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AFFORDED BY THE POLICIE		-	COMPANY				
	A/C, No, Ex	tt): (850) 432-7474					
Fisher Brown Bottrell			Great American I	nsurance			
19 West Garden Street,	Suite	300					
Pensacola, FL 32502							
Fax: (850) 438-4678							
FAX (A/C, No):	E-MAIL ADDRESS):					
CODE:		SUB CODE:					
AGENCY CUSTOMER ID #:							
INSURED			LOAN NUMBER	POLICY NU	MBER		
Seachase Owners Associa	ation I	Inc	Unk	MACE695	536101		
c/o Seachase Owners As:	sociati	lon Inc	EFFECTIVE DATE	EXPIRATION	DATE	CONTINUI	
25240 Perdido Beach Bl	vd		04/05/2022	04/05/2023			TED IF CHECKED
Orange Beach, AL 36561			THIS REPLACES PRIOR EVI	DENCE DATED:			
orange beach, Al 50501			VDG				
PROPERTY INFORMATION							
	5174. 25	5240 & 25250 Perdido Beach Blvd	. Orange Beach. AL 3	6561			
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COVERAGE INFORMATION			1 POLICIES. LIMITS SHO	WIN MATHAV		REDUCED BI	PAID CLAIMS.
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COVERAGE INFORMATION			1 POLICIES. LIMITS SHC				
Loc # 1, Bldg # 1 Building Special			1 POLICIES. LIMITS SHO		AMOUNT	OF INSURANCE	DEDUCTIBLE
Loc # 1, Bldg # 1			1 POLICIES. LIMITS SHO		AMOUNT	OF INSURANCE	DEDUCTIBLE
Loc # 1, Bldg # 1 Building Special BPP Special			POLICIES. LIMITS SHO		AMOUNT	OF INSURANCE	DEDUCTIBLE
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2					AMOUNT \$20,73 \$100,0	OF INSURANCE 0,484 00	DEDUCTIBLE \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special					AMOUNT \$20,73 \$100,0 \$24,69	OF INSURANCE 0,484 00 0,556	DEDUCTIBLE \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2			1 POLICIES. LIMITS SHO		AMOUNT \$20,73 \$100,0	OF INSURANCE 0,484 00 0,556	DEDUCTIBLE \$10,000 \$10,000
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Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3			POLICIES. LIMITS SHO		AMOUNT \$20,73 \$100,0 \$24,69 \$60,00	OF INSURANCE 0,484 00 0,556 0	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special					AMOUNT \$20,73 \$100,0 \$24,69	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special					AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101		COVERAGE/PERILS/FORMS			AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
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Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions:	ial Cond	COVERAGE/PERILS/FORMS			AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions: All policies are subject	ial Cond	COVERAGE/PERILS/FORMS			AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
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Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions: All policies are subject SEE ATTACHED ACORD 101	ial Cond	COVERAGE/PERILS/FORMS			AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29	OF INSURANCE 0,484 00 0,556 0 9,168	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions: All policies are subject SEE ATTACHED ACORD 101 CANCELLATION	ial Cond	COVERAGE/PERILS/FORMS	s of the policy for	ns.	AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29 \$120,00	OF INSURANCE 0,484 00 0,556 0 9,168 00	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
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Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions: All policies are subject SEE ATTACHED ACORD 101 CANCELLATION SHOULD ANY OF THE ABOVE D MAIL N/A DAYS WRITTEN	ial Cond at to t DESCRIBE NOTICE	COVERAGE/PERILS/FORMS itions) he exclusions and limitations ED POLICIES BE CANCELLED BEFORE TH TO THE ADDITIONAL INTEREST NAMED I	s of the policy for HE EXPIRATION DATE THE SELOW, BUT FAILURE TO	ns. REOF, THE ISSU	AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29 \$120,00	OF INSURANCE 0,484 00 0,556 0 9,168 00 RER WILL ENDE	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
Loc # 1, Bldg # 1 Building Special BPP Special Loc # 1, Bldg # 2 Building Special BPP Special Loc # 1, Bldg # 3 Building Special BPP Special SEE ATTACHED ACORD 101 REMARKS (Including Speci Special Conditions: All policies are subject SEE ATTACHED ACORD 101 CANCELLATION SHOULD ANY OF THE ABOVE D MAILN/ADAYS WRITTEN OR LIABILITY OF ANY KIND UPO	ial Cond at to t DESCRIBE NOTICE	COVERAGE/PERILS/FORMS itions) he exclusions and limitations ED POLICIES BE CANCELLED BEFORE TH	s of the policy for HE EXPIRATION DATE THE SELOW, BUT FAILURE TO	ns. REOF, THE ISSU	AMOUNT (\$20,73) \$100,00 \$24,69 \$60,000 \$22,29 \$120,00	OF INSURANCE 0,484 00 0,556 0 9,168 00 RER WILL ENDE	DEDUCTIBLE \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
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NAME AND ADDRESS		MORTGAGEE		ADDITIONAL INSURED
For Information Only		LOSS PAYEE	Х	Proof of Master Assn Coverage Only
N/A N/A, AL 00000	LOA	N #		
Loan Number: Unk	Unl	2		

