

# Mountain West Series of Lockton Companies, LLC

TO: City of Denton

Invoice Date: October 31, 2023

Location Name: Denton
Amount Due: \$41,370.00

	Insured	Insured Location	Policy Period
	City of Denton	Denton	12/16/2023-12/16/2024
	Application / Policy Number	Building	Amount Due
1	6500300260	4201 Vintage Blvd- Fire Station	\$1,672.00
2	6500300261	215 E McKinney St- City Hall	\$4,490.00
3	6500300262	502 Oakland St- Emily Fowler Library	\$5,924.00
4	6500300263	509 N Bell Ave- Senior Center	\$4,005.00
5	6500300264	321 E McKinney St- Civic Center	\$6,180.00
6	6500300265	319 E McKinney St- Chiller Plant	\$2,223.00
7	6500403914	801 Texas St Fleet Service Center	\$6,073.00
8	6500403916	3801 N Elm St Vela Concession Stand	\$1,405.00
9	6500403919	401 N Elm St Development Srvcs Center	\$7,798.00
10	6500404754	515 N Bell Ave	\$1,600.00
		*TOTAL PREMIUM, TAXES, AND FEES:	\$41,370.00

For OVERNIGHT Payment via Check, remit to:

Lockbox Services
Hartford Fire Ins Co - BOX 913385
1750 Lincoln Steet

Denver CO 80274-0002

Checks payable and mailed to:

Hartford Insurance Co

PO Box 913385 Denver CO 80291

Payment due within 29 days after renewal date, if payment is received 30 days or later, coverage will begin 30 days from payment receipt. Items in gray have a 30 day waiting period and payment must be received by 11/16 to maintain a 12/16 effective date

For questions regarding this invoice, please contact:

Brian Linneman Email: Flood@Lockton.com
Phone: (888) 314-4589 Fax: (303) 865-6209





CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number :** 6500300260

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

4201 VINTAGE BLVD ARGYLE, TX 76226 Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

Your flood insurance policy will expire 12/16/2023. In order to maintain coverage you must renew your policy each year. Please follow renewal instructions on the remittance coupon below

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	304,000.00	1,250.00	1,250.00	1,672.00
B. Increased coverage <sup>5</sup>	500,000.00	320,000.00	1,250.00	1,250.00	1,682.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Make a Payment".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

#### See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name :	City Of Denton
Renewal Date:	12/16/2023
Policy No:	6500300260

**Bill ID**: 21458952-226236011

Select One: Option A Option B \$1,672 \$1,682

Amount Enclosed: \$

.00

Make check or money order payable to :

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

- Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. If your policy lapses, your property may not be covered and could become ineligible for certain premium discounts in the future.
  - To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though the delivery may be after the expiration date.
- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If you already submitted payment or if your mortgage lender pays your premium from an escrow account, please disregard this notice.
- 4. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.

- 5. Option B is the next-higher coverage combination available and increases the current premium by an inflation of 10% for building coverage and 5% for contents coverage. The current deductible is used. Increases in coverage will take effect immediately and do not necessitate a 30-day waiting period.
- You have coverage options. You can either choose to keep your current coverage or adjust your coverage as needed. Please indicate the option you choose on the payment page.

## FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number**: 6500300261

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

215 E MCKINNEY ST DENTON, TX 76201-4229 Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

Your flood insurance policy will expire 12/16/2023. In order to maintain coverage you must renew your policy each year. Please follow renewal instructions on the remittance coupon below

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	4,490.00
B. Increased coverage <sup>5</sup>	N/A	N/A	N/A	N/A	N/A

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Make a Payment".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

#### See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



#### To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name :	City Of Denton
Renewal Date:	12/16/2023
Policy No:	6500300261

Bill ID : 21458953-226267299

Select One: Option A Option B

\$4,490 N/A

Amount Enclosed: \$						.00
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Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

- Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. If your policy lapses, your property may not be covered and could become ineligible for certain premium discounts in the future.
  - To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though the delivery may be after the expiration date.
- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- 3. If you already submitted payment or if your mortgage lender pays your premium from an escrow account, please disregard this notice.
- 4. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.

