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APPLICATION FOR INSURANCE DWELLING POLICY

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12 APPLICANT INFORMATION 4

13 PROPOSED POLICY PERIOD FROM: 09/02/2020 12:01 a.m. TO: 09/02/2021 12:01 a.m. 14 OFFER NUMBER: 0000030001 ACCOUNT NUMBER: W00000001

APPLICANT NAME AND ADDRESS: 9 JASON FRASER AMY LEE 2714 SANCHEZ AVE AUSTIN TX 78749 AGENCY NAME AND LOCATION 10 TEXAS NEW AGENCY ARIELLE PEREZ 4825 FAKE ST CORPUS CHRISTI TX 78411 (512) 555-6016 16 17

PROPERTY LOCATION: 27 2714 MARVEL AVE GALVESTON TX 77551 COUNTY: GALVESTON 27.B

19 BILLING INFORMATION

20 PAYMENT METHOD: Insured Direct Pay 23 40 PAYMENT PLAN: TWIA Full Pay TOTAL PREMIUM AND SURCHARGES: \$768

COVERAGE SUMMARY 31 38

Table with columns: COVERAGE SUMMARY, LIMITS, PREMIUMS. Rows include CONDO UNIT OWNER, WIND AND HAIL COVERAGE, Coverage B, Personal Property, Deductible 1% (\$100 Min.), Indirect Loss Coverage.

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POLICY FORMS AND ENDORSEMENTS

Table with columns: NUMBER, EDITION, NAME, LIMIT, PREMIUMS. Rows include TWDP, TWIA-365, TWIA-331, TWIA-311.

27.Z

CREDITS AND SURCHARGES

Table with columns: DESCRIPTION, AMOUNT. Row: Building Code Credit – Personal Property \$-1,950 39

PROPERTY DETAILS						
49	Territory code	1	Structure description	92	N/A	
	Is the property East of Highway 146?	58	Yes	Name of complex	88	Deerfield Apartments
	Coastal zone	93	Seaward	Unit #	89	1542
27.F	How is the dwelling customarily used?		Primary Residence	Building #	90	15
	Is the property accessible by road?	86	Yes			
87	• How do you access the property?		N/A			

PRIMARY POLICY DETAILS					
27.R	Does the applicant have a primary residential policy that excludes wind and hail?	No	Does the policy provide any of these coverages for other perils:	45	
	• Name of company	27.S	N/A	• Consequential Loss	N/A
	• Amount of insurance	62	N/A	• Additional Living Expense	N/A
				• Wind Driven Rain	N/A
				• Replacement Cost for Personal Property	N/A

CONSTRUCTION DETAILS							
	Year built	27.M	2000	27.N	Number of stories	27.C	1
	Construction type	27.E	Frame				

ADDITIONAL CONSTRUCTION DETAILS								
65	Original construction date	27.M	10/6/1965	27.N	Roofing updates?	35	No	
66	• Has a Certificate of Compliance or an Official Building Statement (Harris County) been provided for this construction?		Yes		Repairs/additions	36	37	Yes
96	Does this structure qualify for the WPI-8 exception for historic structures?		N/A					

27.P

27.O REPAIRS/ADDITIONS			27.Q
Date	Description		Has a Certificate of Compliance or an Official Building Statement (Harris County) been provided for this construction?
02/15/2019	Updated Master Bath		Yes

ADDITIONAL INTERESTS

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ADDITIONAL NAMED INSURED

NAME AND ADDRESS:

AMY LEE
2714 SANCHEZ AVE
AUSTIN TX 78749

RELATIONSHIP: Sister

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TWIA GENERAL ELIGIBILITY

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Has the applicant been declined wind and hail coverage by at least one insurance company in the private market?	Yes
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• Insurance company name	New Ins Co.
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• Reason	Declined
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Is any part of this property located in one of the designated National Flood Insurance Program (NFIP) flood zones (V, VE, or V1-V30)?	No
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• Was the structure constructed or enlarged beginning on or after September 1, 2009?	N/A
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• Is the property to be insured located on or above the third floor of a structure?	N/A
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• Is flood insurance from the National Flood Insurance Program (NFIP) available for this property?	N/A
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• Is there a flood insurance policy for this property?	N/A
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TWIA PROPERTY ELIGIBILITY

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Was the condominium built, or have external modifications made, on or after January 1, 1988?	Yes
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• Are there Certificates of Compliance or pending applications for Certificates of Compliance for the construction or modifications of the structure?	95 Yes
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Has the property been previously insured by TWIA?	No
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• Previous policy number	18 N/A
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• Was the previous policy cancelled or non-renewed for failure to meet underwriting guidelines?	101 N/A
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• Does the property now meet all underwriting guidelines?	102 N/A
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TWIA APPLICATION FOR INSURANCE AFFIRMATION STATEMENTS

75 Applicants and their agent must read the following statements carefully and sign to acknowledge that they understand their legal responsibilities and legal authorizations.

76 **Applicant Affirmation Statement:**

77 I hereby apply to Texas Windstorm Insurance Association (TWIA) for insurance on the basis of the statements contained in this application. I agree if information contained in this application is false or misleading, or would materially affect acceptance of the risk by TWIA, or if my payment is returned for insufficient funds, that such a policy will be null and void and no coverage shall be afforded.

79 By applying for coverage with TWIA, I understand TWIA may obtain reports for use in underwriting this application for insurance, and for use in the renewal of policies related to this application. (See the Fair Credit Reporting Act – 15 USC § 1681 et seq.)

80 I understand that a property inspection may be completed by TWIA at any time for use in determining eligibility for coverage in accordance with the underwriting rules.

Applicant Signature:

Date:

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Agent Affirmation Statement:

42 The undersigned warrants and certifies that to the best of their knowledge all information contained in this application is correct. The statements here are those of the applicant, who signed this application, and I am legally qualified to submit this application on their behalf.

Agent Signature:

Date:

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83 Note: The agent is required to retain a duplicate signed copy of the above TWIA Application for Insurance and Affirmation Statements.