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AGENCY CUSTOMER ID: SEACCON-02

ACORD

LOC #:

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ADDITIONAL REMARKS SCHEDULE

Page 1 of 2

AGENCY Fisher Brown Bottrell Insurance, Inc.		NAMED INSURED Seachase Owners Association, Inc.
POLICY NUMBER		25240 Perdido Beach Blvd Orange Beach, AL 36561
TBD		
CARRIER	NAIC CODE	
Great American Assurance Company	26344	EFFECTIVE DATE: 04/05/2022
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO AC	ORD FORM,	
FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PR	OPERTY INSUR	ANCE
Coverage Information:		
Named Storm: 5% Per Location (sub to \$100k min) / \$5 Replacement Cost, Agreed Value Co-Insurance Waived Ordinance or Law Full Coverage A Combined B&C \$1,0 Equipment Breakdown Included, Walls In Coverage pe	d 000,000	
Remarks: Flood East Tower - American Bankers Ins Co of FL Pol Effective 5/23/21 - 5/23/22 Building \$14,500,000 Deductible \$1,250 Rated Zone B Current Zone VE Grandfathered - Yes 58 Units in Bldg	licy # 750592	02102021
Flood Center Tower - American Bankers Ins Co of FL F Effective 11/10/21 - 11/10/22 Building \$14,000,000 Deductible \$1,250 Rated Zone X Current Zone VE Grandfathered - Yes 56 Units in Bldg	Policy # 7505	9504182021
Flood West Tower - American Bankers Ins Co of FL Po Effective 11/10/21 - 11/10/22 Building \$18,250,000 Deductible \$1,250 Rated Zone X Current Zone VE Grandfathered - Yes 73 Units in Bldg	blicy # 75059	504192021
Owners Insurance Company GENERAL LIABILITY POL Policy Term: 7/11/2021-7/11/2022 General Aggregate: \$2,000,000 Each Occurence: \$1,000,000 Separation of Insureds Endorsement Included	LICY # 78403	522
Great American Alliance Insur. Company UMBRELLA I Policy Term: 7/11/2021-7/11/2022 General Aggregate: \$45,000,000 Each Occurence: \$45,000,00	Policy #UM3	0212977
Great American Assurance Company CRIME Policy #S Policy Term: 7/11/2021-7/11/2022 Employee Theft Limit: \$500,000	SA39256740	939602

AGENCY CUSTOMER ID: SEACCON-02

ACORD

LOC #:

Page <u>2</u> of <u>2</u>

ADDITIONAL REMA	RKS SCHEDULE
	NAMED INSURED

AGENCY		NAMED INSURED Seachase Owners Association, Inc.
Fisher Brown Bottrell Insurance, Inc.		25240 Perdido Beach Blvd
		Orange Beach, AL 36561
TBD		_
carrier Great American Assurance Company	NAIC CODE 26344	
	20344	EFFECTIVE DATE: 04/05/2022
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO AC		
FORM NUMBER: ACORD 27 FORM TITLE: EVIDENCE OF PR	OPERTY INSUR	ANCE
Deductible: \$2,500 Property Manager included for Employee Theft		
Great American Assurance D&O Policy #EPPE4559110 Policy Term: 7/11/2021-7/11/2022 Directors & Officers Coverage Limit: \$1,000,000 Deductible: \$5,000)2	
Deductible Buy Down - Lloyds of London Policy # MCI Property-Hurricane Buy Down to 1%	D210350	
Wind Insurers - Layered:		
\$10,000,000 Primary: Starstone \$5M part of \$10M Velocity \$2.5M part of \$10M Westchester \$2.5M part of \$10M		
\$10,000,000 layer excess of \$10,000,000 Markel \$5M part of \$10M x/s \$10M Rivington \$5M part of \$10M x/s \$10M		
\$5,000,000 layer excess of \$20,000,000 Axis \$5M		
\$5,000,000 layer excess of \$25,000,000 Munich Re \$5M		
\$43,630,418 layer excess of \$30,000,000 SRU \$43M		
X-WIND Great American Full \$73,680,418		



