardless of whether the information is contained in a credit report or in an application for insurance coverage or is used to compute a credit score.

Credit score or insurance score is a number or rating derived from a mathematical formula, computer application, model, or other process that is based on credit information and used to predict the future insurance loss exposure of a consumer.

## SUMMARY OF CONSUMER PROTECTIONS CONTAINED IN CHAPTER 559

**PROHIBITED USE OF CREDIT INFORMATION.** An insurer may not:

1. use a credit score that is computed using factors that constitute unfair discrimination;
2. deny, cancel, or nonrenew a policy of personal insurance solely on the basis of credit information without consideration of any other applicable underwriting factor independent of credit information; or
3. take an action that results in an adverse effect against a consumer because the consumer does not have a credit card account without consideration of any other applicable factor independent of credit information.

(Continued)

An insurer may not consider an absence of credit information or an inability to determine credit information for an applicant for insurance coverage or insured as a factor in underwriting or rating an insurance policy unless the insurer:

1. has statistical, actuarial, or reasonable underwriting information that:
  - (A) is reasonably related to actual or anticipated loss experience; and
  - (B) shows that the absence of credit information could result in actual or anticipated loss differences;
2. treats the consumer as if the applicant for insurance coverage or insured had neutral credit information, as defined by the insurer; or
3. excludes the use of credit information as a factor in underwriting and uses only other underwriting criteria.

**NEGATIVE FACTORS.** An insurer may not use any of the following as a negative factor in any credit scoring methodology or in reviewing credit information to underwrite or rate a policy of personal insurance:

1. a credit inquiry that is not initiated by the consumer;
2. an inquiry relating to insurance coverage, if so identified on a consumer's credit report; or
3. a collection account with a medical industry code, if so identified on the consumer's credit report.

Multiple lender inquiries made within 30 days of a prior inquiry, if coded by the consumer reporting agency on the consumer's credit report as from the home mortgage or motor vehicle lending industry, shall be considered by an insurer as only one inquiry.

**EFFECT OF EXTRAORDINARY EVENTS.** An insurer shall, on written request from an applicant for insurance coverage or an insured, provide reasonable exceptions to the insurer's rates, rating classifications, or underwriting rules for a consumer whose credit information has been directly influenced by a catastrophic illness or injury, by the death of a spouse, child, or parent, by temporary loss of employment, by divorce, by military deployment overseas or by identity theft. In such a case, the insurer may consider only credit information not affected by the event or shall assign a neutral credit score.

An insurer may require reasonable written and independently verifiable documentation of the event and the effect of the event on the person's credit before granting an exception. An insurer is not required to consider repeated events or events the insurer reconsidered previously as an extraordinary event.

An insurer may also consider granting an exception to an applicant for insurance coverage or an insured for an extraordinary event not listed in this section. An insurer is not out of compliance with any law or rule relating to underwriting, rating, or rate filing as a result of granting an exception under this article.

**NOTICE OF ACTION RESULTING IN ADVERSE EFFECT.** If an insurer takes an action resulting in an adverse effect with respect to an applicant for insurance coverage or insured based in whole or in part on information contained in a credit report, the insurer must provide to the applicant or insured within 30 days certain information regarding how an applicant or insured may verify and dispute information contained in a credit report.

**DISPUTE RESOLUTION; ERROR CORRECTION.** If it is determined through the dispute resolution process established under Section 611(a)(5), Fair Credit Reporting Act (15 U.S.C. Section 1681i), as amended, that the credit information of a current insured was inaccurate or incomplete or could not be verified and the insurer receives notice of that determination from the consumer reporting agency or from the insured, the insurer shall re-underwrite and re-rate the insured not later than the 30th day after the date of receipt of the notice.

After re-underwriting or re-rating the insured, the insurer shall make any adjustments necessary within 30 days, consistent with the insurer's underwriting and rating guidelines. If an insurer determines that the insured has overpaid premium, the insurer shall credit the amount of overpayment. The insurer shall compute the overpayment back to the shorter of the last 12 months of coverage; or the actual policy period.

State Farm Lloyds  
Richardson, TX

553-3107 TX.8

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IMPORTANT NOTICE

To obtain information or make a complaint:

You may call the State Farm® toll-free telephone number for information or to make a complaint at:

800-STATEFARM (800-782-8332)

Or by mail at:

1 State Farm Plaza  
Bloomington, IL, 61710-0001  
Email: home.ccc-customer-feedback.314o00@statefarm.com

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:

800-252-3439

You may write the Texas Department of Insurance:

1601 Congress Avenue  
P.O. Box 12030  
Austin, TX 78701  
Fax: (512) 490-1007  
Web: www.tdi.texas.gov  
E-mail: ConsumerProtection@tdi.texas.gov

To obtain price and policy form comparisons and other information relating to residential property insurance and personal automobile insurance, you may visit the Texas Department of Insurance/Office of Public Insurance Counsel website:

www.helpinsure.com

PREMIUM OR CLAIM DISPUTES:

If you have a problem with a claim or your premium, call your insurance company or HMO first. If you can't work out the issue, the Texas Department of Insurance may be able to help. Even if you file a complaint with the Texas Department of Insurance, you should also file a complaint or appeal through your insurance company or HMO. If you don't, you may lose your right to appeal.

ATTACH THIS NOTICE TO YOUR POLICY:

This notice is for information only and does not become a part or condition of the attached document.

