



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/01/2022

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services, LLC 2502 N Rocky Point Dr Ste 400 Tampa, FL 33607-1421 813 321-7500	CONTACT NAME: Susan Morrisseau		
	PHONE (A/C, No, Ext): 813 321-7500	FAX (A/C, No): 888-299-7117	
	E-MAIL ADDRESS: susan.morrisseau@usi.com		
INSURED Crystal Bay Condominium Association Inc 24701 US Hwy 19 N Suite 102 Clearwater, FL 33763	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Trisura Specialty Insurance Company		16188
	INSURER B : Allied Group Insurance		NONE
	INSURER C : Accredited Specialty Insurance Company		16835
	INSURER D : Travelers Indemnity Company of CT		25682
	INSURER E :		
INSURER F :			

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

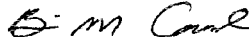
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Includes separation of insureds GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CIUCAP460060700	04/03/2022	04/03/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			CIUCAP460060700	04/03/2022	04/03/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			031306911806370	04/03/2022	04/03/2023	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$ <input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				
A	Crime/Bond			CIUCAP460060700	04/03/2022	04/03/2023	\$500,000
A	Directors & Offic			CIUCAP460060700	04/03/2022	04/03/2023	\$1,000,000
C	Property			2CSIFL05S0101078	04/03/2022	04/03/2023	See description below.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Property coverage including wind:
Accredited Specialty Insurance Company - Policy 2CSIFL05S0101078
Special form, replacement cost, agreed amount, \$10,000 AOP, 5% hurricane of TIV/\$25,000 per location, \$50,000 minimum per named storm deductibles. Ordinance or law - included.

(See Attached Descriptions)

CERTIFICATE HOLDER Crystal Bay Condominium Association Inc 24701 US Highway 19 N, Suite 102 Clearwater, FL 33763	CANCELLATION 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 
---	---

DESCRIPTIONS (Continued from Page 1)

Building A - 2333 Feather Sound Drive, Clearwater, FL 33762 - Building \$9,982,019 (67 units)
Building B - 2333 Feather Sound Drive, Clearwater, FL 33762 - Building \$9,982,019 (66 units)
Building C - 2333 Feather Sound Drive, Clearwater, FL 33762 - Building \$10,121,206 (67 units)
Building D - 2333 Feather Sound Drive, Clearwater, FL 33762 - Building \$1,173,180 (clubhouse)
Building E - 2333 Feather Sound Drive, Clearwater, FL 33762 - Building \$804,647 (6 units)
Building F - 2323 Feather Sound Drive, Clearwater, FL 33762 - Building \$3,624,707 (26 units)

D: Boiler and Machinery - Travelers Property Cas. Co. of America - Policy BME17S98158ATCT22
Effective 4/03/2022 to 4/03/2023 - Limit \$35,900,278

Flood - American Bankers Insurance Company of Florida:
2333 Feather Sound Drive, Clearwater, FL 33762 - Policy no. 60101513342022
Effective 8/01/2022 to 8/01/2023 - Building \$40,137,000(206 units)
Rated flood zone - AE - not grandfathered

Flood - Wright National Flood Insurance Company:
2323 Feather Sound Drive, Clearwater, FL 33762 - Policy No. 09115017946612
Effective 12/20/2021 to 12/20/2022 - Building \$4,952,200 (26 units)
Rated flood zone - AE - not grandfathered

Property manager included in Crime & Directors & Officers policy.



A Stock Company
P.O. Box 33003
St. Petersburg, FL 33733-8003
Customer Service: 1-800-820-3242
Claims: 1-800-725-9472

FFL99.001 0519
0084316
12/20/21
2000 11523 FLD RCBP

FLOOD DECLARATIONS PAGE
RENEWAL

Policy Number	NFIP Policy Number	Product Type: Standard Policy
09 1150179466 12	1150179466	Residential Condominium Building Association Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 12/20/21 To: 12/20/22 12:01 am Standard Time	12/20/2021	0084316	09 1150179466 11

Insured
CRYSTAL BAY CONDOMINIUM ASSOCIATION
AND/OR ALL UNIT OWNERS ATIMA
24701 US HIGHWAY 19 N STE 102
CLEARWATER FL 33763-4086

USI INSURANCE SERVICES LLC
2502 N ROCKY POINT DR STE 400
TAMPA FL 33607-1443

Property Location (if other than above)
2323 FEATHER SOUND DR, CLEARWATER FL 33762

Address may have been changed in accordance with USPS standards.

Rating Information

Original New Business Effective Date: 12/20/2003	Flood Risk/Rated Zone: AE	Grandfathered: Yes
Building Occupancy: Other Residential	Current Flood Zone: AE	
Primary Residence: N	Number of Floors: 3 or more	
Condo Type: High Rise Number of Units: 26	Building Indicator: Non-Elevated	
Community #: 125139 Map Panel/Suffix: 0143 G	Basement/Enclosure/CrawlSpace:	
Community Rating: 03 / 35% Program Status: Regular	No Basement	
Community Name: PINELLAS COUNTY	Elevation Difference: 0	
	Replacement Cost Value: 4,952,200	

Coverage	Deductible	Annual Premium
----------	------------	----------------

BUILDING	\$4,952,200	\$1,250	\$7,926.00
CONTENTS NO CONTENTS COVERAGE	INSURED DECLINED CONTENTS COVERAGE		\$0.00
	ANNUAL SUBTOTAL:		\$7,926.00
	DEDUCTIBLE DISCOUNT/SURCHARGE:	-	\$13.00
	ICC PREMIUM:		\$8.00
	COMMUNITY RATING DISCOUNT:	-	\$2,772.00
	SUB-TOTAL:		\$5,149.00
	RESERVE FUND ASSESSMENT:		\$927.00
	PROBATION SURCHARGE:		\$0.00
	FEDERAL POLICY SERVICE FEE:		\$2,000.00
	HFIAA SURCHARGE:		\$250.00
Premium Paid by: Insured	TOTAL WRITTEN PREMIUM AND FEES:		\$8,326.00

THIS IS NOT A BILL

DEAR MORTGAGEE

The Reform Act of 1994 requires you to notify the WYO company for this policy within 60 days of any changes in the servicer of this loan.

