

09115052116207

POLICY NO. FL
7/25/2017 - 7/25/2018

POLICY TERM
\$500,000.00

AMT OF BLDG COV AT TIME OF LOSS
\$319,100.00

AMT OF CONTS COV AT TIME OF LOSS

DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

PROOF OF LOSS
(See reverse side for Privacy Act Statement and
Paperwork Burden Disclosure Notice)

O.M.B. No. 1660-0005
Expires April 30, 2017

BROWN AND BROWN OF FLORIDA
INC
AGENT
PO BOX 2412 , DAYTONA BEACH, FL
32115
AGENCY AT

TO THE NATIONAL FLOOD INSURANCE PROGRAM:

At time of loss, by above indicated policy of insurance, you insured the interest of
CITY OF DAYTONA BEACH; 301 S BEACH ST; DAYTONA BEACH, FL 32114

against loss by flood to the property described according to the terms and conditions of said policy and of all forms, endorsements, transfers and assignments attached thereto.

TIME AND ORIGIN A Flood loss occurred about the hour of Eight o'clock AM.,
on the 10 day of September, 2017 . The cause of the said loss was:
Stream, River, Lake Overflow

OCCUPANCY The premises described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever:
Owner

INTEREST No other person or persons had any interest therein or encumbrance thereon except:
None

1. FULL AMOUNT OF INSURANCE applicable to the property for which claim is presented is	\$819,100.00
2. ACTUAL CASH VALUE of building structures	\$628,762.36
3. ADD ACTUAL CASH VALUE OF CONTENTS of personal property insured	\$61,022.65
4. ACTUAL CASH VALUE OF ALL PROPERTY	\$689,785.01
5. FULL COST OF REPAIR OR REPLACEMENT (Building and Contents).....	\$82,084.53
6. LESS APPLICABLE DEPRECIATION	\$4,852.77
7. ACTUAL CASH VALUE LOSS is	\$77,231.76
8. LESS DEDUCTIBLES	\$20,000.00
9. NET AMOUNT CLAIMED under above numbered policy is	\$57,231.76

The said loss did not originate by any act, design or procurement on the part of your insured, nothing has been done by or with the privity or consent of your insured to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss, no property saved has in any manner been concealed, and no attempt to deceive the said insurer as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

I understand that this insurance (policy) is issued Pursuant to the National Flood Insurance Act of 1968, or Any Act Amendatory thereof, and Applicable Federal Regulations in Title 44 of the Code of Federal Regulations, Subchapter B, and that knowingly and willfully making any false answers or misrepresentations of fact may be punishable by fine, imprisonment, or both under applicable United States Codes.

Subrogation - To the extent of the payment made or advanced under this policy; the insured hereby assigns, transfers and sets over the insurer all rights, claims or interest that he has against any person, firm or corporation liable for the loss or damage to the property for which payment is made or advanced. He also hereby authorizes the insurer to sue any such third party in his name.

The insured hereby warrants that no release has been given or will be given or settlement or compromise made or agreed upon with any third party who may be liable in damages to the insured with respect to the claim being made herein.

The furnishing of this blank or the preparation of proofs by a representative of the above insurer is not a waiver of any of its rights.

I declare under penalty of perjury that the information contained in the foregoing is true and correct to the best of my knowledge and belief.

Executed this _____ day of _____, 20 _____

Name _____

09115052116707

POLICY NO. FL
7/25/2017 - 7/25/2018
POLICY TERM
\$500,000.00
AMT OF BLDG COV AT TIME OF LOSS
\$0.00
AMT OF CONTS COV AT TIME OF LOSS

DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 1660-0005
Expires April 30, 2017

PROOF OF LOSS

(See reverse side for Privacy Act Statement and
Paperwork Burden Disclosure Notice)

AGENT

AGENCY AT

TO THE NATIONAL FLOOD INSURANCE PROGRAM:

At time of loss, by above indicated policy of insurance, you insured the interest of
City Of Daytona Beach; 105 E Orange Ave; Daytona Beach, FL 32114-4405

against loss by flood to the property described according to the terms and conditions of said policy and of all forms, endorsements, transfers and
assignments attached thereto.