Policy Number: 75059202102021

FLOOD POLICY DECLARATIONS

ASSURANT[®] American Bankers Insurance Company of Florida

Current Zone: VE

Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal Policy Period: 05/23/2021 To 05/23/2022 Original New Business Effective Date: 05/23/2007 Reinstatement Date: Form: RCBAP

Producer Name and Mailing Address:

NFIP Policy Number: 7505920210

Agent/Agency #: 08151-00633-000

FISHER BROWN INSURANCE

19 W GARDEN ST STE 300

Reference #:

EAST TOWER

PENSACOLA, FL 32502-5650

Phone #: (850) 432-7474

25250 PERDIDO BEACH BLVD

Primary Residence: N

Grandfathered: Yes

Post-Firm Construction

Program Type: Regular

ORANGE BEACH, AL 36561-3101

Premium Payor: Insured Flood Risk/Rated Zone: B

Community Number: 01 5011 0667 H

Community Name: ORANGE BEACH, CITY OF

Property Location:

Address Info

(ALASSA)

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Property Info

Mortgage Info

N. COM

FISHER BROWN BOTTRELL INSURANCE INCORPORATED

For payment status, call: (800) 423-4403 These Declarations are effective

as of: 05/23/2021 at 12:01 AM

Insured Name and Mailing Address:

SEACHASE OWNERS ASSN INC. 25240 PERDIDO BEACH BLVD ORANGE BEACH, AL 36561-3191

NAIC Number: 10111

Processed by: Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695

Building Description:

Other Residential Three or More Floors Slab On Grade High Rise Main House

Newly Mapped into SFHA:

Elev Diff: N/A Elevated Building: N Includes Addition(s) and Extension(s) Replacement Cost: \$14,223,533 Number of Units: 58

Туре	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation				
Building:	14,500,000	1.330 / .075	1,250	14-	13,058.00	Premium Subtotal:	13,571.00			
Contents:	34,300	1.730 / .860	1,250		513.00	Multiplier:				
Contents	Lowest 1	Floor Only Abov	ve			ICC Premium:	8.00			
Location:	Ground 1	Level				CRS Discount:	679.00			
					·····	Reserve Fund Assmt:	2,322.00			
						HFIAA Surcharge:	250.00			
						Federal Policy Fee:	2,000.00			
						Probation Surcharge:	.00			
						Endorsement Amount:	.00			
Covera	ge Limitations	May Apply. See Yo	ur Policy F	orm for De	tails.	Total Premium Paid:	17,472.00			

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

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Refer to www.fema.gov/cost-of-flood for more information about the risk of flooding and how it impacts the cost of flood insurance.

American Bankers Insurance Company of Florida Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695

Mail To: Agent Renewal



FISHER BROWN BOTTRELL INSURANCE INCORPORATED FISHER BROWN INSURANCE 19 W GARDEN ST STE 300 PENSACOLA, FL 32502-5650

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FISHER BROWN INSURANCE

19 W GARDEN ST STE 300

PENSACOLA, FL 32502-5650

Policy Number: 75059504192021

FLOOD POLICY DECLARATIONS

ASSURANT® American Bankers Insurance Company of Florida

Current Zone: VE

Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal Policy Period: 11/10/2021 To 11/10/2022 Original New Business Effective Date: 01/01/2000 **Reinstatement Date:** Form: RCBAP

Producer Name and Mailing Address: FISHER BROWN BOTTRELL INSURANCE INCORPORATED

For payment status, call: (800) 423-4403 These Declarations are effective as of: 11/10/2021 at 12:01 AM

Insured Name and Mailing Address: SEACHASE OWNERS ASSOCIATION

WEST TOWER 25240 PERDIDO BEACH BLVD ORANGE BEACH, AL 36561-3191

NAIC Number: 10111

Processed by: Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695

Building Description:

Other Residential Three or More Floors Slab On Grade High Rise Main House CONDOMINIUM HIGH RISE