AVISO IMPORTANTE

Para obtener información o para presentar una queja:

Usted puede llamar al número de teléfono gratuito de State Farm® para obtener información o para presentar una queja al:

800-STATEFARM (800-782-8332)

O por correo a:

1 State Farm Plaza  
Bloomington, IL 61710-0001  
Correo electrónico: home.ccc-customer-feedback.314o00@statefarm.com

Usted puede comunicarse con el Departamento de Seguros de Texas para obtener información sobre compañías, coberturas, derechos o quejas al:

800-252-3439

Usted puede escribir al Departamento de Seguros de Texas:

1601 Congress Avenue  
P.O. Box 12030  
Austin, TX 78701  
Fax: (512) 490-1007  
Web: www.tdi.texas.gov  
E-mail: ConsumerProtection@tdi.texas.gov

Para obtener formas para la comparación de precios y pólizas y para obtener otra información sobre el seguro de propiedad residencial y de seguro de automóvil personal, visite el sitio web del Departamento de Seguros de Texas/Oficina del Asesor Público de Seguros:

www.helpinsure.com

DISPUTAS SOBRA PRIMAS DE O RECLAMACIONES:

Si usted tiene un problema con un reclamo o con las primas de su póliza, llame primero a su compañía de seguros u Organización del Mantenimiento de la Salud (HMO, por sus siglas en inglés). Si no puede resolver el asunto, es posible que el Texas Department of Insurance ("Departamento de Seguros de Texas") pueda ayudarle. Aunque presente una denuncia al Texas Department of Insurance, también debería presentar una denuncia o apelación a través de su compañía de seguros o HMO. Si no lo hace, es posible que pierda su derecho de apelación.

ADJUNTE ESTE AVISO A SU PÓLIZA:

Este aviso es solamente para propósito de informativos y no se convierte en parte o en condición del documento adjunto.

## IMPORTANT NOTICE

The following information is being provided in accordance with Texas law.

Your policy includes provisions under SECTION I – CONDITIONS that state:

- You must file a claim with us not later than one year after the date of the loss that is the subject of the claim unless you show good cause for not filing the claim within this time period. Good cause means objective facts beyond your control that reasonably caused you to fail to file a claim under the policy within the one-year claim-filing deadline. If good cause is shown, we may extend the one-year claim-filing period.
- With respect to a loss caused by windstorm or hail in the catastrophe area as defined under Texas law, no suit or action may be brought against us unless it is started within the earlier of:
  - two years from the date we accept or reject the claim; or
  - three years from the date of the loss that is the subject of the claim.

***This Notice is provided for informational purposes only, and it does not change, modify or invalidate any of the provisions, terms or conditions of your policy, or any other applicable endorsements.***

553-3797 TX.3 (C)

553-4156

## PREMIUM ADJUSTMENT

Insurance premiums have been adjusted and continue to reflect the expected cost of claims. Some policyholders will see their premiums increase while other policyholders may see their premiums decrease or stay the same. The amount your premium changed, if at all, depends on several factors including the expected claim experience in your area, the coverage you have, and any applicable discounts or charges.

The enclosed Renewal Declarations reflects your new premium.

State Farm® works hard to offer you the best combination of cost, protection, and service. We will continue doing our best to make the most effective use of your premium dollars and give you superior service when you need it.

If you have any questions about your premium, or policy coverages, please contact your State Farm agent.

553-4156



## NOTICE TO POLICYHOLDER

For a comprehensive description of coverages and forms, please refer to your policy.

Policy changes that you requested before the “Date Prepared” on your Renewal Declarations are effective on the renewal date of this policy unless indicated otherwise by a separate endorsement, binder or Amended Declarations Page. Any coverage forms or endorsements included with your Renewal Declarations are effective on the renewal date of this policy.

Policy changes that you requested after the “Date Prepared” on your Renewal Declarations will be sent to you as an Amended Declarations Page or as an endorsement to your policy. You will be billed for any resulting premium increase later.

If you have acquired any valuable property items, made any improvements to your home, or have questions about your insurance coverage, please contact your State Farm® agent.

553-4157 (C)

553-4303 TX

## Important Notice Regarding Your Policy

The Texas Department of Insurance requires all insurance companies to provide the following information to their policyholders:

Flood Insurance: You may also need to consider the purchase of flood insurance. Your insurance policy does not include coverage for damage resulting from a flood even if hurricane winds and rain caused the flood to occur. Without separate flood insurance coverage, you may have uncovered losses caused by a flood. Please discuss the need to purchase separate flood insurance coverage with your insurance agent or insurance company, or visit [www.floodsmart.gov](http://www.floodsmart.gov).

Please refer to your policy for terms and conditions that apply.

553-4303 TX

553-2798.1

## IMPORTANT NOTICE ABOUT YOUR POLICY

With our Claim Record Rating Plan, your savings will typically increase the fewer claims you have and the longer you’re insured with State Farm®. We adjust premiums based on the number of claims under the rating plan. Depending on your state, claims under the plan generally include those resulting in a paid loss and may include weather-related claims where permitted. In addition, any claims with your prior insurer resulting in property damage or injury may also influence your premium.

Our Loyal Customer Discount provides a premium discount based on the number of years that you have been with us.

For more information about whether the Claim Record Rating Plan applies in your state, the claims we consider for the plan, or whether the Loyal Customer Discount is in effect in your state, please contact your State Farm agent.

553-2798.1