TIME AND ORIGIN A Flood loss occurred about the hour of o'clock
on the 10 day of September, 2017. The cause of the said loss was:
Stream, River, Lake Overflow

OCCUPANCY The premises described, or containing the property described, was occupied at the time of the loss as follows, and for no other
purpose whatever:
Tenant

INTEREST No other person or persons had any interest therein or encumbrance thereon except:
None

1. FULL AMOUNT OF INSURANCE applicable to the property for which claim is presented is	\$500,000.00
2. ACTUAL CASH VALUE of building structures	\$354,042.78
3. ADD ACTUAL CASH VALUE OF CONTENTS of personal property insured	\$30,000.00
4. ACTUAL CASH VALUE OF ALL PROPERTY	\$384,042.78
5. FULL COST OF REPAIR OR REPLACEMENT (Building and Contents).....	\$128,261.73
6. LESS APPLICABLE DEPRECIATION	\$12,963.83
7. ACTUAL CASH VALUE LOSS is	\$115,297.90
8. LESS DEDUCTIBLES	\$10,000.00
9. NET AMOUNT CLAIMED under above numbered policy is	\$105,297.90

The said loss did not originate by any act, design or procurement on the part of your insured, nothing has been done by or with the privity or consent of
your insured to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were
destroyed or damaged at the time of said loss, no property saved has in any manner been concealed, and no attempt to deceive the said insurer as to
the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

I understand that this insurance (policy) is issued Pursuant to the National Flood Insurance Act of 1968, or Any Act Amendatory thereof, and
Applicable Federal Regulations in Title 44 of the Code of Federal Regulations, Subchapter B, and that knowingly and willfully making any
false answers or misrepresentations of fact may be punishable by fine, imprisonment, or both under applicable United States Codes.

Subrogation - To the extent of the payment made or advanced under this policy; the insured hereby assigns, transfers and sets over the insurer all rights,
claims or interest that he has against any person, firm or corporation liable for the loss or damage to the property for which payment is made or
advanced. He also hereby authorizes the insurer to sue any such third party in his name.

The insured hereby warrants that no release has been given or will be given or settlement or compromise made or agreed upon with any third party who
may be liable in damages to the insured with respect to the claim being made herein.

The furnishing of this blank or the preparation of proofs by a representative of the above insurer is not a waiver of any of its rights.

I declare under penalty of perjury that the information contained in the foregoing is true and correct to the best of my knowledge and belief.

Executed this _____ day of _____, 20 _____

Name _____

09115052116607

POLICY NO. FL
7/25/2017 - 7/25/2018

POLICY TERM
\$318,500.00

AMT OF BLDG COV AT TIME OF LOSS
\$0.00

AMT OF CONTS COV AT TIME OF LOSS

DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 1660-0005
Expires April 30, 2017

PROOF OF LOSS

(See reverse side for Privacy Act Statement and
Paperwork Burden Disclosure Notice)

AGENT _____

AGENCY AT _____

TO THE NATIONAL FLOOD INSURANCE PROGRAM:

At time of loss, by above indicated policy of insurance, you insured the interest of
City Of Daytona Beach; Clubhouse Orange Ave; Daytona Beach, FL 33115-0000

against loss by flood to the property described according to the terms and conditions of said policy and of all forms, endorsements, transfers and assignments attached thereto.

TIME AND ORIGIN A Flood loss occurred about the hour of Twelve o'clock AM.,
on the 10 day of September, 2017. The cause of the said loss was:
Stream, River, Lake Overflow

OCCUPANCY The premises described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever:
Tenant

INTEREST No other person or persons had any interest therein or encumbrance thereon except:
None

1. FULL AMOUNT OF INSURANCE applicable to the property for which claim is presented is	\$318,500.00
2. ACTUAL CASH VALUE of building structures	\$257,094.22
3. ADD ACTUAL CASH VALUE OF CONTENTS of personal property insured	\$20,000.00
4. ACTUAL CASH VALUE OF ALL PROPERTY	\$277,094.22
5. FULL COST OF REPAIR OR REPLACEMENT (Building and Contents).....	\$115,370.35
6. LESS APPLICABLE DEPRECIATION	\$11,524.91
7. ACTUAL CASH VALUE LOSS is	\$103,845.44
8. LESS DEDUCTIBLES	\$10,000.00
9. NET AMOUNT CLAIMED under above numbered policy is	\$93,845.44

The said loss did not originate by any act, design or procurement on the part of your insured, nothing has been done by or with the privity or consent of your insured to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss, no property saved has in any manner been concealed, and no attempt to deceive the said insurer as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

I understand that this insurance (policy) is issued Pursuant to the National Flood Insurance Act of 1968, or Any Act Amendatory thereof, and Applicable Federal Regulations in Title 44 of the Code of Federal Regulations, Subchapter B, and that knowingly and willfully making any false answers or misrepresentations of fact may be punishable by fine, imprisonment, or both under applicable United States Codes.

