

LIFE . HOME . CAR . BUSINESS MARENGO INSURANCE AGENCY INC

PO BOX 1045

DEMOPOLIS, AL 36732-1045

Agency Phone: (334) 289-0828

**NFIP Policy Number:** 3002088039 Company Policy Number: 3002088039

Agency Code:

17047900 **INSURED** 

Payor: **Policy Term:** 

08/18/2023 12:01 AM - 08/18/2024 12:01 AM

Policy Form:

RCBAP

To report a claim

https://auto-owners.manageflood.com

visit or call us at: (888) 481-1140

## RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

CRYSTAL TOWER CONDOMINIUM ASSOCIATION, INC.

P.O. BOX 3813

**GULF SHORES, AL 36547** 

**INSURED NAME(S) AND MAILING ADDRESS** 

CRYSTAL TOWER CONDOMINIUM ASSOCIATION, INC.

P.O. BOX 3813

GULF SHORES, AL 36547

**COMPANY MAILING ADDRESS** 

AUTO-OWNERS INSURANCE COMPANY

PO BOX 912398

0802

29T91AXCXU0

000

1901

**DELIVERY ADDRESS** 

DENVER, CO 80291-2398

1010 W BEACH BLVD

**GULF SHORES, AL 36542-6244** 

RATING INFORMATION

**BUILDING OCCUPANCY:** 

RESIDENTIAL CONDOMINIUM BUILDING

NUMBER OF UNITS: PRIMARY RESIDENCE:

NO

PROPERTY DESCRIPTION:

ELEVATED WITH ENCLOSURE ON POSTS, PILES OR PIERS, 20

FLOOR(S)

**170 UNITS** 

PRIOR NFIP CLAIMS:

0 CLAIM(S)

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

RATE CATEGORY — RATING ENGINE

COVERAGE DEDUCTIBLE \$42,500,000 \$1,250

**BUILDING:** CONTENTS:

N/A

N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.

Please review this declaration page for accuracy. If any changes are needed, contact your agent.

Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit

FloodSmart.gov/floodcosts.

INSURED PROPERTY LOCATION

**BUILDING DESCRIPTION:** 

ENTIRE RESIDENTIAL CONDOMINIUM BUILDING

BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE:

\$44,084,851.00

DATE OF CONSTRUCTION:

06/15/2006

CURRENT FLOOD ZONE: FIRST FLOOR HEIGHT (FFFT): AF 8.5

FIRST FLOOR HEIGHT METHOD:

**ELEVATION CERTIFICATE** 

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A

DISASTER AGENCY: N/A

**COMPONENTS OF TOTAL AMOUNT DUE** 

BUILDING PREMIUM:

CONTENTS PREMIUM:

INCREASED COST OF COMPLIANCE (ICC) PREMIUM: \$75.00

MITIGATION DISCOUNT:

(\$0.00)(\$0.00)

\$35,320.00

(\$5,202.00)

\$0.00

FULL RISK PREMIUM:

COMMUNITY RATING SYSTEM REDUCTION: \$35,395.00 ANNUAL INCREASE CAP DISCOUNT:

STATUTORY DISCOUNTS:

(\$0.00)**DISCOUNTED PREMIUM:** \$30,193.00

RESERVE FUND ASSESSMENT:

\$5,435.00 HFIAA SURCHARGE:

FEDERAL POLICY FEE: PROBATION SURCHARGE:

\$250.00 \$2,080,00 \$0.00

TOTAL ANNUAL PREMIUM:

\$37,958.00

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number:

18988

File: 29363707

Policy issued by: AUTO-OWNERS INSURANCE COMPANY

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