- 5. Option B is the next-higher coverage combination available and increases the current premium by an inflation of 10% for building coverage and 5% for contents coverage. The current deductible is used. Increases in coverage will take effect immediately and do not necessitate a 30-day waiting period.
- 6. You have coverage options. You can either choose to keep your current coverage or adjust your coverage as needed. Please indicate the option you choose on the payment page.

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CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number :** 6500300262

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

502 OAKLAND ST

DENTON, TX 76201-4231

Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

Your flood insurance policy will expire 12/16/2023. In order to maintain coverage you must renew your policy each year. Please follow renewal instructions on the remittance coupon below

Coverage Options	Coverage Amounts		Deductibles		Premium	
	Building	Contents	Building	Contents		
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	5,924.00	
B. Increased coverage <sup>5</sup>	N/A	N/A	N/A	N/A	N/A	

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- Visit https://TheHartford.ManageFlood.com and select "Make a Payment".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

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#### To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name: City Of Denton
Renewal Date: 12/16/2023
Policy No: 6500300262

Bill ID : 21458955-226270199

Select One: Option A Option B

\$5,924 N/A

Amount Enclosed: \$ .00

Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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  - To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though the delivery may be after the expiration date.
- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If you already submitted payment or if your mortgage lender pays your premium from an escrow account, please disregard this notice.
- 4. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.

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CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number :** 6500300263

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

509 N BELL AVE

DENTON, TX 76201-3102

Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

Your flood insurance policy will expire 12/16/2023. In order to maintain coverage you must renew your policy each year. Please follow renewal instructions on the remittance coupon below

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	303,000.00	1,250.00	1,250.00	4,005.00
B. Increased coverage <sup>5</sup>	500,000.00	319,000.00	1,250.00	1,250.00	4,041.00

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- Visit https://TheHartford.ManageFlood.com and select "Make a Payment".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

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To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name: City Of Denton
Renewal Date: 12/16/2023
Policy No: 6500300263

Bill ID: 21458956-226287058

Select One: Option A Option A

Select One: Option A Option B \$4,005 \$4,041

Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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  - To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though the delivery may be after the expiration date.
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## FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number**: 6500300264

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

321 E MCKINNEY ST DENTON, TX 76201-4229 Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

Your flood insurance policy will expire 12/16/2023. In order to maintain coverage you must renew your policy each year. Please follow renewal instructions on the remittance coupon below

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	258,000.00	1,250.00	1,250.00	6,180.00
B. Increased coverage <sup>5</sup>	500,000.00	271,000.00	1,250.00	1,250.00	6,241.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Make a Payment".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

#### See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name :	City Of Denton
Renewal Date:	12/16/2023
Policy No:	6500300264

Bill ID: 21458957-226238287

Select One: Option A Option B \$6,180 \$6,241

Amount Enclosed: \$ .00

Make check or money order payable to :

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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  - To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though the delivery may be after the expiration date.
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## FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





CITY OF DENTON 215 E MCKINNEY ST DENTON, TX 76201-4229

**Policy Number**: 6500300265

Policy Expiration Date: 12/16/2023 12:01 am

Loan Number: N/A

Notice Date: 09/23/2023 Payor: Insured

**Insured Property Location:** 

319 E MCKINNEY ST DENTON, TX 76201-4231 Agent: LOCKTON COMPANIES LLC

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237 (303) 414-6000

#### **RENEWAL NOTICE**

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Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	250,000.00	250,000.00	1,250.00	1,250.00	2,223.00
B. Increased coverage <sup>5</sup>	275,000.00	263,000.00	1,250.00	1,250.00	2,323.00