Newly Mapped into SFHA:

Elev Diff: N/A **Elevated Building:** N Includes Addition(s) and Extension(s)

Replacement Cost: \$19,130,020 Number of Units: 73

Sub Total Туре Coverage Rates Deduct Discount **Premium Calculation Building**: Premium Subtotal: 16,347.00 18,250,000 1.330 / .075 1,250 14-15,870.00 Contents: 1.730 / 1,250 Multiplier: 33,000 .550 477.00 8.00 Contents ICC Premium: Lowest Floor Above Ground Level and Higher Floors 818.00 Location: CRS Discount: **Reserve Fund Assmt**: 2,797.00 HFIAA Surcharge: 250.00 Federal Policy Fee: 2,000.00 **Probation Surcharge:** .00 **Endorsement Amount:** .00 **Total Premium Paid: Coverage Limitations May Apply. See Your Policy Form for Details.** 20,584.00

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Refer to www.fema.gov/cost-of-flood for more information about the risk of flooding and how it impacts the cost of flood insurance.

American Bankers Insurance Company of Florida Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695

> Mail To: Agent Renewal



FISHER BROWN BOTTRELL INSURANCE INCORPORATED FISHER BROWN INSURANCE 19 W GARDEN ST STE 300 PENSACOLA, FL 32502-5650



Policy Number: 75059504182021

FLOOD POLICY DECLARATIONS

ASSURANT[®] American Bankers Insurance Company of Florida

Scottsdale, AZ 85261-4337

Standard Policy

Type: Renewal Policy Period: 11/10/2021 To 11/10/2022 Original New Business Effective Date: 01/01/2000 **Reinstatement Date:** Form: RCBAP

Producer Name and Mailing Address:

FISHER BROWN BOTTRELL INSURANCE INCORPORATED FISHER BROWN INSURANCE 19 W GARDEN ST STE 300 PENSACOLA, FL 32502-5650

NFIP Policy Number: 7505950418

Agent/Agency #: 08151-00633-000 **Reference #**: Phone #: (850) 432-7474

Property Info

Mortgage Info

Address Info

Property Location:

25240 PERDIDO BEACH BLVD CENTER TOWER ORANGE BEACH, AL 36561

Primary Residence: N Premium Payor: Insured Flood Risk/Rated Zone: X Current Zone: VE Community Number: 01 5011 0000 Community Name: ORANGE BEACH, CITY OF Grandfathered: Yes Post-Firm Construction

Program Type: Regular

For payment status, call: (800) 423-4403 These Declarations are effective

as of: 11/10/2021 at 12:01 AM

Insured Name and Mailing Address: SEACHASE OWNERS ASSOCIATION

CENTER TOWER 25240 PERDIDO BEACH BLVD ORANGE BEACH, AL 36561-3191

NAIC Number: 10111

Processed by: Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695

Building Description:

Other Residential Three or More Floors Slab On Grade High Rise Main House CONDOMINIUM HIGH RISE

Newly Mapped into SFHA:

Elev Diff: N/A **Elevated Building:** N Includes Addition(s) and Extension(s) **Replacement** Cost: \$15,544,000

Number of Units: 56

	••						
Туре	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	14,000,000	1.330 / .075	1,250	14-	12,683.00	Premium Subtotal:	13,160.0
Contents:	33,000	1.730 / .550	1,250		477.00	Multiplier:	
Contents	Lowest 1	Floor Above Gro	ound			ICC Premium:	8.0
Location:	Level an	nd Higher Floor	S			CRS Discount:	658.0
						Reserve Fund Assmt:	2,252.0
						HFIAA Surcharge:	250.0
						Federal Policy Fee:	2,000.0
						Probation Surcharge:	.0
						Endorsement Amount:	.0
Covera	ge Limitations	May Apply. See You	ur Policy F	orm for De	tails.	Total Premium Paid:	17,012.00

First Mortgage:

Loss Payee:

Second Mortgage:

Disaster Agency:

Refer to www.fema.gov/cost-of-flood for more information about the risk of flooding and how it impacts the cost of flood insurance.

Mail To: Agent Renewal

American Bankers Insurance Company of Florida Flood Service Center P.O. Box 8695 Kalispell MT 59904-8695 FISHER BROWN BOTTRELL INSURANCE INCORPORATED FISHER BROWN INSURANCE 19 W GARDEN ST STE 300 PENSACOLA, FL 32502-5650

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