Subrogation - To the extent of the payment made or advanced under this policy; the insured hereby assigns, transfers and sets over the insurer all rights, claims or interest that he has against any person, firm or corporation liable for the loss or damage to the property for which payment is made or advanced. He also hereby authorizes the insurer to sue any such third party in his name.

The insured hereby warrants that no release has been given or will be given or settlement or compromise made or agreed upon with any third party who may be liable in damages to the insured with respect to the claim being made herein.

The furnishing of this blank or the preparation of proofs by a representative of the above insurer is not a waiver of any of its rights.

I declare under penalty of perjury that the information contained in the foregoing is true and correct to the best of my knowledge and belief.

Executed this _____ day of _____, 20 _____

Name _____

09115052116807

POLICY NO. FL
7/25/2017 - 7/25/2018

DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 1660-0005
Expires April 30, 2017

POLICY TERM
\$25,700.00

PROOF OF LOSS
(See reverse side for Privacy Act Statement and
Paperwork Burden Disclosure Notice)

AGENT

AMT OF BLDG COV AT TIME OF LOSS
\$0.00

AGENCY AT

AMT OF CONTS COV AT TIME OF LOSS

TO THE NATIONAL FLOOD INSURANCE PROGRAM:

At time of loss, by above indicated policy of insurance, you insured the interest of
City Of Daytona Beach; 105 E Orange Ave; Daytona Beach, FL 32114-4405

against loss by flood to the property described according to the terms and conditions of said policy and of all forms, endorsements, transfers and assignments attached thereto.

TIME AND ORIGIN A Flood loss occurred about the hour of _____ o'clock _____
on the 10 day of September, 2017. The cause of the said loss was:

Stream, River, Lake Overflow

OCCUPANCY The premises described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever:

Tenant

INTEREST No other person or persons had any interest therein or encumbrance thereon except:

None

1. FULL AMOUNT OF INSURANCE applicable to the property for which claim is presented is	\$25,700.00
2. ACTUAL CASH VALUE of building structures	\$57,783.62
3. ADD ACTUAL CASH VALUE OF CONTENTS of personal property insured	\$5,000.00
4. ACTUAL CASH VALUE OF ALL PROPERTY	\$62,783.62
5. FULL COST OF REPAIR OR REPLACEMENT (Building and Contents).....	\$6,187.48
6. LESS APPLICABLE DEPRECIATION	\$518.99
7. ACTUAL CASH VALUE LOSS is	\$5,668.49
8. LESS DEDUCTIBLES	\$5,668.49
9. NET AMOUNT CLAIMED under above numbered policy is	\$0.00

The said loss did not originate by any act, design or procurement on the part of your insured, nothing has been done by or with the privity or consent of your insured to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss, no property saved has in any manner been concealed, and no attempt to deceive the said insurer as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof.

I understand that this insurance (policy) is issued Pursuant to the National Flood Insurance Act of 1968, or Any Act Amendatory thereof, and Applicable Federal Regulations in Title 44 of the Code of Federal Regulations, Subchapter B, and that knowingly and willfully making any false answers or misrepresentations of fact may be punishable by fine, imprisonment, or both under applicable United States Codes.

Subrogation - To the extent of the payment made or advanced under this policy; the insured hereby assigns, transfers and sets over the insurer all rights, claims or interest that he has against any person, firm or corporation liable for the loss or damage to the property for which payment is made or advanced. He also hereby authorizes the insurer to sue any such third party in his name.

The insured hereby warrants that no release has been given or will be given or settlement or compromise made or agreed upon with any third party who may be liable in damages to the insured with respect to the claim being made herein.

The furnishing of this blank or the preparation of proofs by a representative of the above insurer is not a waiver of any of its rights.

I declare under penalty of perjury that the information contained in the foregoing is true and correct to the best of my knowledge and belief.

Executed this _____ day of _____, 20 _____

Name _____