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- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name: City Of Denton
Renewal Date: 12/16/2023
Policy No: 6500300265

Bill ID: 21458958-226254333

Select One: Option A Option B

\$2,223 \$2,323

Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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Agency:

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER,CO 80237

CITY OF DENTON 215 E MCKINNEY DENTON, TX 76201

Agent:

LÖCKTON COMPANIES LLC
Phone Number: (888) 314-4589
Email: FLOOD@LOCKTON.COM

# **New Application Invoice**

 Application Number :
 6500403914

 Policy Expiration Date :
 12/16/2024

 Application ID :
 000015904427

 Billing ID :
 000228485059

Insured Property Location:

801 TEXAS ST FLEET SERVICE CENTER Building \$5
DENTON, TX 76209-4349 Contents \$5

ding \$500,000 \$1,250 ents \$500,000 \$1,250

**Coverage** 

**Deductible** 

Payment Options: Premium Total Due: \$6,073.00

ACH or Credit Card: Call our Payment Processing Center at 800-303-5663.

Check: Follow the instructions noted on the bottom of this invoice.
 Please don't forget to include the application number on your check.

On-Line: Visit https://TheHartford.ManageFlood.com and select "Pay New Application Online."

Please be aware that this application is subject to a full underwriting review of all documentation and rates may change based on that review.

IF PAYING BY CHECK PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

THE THE

Insured Name: CITY OF DENTON

 Effective Date :
 12/16/2023

 Application No :
 6500403914

 Application ID :
 000015904427

 Billing ID :
 000228485059

To pay by check or money order:

Make payment for the exact premium amount due.

Full payment is required.

Mail this stub and the payment to the address below.

Make check payable to: HARTFORD FIRE INSURANCE COMPANY

PO BOX 913385



# **Standard Flood Insurance Policy Application**

# **General Property Form**

Date	Туре	Application Number	Effective Date Expiration Date	Waiting Period
10/25/2023	New	6500403914	12/16/2023 12/16/2024	Standard 30 Day Wait
Insured Name(s)		Mailing Address and Phone	Property Address	Agency Name, Address, and Phone
CITY OF DENT	ON	215 E MCKINNEY DENTON, TX 76201	801 TEXAS ST FLEET SERVICE CENTER DENTON, TX 76209-4349	LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237
		Home Phone: Work Phone:	Property Address Type:	
		Cell Phone: N/A		Email: FLOOD@LOCKTON.COM
Applicant Type:	Business	Email: N/A		Phone Number: 3034146000
Other Policy Num Prior Policy Num				Agent Name: LOCKTON COMPANIES LLC
Prior Company N	Name:		Prior Company NAIC:	
Renewal Billing:	Insured		Potential Duplicate Policy: N/A	
1st Mortgagee		2nd Mortgagee	Additional Interest	Disaster Agency

Phone Number: Fax Number: Loan Number: Current Community Information Community Name: Community Number: Map Panel: Map Panel Suffix: Current Flood Zone: FIRM Date: Program:	Phone Number: Fax Number: Loan Number:  DENTON, CITY OF 480194 0380 G X 08/01/1979 Regular	Phone Number: Fax Number: Loan Number: Prior Community Information Community Number: Map Panel: Map Panel Suffix: Flood Zone: FIRM Date: Has This Property Been Remapped?: Map Revision Date:	Phone Number: Fax Number: Loan Number: Case Number:  N/A N/A N/A N/A N/A N/A N/A N/A N/A N/
Program Status: County:	Active and participating DENTON		
Current Map Date: Rating Map Date:	04/18/2011 04/18/2011		
Construction/Substantial Improvement Da	ate	Property Ownership Information	
Date of Original Construction:	01/01/2001	Coverage for Owner or Tenant:	Owner
Building Substantially Improved:	No	Building a Rental Property:	No
Building is on list of Historic Buildings:	N/A	Is the policyholder a condominium	No
Post-FIRM Construction:	Yes	association?	
Substantial Improvement Date:	N/A		
Prior NFIP Coverage			
Did the applicant purchase the building within the last 365 days?	No	Did the applicant have a prior NFIP policy for the building that lapsed?	N/A
Prior Owner Policy Number: Prior Owner Company Name:	N/A N/A	Was the policy receiving a Pre-FIRM or Newly Mapped discount when it lapsed? Did the policy lapse for a valid reason?	N/A

