

STANDARD FLOOD INSURANCE APPLICATION

MONARCH NATIONAL INSURANCE COMPANY

https://monarchnational.com/

(800) 219-3102

PO Box 2057 Kalispell MT 59903 USA

Date **Application Number Effective Date Expiration Date** Waiting Period FLD5715007615 05-07-2024 05-07-2025 05-07-2024 Loan Transaction - No Wait Insured Name(s) Property Address Mailing Address & Phone Agency Name, Address & Phone YUNIER SUAREZ CALZADA 3054 NW 98th St, Miami, FL, 33147 3054 NW 98TH ST, Miami, 5951 NW 151ST ST STE 105, Hialeah, FL, 33014 Miami-Dade, FL, 33147 Home Phone: Email:alexandra.option1@gmail.com Work Phone: Property Address Type:Location Phone Number: 3059019993 Cell Phone:(305)560-3497 Agent Name: OPTION 1 INSURANCE AGENCY LLC Email:kitayponcorp@gmail.com Applicant Type:INDIVIDUAL **Prior Company NAIC:** Other Policy Number: **Prior Policy Number: Potential Duplicate Policy: Prior Company Name:** Renewal Billing: 1st Mortgagee FREEDOM MORTGAGE CORPORATION ISAOA ATIMA PO Box 5050, Troy, Oakland County, MI, 48007 Phone Number: Fax Number: Loan Number:148006562 Required under Mandatory Purchase: **Current Community Information** Community Name: MIAMI-DADE COUNTY* Community Number:120635 **Prior Community Information** Map Panel:0301 Community Number: Map Panel Suffix:L Map Panel: Current Flood Zone:AH Map Panel Suffix: Current Base Flood Elevation(BFE):9 Flood Zone: FIRM Date:09-29-1972 FIRM Date:09-29-1972 Program:FLOODREGULAR Has This Property Been Remapped?: **Program Status: Map Revision Date:** County:Miami-Dade Current Map Date:09-29-1972 Rating Map Date: **Prior Policy Information** Is this a new purchase (within the last year)?:NO **Prior Owner Policy Number: Construction Date** Date of Original Construction:12-31-1957 Prior Owner Company Name: Did the applicant have a prior NFIP policy for **Building Substantially Improved:**NO the building that lapsed?: Post-FIRM Construction:NO Was the policy receviing a PRE-FIRM or **Substantial Improvement Date:** Newly Mapped disocount?: **Building is on list of Historic Buildings:** Mapped discount when it lapsed?: Did the Policy lapse for a valid reason?: Occupancy Information Occupancy Type:Single Family Is the insured a small business with **Building Description:** less than 100 employees?: Is the insured a nonprofit entity?:NO Is this the Applicant's Primary Residence:

Date:





STANDARD FLOOD INSURANCE QUOTE

PO Box 2057 Kalispell MT 59903 USA

MONARCH NATIONAL INSURANCE COMPANY

https://monarchnational.com/

(800) 219-3102

Application Number Effective Date **Expiration Date** Waiting Period Date FLD5715007615 05-07-2024 05-07-2025 05-07-2024 Loan Transaction - No Wait Building Located Over Water: Not over Water **Building Information** Building Located In CBRS/OPA:NO **Building in Course of Construction:**NO CBRS/OPA Designation Date: **Building Construction Type:**Masonry If the building is in the buffer zone, did USFWS issue an official determination **Construction Type Description:** showing the building outside the system unit or OPA?: Estimated Building Replacement Cost:287800 Is the building use consistent with the Replacement Cost Value Returned by FEMA 297819 protected area purpose?: Total sq. footage of building:2034 Prior NFIP Claims: Total # of floors in building:1 **Building Severe Repetitive Loss (SRL)** Total # of units in building:1 Property: What floor is the unit located on?: Property on NFIP SRL list, Document(s) Number of Detached Structures:0 provided indicating non-SRL: **Building Located on Federal Land:** Coverage Req'd for Disaster Assistance: Is the policy force-placed by the lender?: **Foundation Information** Mobilehome/Travel Trailer Information Foundation:Slab on Grade (non-elevated) On Permanent Foundation: Enclosure/Crawlspace Size: Anchored By: Serial Number: Number of Elevators: Venting Information (excluding V-Zones) Area of Permanent Openings (Sq. In.): Enclosure/Crawlspace Has Valid Flood Openings: Has Engineered Openings: Number of Openings: Does the building contain machinery and **Building Machinery, Equipment and Appliances** equipment servicing the building?: Does the building contain appliances?: Is all machinery and equipment servicing Are all appliances elevated above the first floor?: the building, located inside or outside the building, elevated above the first floor?: NO

Elevation Certificate Information Elevation Certificate Section Used:C Elevation Certificate Date:02-04-2022 Diagram Number:18

Diagram Number:1B Top of Bottom Floor:9.8 Top of Next Higher Floor: Lowest Adjacent Grade (LAG):8.7 Floodproofing Certificate:

Flood Proofing Elevation: Lowest (Rating) Floor Elevation:

Elevation Certificate First Floor Height: 1.1 FEMA First Floor Height: 1.1

Date

First Floor Height Method Used:EC

Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	5,000.00	Building Premium:	\$ 469.00
Content	0.00	0.00	Content Premium:	\$ 0.00
			Increased Cost of Compliance (ICC) Premium	\$ 9.00
			Mitigation Discount	\$ 0.00
			Community Rating System Reduction	\$ (99.00)
			Full Risk Premium:	\$ 379.00
			Annual Increase Cap Discount	\$ 0.00
			Pre-Firm Discount	\$ 0.00
			Discounted Premium	\$ 379.00
			Reserve Fund Assessment	\$ 68.00
			HFIAA Surcharge:	\$ 25.00
			Federal Policy Fee	\$ 47.00
			Probation Surcharge	\$ 0.00
			Total Quoted Premium	\$ 519.00

Signature of Policy Holder (Optional)

Date:



Signature of Insurance Agent/Producer

Date