

SELECTIVE

BE UNIQUELY INSURED®

PCS INSURANCE GROUP INC
3315 HENDERSON BLVD SUITE 200
TAMPA, FL 33609

Agency Phone: (813) 868-1010

NFIP Policy Number: 0002534962
Company Policy Number: FLD2534962
Agent: PCS INSURANCE GROUP INC

Payor: INSURED
Policy Term: 08/15/2026 12:01 AM - 08/15/2027 12:01 AM
Policy Form: RCBAP

To report a claim visit or call us at: <https://customer.myselectiveflood.com>
(877) 348-0552

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

DELIVERY ADDRESS

EASTWOOD SHORES CONDOMINIUM
C/O AMERI-TECH PROPRETY MGMT
24701 US HIGHWAY 19 N STE 102
CLEARWATER, FL 33763-4086

INSURED NAME(S) AND MAILING ADDRESS

EASTWOOD SHORES CONDOMINIUM
C/O AMERI-TECH PROPRETY MGMT
24701 US HIGHWAY 19 N STE 102
CLEARWATER, FL 33763-4086



COMPANY MAILING ADDRESS

Selective Ins Co of the Southeast
PO BOX 782747
PHILADELPHIA, PA 19178-2747

INSURED PROPERTY LOCATION

2935 BOUGH AVE
CLEARWATER, FL 33760-1582

RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING
NUMBER OF UNITS: 4 UNITS
PRIMARY RESIDENCE: NO
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 2 FLOOR(S)

PRIOR NFIP CLAIMS: 0 CLAIM(S)

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

LOAN NO: N/A

SECOND MORTGAGEE:

LOAN NO: N/A

ADDITIONAL INTEREST:

LOAN NO: N/A

DISASTER AGENCY:

CASE NO: N/A

DISASTER AGENCY: N/A

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$833,000	\$2,000
CONTENTS:	N/A	N/A

SEE POLICY FORM FOR INFORMATION ON COVERAGE LIMITATIONS AND COINSURANCE PENALTIES.

PLEASE REVIEW THIS DECLARATION PAGE. INACCURATE INFORMATION MAY LEAD TO CLAIM PROCESSING DELAYS.
QUESTIONS OR CHANGES NEEDED, PLEASE CONTACT YOUR AGENCY.

COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$4,964.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$1,938.00)
FULL RISK PREMIUM:	\$3,101.00
ANNUAL INCREASE CAP DISCOUNT:	(\$2,197.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$904.00
RESERVE FUND ASSESSMENT:	\$163.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$188.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$1,505.00

IN WITNESS WHEREOF, I have signed this policy below and enter in to this Insurance Agreement

Michael H. Lanza / Secretary

John Marchioni / Chairman, President & CEO

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Selective Ins Co of the Southeast

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 39926



File: 33592442

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