The above message applies only when there is a mortgagee on the insured location.

Special Provisions:

This policy covers only one building. If you have more than one building on your property, please make sure they are all covered. See III. Property Covered within your Flood policy for the NFIP definition of "building" or contact your agent, broker, or insurance company. Please refer to the policy for complete terms, conditions, and exclusions. A full, digital copy of your flood policy form is available at www.wrightflood.com/policyforms.html. The form which applies to your policy coverage is: Residential Condominium Building Association Policy Form

No Additions and Extensions

Forms and Endorsements:

FFL 99.310 0120 0120 WFL 99.416 1117 1117 WFL 99.116 0614 0614 WFL 99.116 1021 1021

This policy is issued by NAIC company 11523
Wright National Flood Insurance Company A stock company
Copy Sent To: As indicated on back or additional pages, if any.

Patricia Templeton-Jones
Patricia Templeton-Jones, President

008431609115017946621354

00006

Agent



09 1150179466 12

Agent (813)321-7500
USI INSURANCE SERVICES LLC
2502 N ROCKY POINT DR STE 400
TAMPA FL 33607-1443

The Residential Condominium Building Association Policy will not list a mortgagee for any individual unit owner on the declaration page due to National Flood Insurance Program guidelines. The *Mandatory Purchase of Flood Insurance Guidelines*, pages 45-51 provides additional information on this subject.

A mortgagee may be listed on the declaration page if the condominium association is required to obtain flood insurance as part of the security for a loan under the name of the condominium association. Please contact the agent for additional information.

Refer to www.fema.gov/cost-of-flood for more information about flood risk and policy rating.

Claims Information:

Please contact your agent or go to www.wrightflood.com to enter your claim as well as receive important information to mitigate the damage to your property. If you need to reach the insurance company the number is 1-800-725-9472.





ASSURANT[®]

American Bankers Insurance
Company of Florida

Agent Contact Information
Usi Insurance Services Llc
2502 N Rocky Point Dr Fl 4Th
Tampa, FL 33607-1421
(800) 282-3343
Insurer NAIC Number 10111

Policy Number 60101513342022
NFIP Policy Number 6010151334
Policy Term 08/01/2022 12:01 AM - 08/01/2023 12:01 AM
Policy Form RCBAP
Policy Declarations Type Renewal Policy Declarations
Payor Insured
Rate Category Rating Engine

Flood Insurance Policy Declarations

THIS IS NOT A BILL

Insured Name and Mailing Address

CRYSTAL BAY CONDO ASSOC
24701 US HIGHWAY 19 N STE 102
ATTN: PROPERTY MANAGER
CLEARWATER, FL 33763-4086

Property Location

2333 FEATHER SOUND DR
CLEARWATER, FL 33762-3087

COVERAGE AND RATING

	Coverage	Deductible	Premium Details	
Building	\$40,137,000	\$5,000	Building Premium	\$85,752
Contents	\$30,000	\$5,000	Contents Premium	\$497

ICC Premium	\$75
Mitigation Discounts	(\$0)
CRS Discount	(-\$30,164)
Full-Risk Premium	<u>\$56,160</u>

PROPERTY INFORMATION

Flood Zone	AE
Primary Residence	No
Building Occupancy	Res. Condo Building
Building Description	Res. Condo Building
Building Description Detail	
First Floor Height	0E-10 Feet
Method Used for 1st Floor Height	EC
Property Description	Slab on Grade, 3 Floors, Other
Date of Const/Substantial Imp	07/01/1988
Replacement Cost Value	\$40,136,300
Prior NFIP Claims	0 claims
Number of Units	206

<u>Statutory Discounts</u>	
Annual Increase Cap Discount	(-\$24,870)
Pre-FIRM Discount	(\$0)
Newly Mapped Discount	(\$0)
Other Statutory Discounts	(\$0)
Discounted Premium	<u>\$31,290</u>
<u>Fees and Surcharges</u>	
Reserve Fund Assessment	\$5,632
HFIAA Surcharge	\$250
Federal Policy Fee	\$2,152
Probation Surcharge	\$0
Total Annual Premium	\$39,324

Effective 4/1/2022, the NFIP implemented a new pricing methodology, Risk Rating 2.0 Phase II Renewals. Some property information on your policy may have been updated. Please contact your flood insurance agent to ensure you have the most accurate and up to date property information.

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

MORTGAGE INFORMATION

Coverage limitations may apply. See your policy form for details.

For Questions about your flood insurance policy rating, contact your agent or insurance company. To learn more about your flood, risk please visit [FloodSmart.gov/floodcosts](https://www.floodsmart.gov/floodcosts).

Policy Issued By: American Bankers Insurance Company of Florida

Printed: 07/29/2022

This page has been left blank intentionally.