



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
05/21/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

PRODUCER FCA Insurance 813 State Route A1A New Smyrna Beach, FL 32169	CONTACT NAME: Jennifer Weller
	PHONE (A/C, No, Ext): (386) 410-2983 FAX (A/C, No):
	E-MAIL ADDRESS: jennifer@callfca.com
	PRODUCER CUSTOMER ID: WATECON-11
	INSURER(S) AFFORDING COVERAGE NAIC #
INSURED 401 Management Inc. dba Watermark Condominium 401 N Atlantic Ave Unit 103 New Smyrna Beach, FL 32169	INSURER A : Cypress Property & Casualty Insurance Company 10953
	INSURER B : Superior Specialty Insurance Company 16551
	INSURER C : Travelers Excess and Surplus Lines Company 29696
	INSURER D : Citizens Property Insurance Corporation 10064
	INSURER E :
	INSURER F :

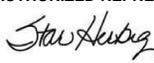
COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS	
A	<input checked="" type="checkbox"/> PROPERTY	CCP0000368-01	05/21/2025	05/21/2026	<input checked="" type="checkbox"/> BUILDING	\$ 10,341,315	
	CAUSES OF LOSS				DEDUCTIBLES	<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 50,000
	<input type="checkbox"/> BASIC				BUILDING	<input type="checkbox"/> BUSINESS INCOME	\$
	<input type="checkbox"/> BROAD				5,000	<input type="checkbox"/> EXTRA EXPENSE	\$
	<input checked="" type="checkbox"/> SPECIAL				CONTENTS	<input type="checkbox"/> RENTAL VALUE	\$
	<input type="checkbox"/> EARTHQUAKE				5,000	<input type="checkbox"/> BLANKET BUILDING	\$
	<input type="checkbox"/> WIND					<input type="checkbox"/> BLANKET PERS PROP	\$
	<input type="checkbox"/> FLOOD					<input type="checkbox"/> BLANKET BLDG & PP	\$
	<input checked="" type="checkbox"/> Replcmnt Cost					<input checked="" type="checkbox"/> Ord/Law "A"	\$ 10,341,315
	<input checked="" type="checkbox"/> Agreed Value					<input checked="" type="checkbox"/> Ord/Law "B & C"	\$ 258,533
	<input type="checkbox"/> INLAND MARINE	TYPE OF POLICY				\$	
	CAUSES OF LOSS					\$	
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER				\$	
B	<input checked="" type="checkbox"/> CRIME	TLUCAP501537-00	01/21/2025	01/21/2026	<input checked="" type="checkbox"/> Employee Dishonesty	\$ 250,000	
	TYPE OF POLICY					\$	
C	<input checked="" type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN	1X398423	05/21/2025	05/21/2026	<input checked="" type="checkbox"/> Equipment Breakdown	\$ 10,446,325	
						\$	
D	<input checked="" type="checkbox"/> Commercial Wind Poli	09690259	05/21/2025	05/21/2026	<input checked="" type="checkbox"/> 3% Hurr/1% Wind	\$ 10,197,000	
						\$	

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 36 Unit Condominium Association. Coverage is "Walls-Out"
 3% Named Storm Deductible. 1% All Other Wind/Hail Deductible. Waiver of Rights of Recovery. Crime Policy lists Property Manger on the Include Designated Agents as Employees endorsement. 30 Day Cancellation Notice except 10 days for Non Payment of Premium.

CERTIFICATE HOLDER	CANCELLATION
EVIDENCE OF INSURANCE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 



ASSURANT[®]

**American Bankers Insurance Company of Florida
Scottsdale, AZ**

Renewal Flood Insurance Policy Declarations

This Declarations Page is part of your Policy.

Policy Term: 08/18/2024 (12:01 a.m.) to 08/18/2025 (12:01 a.m.)

NAIC: 10111

Policy Number: 5000671429

First Mortgagee / Lender Name:

Named Insured and Mailing Address:

401 MANAGEMENT INC
350 N CAUSEWAY
% CHARLES BELOITE
NEW SMYRNA BEACH, FL 32169-5233

Loan Number:

Producer Number: 60353-59036-002

Second Mortgagee / Lender Name:

Premium Payor: INSURED

Property Location:

401 N ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169-2582

Loan Number:

Other / Loss Payee:

For Service Please Contact:

HERBIG INS & FINAN SERV
813 A1A
NEW SMYRNA BEACH, FL 32169-2807
386-944-5555



Loan Number:

LOCATION AND PROPERTY INFORMATION

Date of Construction: 06/16/1980	Number Of Units: 36
Building Occupancy: Residential Condo Building	Primary Residence: No
Method Used to Determine First Floor Height: FEMA determined	Prior NFIP Claims: 0 claim(s)
Building Description: Entire Residential Condo Building	First Floor Height: 1.00 ft
Property Description: SLAB ON GRADE, THREE OR MORE FLOORS, MASONRY CONSTRUCTION	Replacement Cost: \$ 10,330,800

Your property's NFIP flood claims history can affect your premium.

COVERAGE AND PREMIUM INFORMATION

Rate Category: FEMA Rating Engine

Coverage Type	Coverage Limit	Deductible	Premium
Building	\$ 9,000,000	\$ 5,000	\$ 12,374.00
Contents	\$ 0	\$ 0	\$ 0.00
		Increased Cost of Compliance:	\$ 75.00
		Community Rating System Discount:	\$ -3,064.00
		Full Risk Premium Excluding Fees and Surcharges:	\$ 9,385.00

STATUTORY DISCOUNTS

Discounted Premium: \$ 9,385.00

FEEES AND SURCHARGES

Reserve Fund Assessment:	\$ 1,689.00
Homeowner Flood Insurance Affordability Act of 2014 (HFIAA) Surcharge:	\$ 250.00
Federal Policy Fee:	\$ 1,260.00

TOTAL PREMIUM, DISCOUNTS, FEES AND SURCHARGES PAID \$ 12,584.00

Coverage limitations may apply. See your NFIP RCBAP Form for details.
Refer to www.FloodSmart.gov/floodcosts for more information about flood risk and policy rating.

NFIP POLICY NUMBER: 5000671429