File: 15904427

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DocID: 228485059

<b>Building Information</b>			
Building Located In CBRS/OPA:	None	Building Located Over Water:	Not Over Water
CBRS/OPA Designation Date:	N/A	Building in Course of Construction:	No
If the building is in the buffer zone, did	N/A	Building Construction Type:	None
USFWS issue an official determination		Construction Type Description:	N/A
showing the building outside the system unit or OPA?		Estimated Building Replacement Cost:	\$3,470,721
Is the building use consistent with the protected area purpose?	N/A	Replacement Cost Value Returned By FEMA:	N/A
Prior NFIP Claims:	N/A	Total sq. footage of the building:	24,690
Building Severe Repetitive Loss (SRL)	No	Total # of floors in building:	1
Property:		What floor is the unit located on?	N/A
Property on NFIP SRL list, document(s)	N/A	Number of Detached Structures:	0
provided indicating non-SRL:		Building Located on Federal Land:	No
Coverage Req'd for Disaster Assistance:	No	Is the policy force-placed by the lender?	N/A
Occupancy Information			
Occupancy Type:	Non-Residential Building	Number Of Units In Building:	1
		Is the insured a nonprofit entity?	No
Is this the Applicant's Primary Residence:	No	Building Description:	Commercial
Is the insured a small business with less	No	"Other" Description:	N/A
than 100 employees?	NO		
Foundation Information		Mobilehome/Travel Trailer Information	
Foundation:	Slab on grade (non-elevated)	On Permanent Foundation:	N/A
F. d	N/A	Anchored By:	none
Enclosure/Crawlspace Size:	N/A N/A	Serial Number:	N/A
Number of Elevators:	N/A		
Venting Information			_
Enclosure/Crawlspace Has Valid Flood	No	Area of Permanent Openings (Sq. In.):	0
Openings: Number of Openings:	0	Has Engineered Openings:	No
	0		
Machinery, Equipment and Appliances			
Does the building contain appliances?	Yes	Does the building contain machinery and equipment servicing the building?	Yes
Are all appliances elevated above the first floor?	No	Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?	
Elevation Certificate Information		<u>, , , , , , , , , , , , , , , , , , , </u>	
Elevation Certificate Section Used:	N/A	Flood Proofing Certificate:	N/A
Elevation Certificate Date:	N/A	Flood Proofing Elevation:	N/A
		Lowest (Rating) Floor Elevation:	N/A
Diagram Number:	N/A N/A	Elevation Certificate First Floor Height:	N/A
Top of Next Higher Floor:		FEMA First Floor Height:	1.1
Top of Next Higher Floor:	N/A	First Floor Height Method Used:	FEMA Determined
Lowest Adjacent Grade (LAG):	N/A		
Premium Calculations			

**RATING ENGINE** 

#### COMPONENTS OF THE TOTAL AMOUNT DUE COVERAGE DEDUCTIBLE **BUILDING PREMIUM:**

**BUILDING** \$1,250 \$500,000 **CONTENTS** \$500,000 \$1,250

\$2,578.00	CONTENTS PREMIUM:
\$75.00	INCREASED COST OF COMPLIANCE (ICC) PREMIUM:
(\$0.00)	MITIGATION DISCOUNT:
(\$522.00)	COMMUNITY RATING SYSTEM REDUCTION:
\$4,895.00	FULL RISK PREMIUM:
(\$0.00)	ANNUAL INCREASE CAP DISCOUNT:
(\$0.00)	STATUTORY DISCOUNTS:
\$4,895.00	DISCOUNTED PREMIUM:
\$881.00	RESERVE FUND ASSESSMENT:
\$250.00	HFIAA SURCHARGE:
\$47.00	FEDERAL POLICY FEE:
\$0.00	PROBATION SURCHARGE:
\$6,073,00	TOTAL AMOUNT DUE:

\$2,764.00







A separate flood insurance policy is required for each building with the following exception: Under the Standard Flood Insurance Policy Dwelling Form, appurtenant structure coverage may apply to a detached garage at the described location provided the detached garage is not used for dwelling, business, or farming purposes. Coverage is limited to 10% of the limit of liability on the dwelling and reduces the building limit of

The above statements are correct to the best of my knowledge. I understand that any fraudulent statements may be punishable by fine or imprisonment under the applicable federal law. The Federal EmergencyManagement Agency (FEMA) provides flood insurance under the terms of the National Flood Insurance Act of 1968 and its Amendments, and Title 44 of the Code of Federal Regulations. The premium shown above must comply with FEMA rules and rates and may be revised in accordance with applicable policy provisions.

Signatures  JOHN LOCKTON	Thep.	10/25/2023			
Signature of Age	ent/Producer	Date	Signature of Insured	(Optional)	_
This policy is not subject to available other than for billing	cancellation for reasons other than those se g processing error or fraud.	et forth in the National Floo	d Insurance Program rules and regulat	ions. In matters involving b	illing disputes, cancellation

PDF Creation: 10/25/2023 10:04 AM Pacific Standard Time

Application Produced For: HARTFORD FIRE INSURANCE COMPANY

File: 15904427

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Agency:

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER,CO 80237

CITY OF DENTON 215 E MCKINNEY DENTON, TX 76201

Agent:

LÖCKTON COMPANIES LLC
Phone Number: (888) 314-4589
Email: FLOOD@LOCKTON.COM

**Deductible** 

**Coverage** 

# **New Application Invoice**

 Application Number :
 6500403916

 Policy Expiration Date :
 12/16/2024

 Application ID :
 000015904457

 Billing ID :
 000228485234

Insured Property Location:

 3801 N ELM ST VELA CONCESSION STAND
 Building
 \$500,000
 \$1,250

 DENTON, TX 76207
 Contents
 \$0
 \$0

Payment Options: Premium Total Due: \$1,405.00

ACH or Credit Card: Call our Payment Processing Center at 800-303-5663.

Check: Follow the instructions noted on the bottom of this invoice.
 Please don't forget to include the application number on your check.

On-Line: Visit https://TheHartford.ManageFlood.com and select "Pay New Application Online."

Please be aware that this application is subject to a full underwriting review of all documentation and rates may change based on that review.

IF PAYING BY CHECK PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

.....

THE STATE

Insured Name: CITY OF DENTON

 Effective Date :
 12/16/2023

 Application No :
 6500403916

 Application ID :
 000015904457

 Billing ID :
 000228485234

To pay by check or money order:

Make payment for the exact premium amount due.

Full payment is required.

Write your application number on your check.

Amount Enclosed: \$ .00

Mail this stub and the payment to the address below.

Make check payable to: HARTFORD FIRE INSURANCE COMPANY

PO BOX 913385



# **Standard Flood Insurance Policy Application**

# **General Property Form**

Date	Туре	Application Number	Effective Date Expiration Date	Waiting Period
10/25/2023	New	6500403916	12/16/2023 12/16/2024	Standard 30 Day Wait
Insured Name(s)		Mailing Address and Phone	Property Address	Agency Name, Address, and Phone
CITY OF DENT	ON	215 E MCKINNEY DENTON, TX 76201	3801 N ELM ST VELA CONCESSION STAND DENTON, TX 76207	LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237
		Home Phone: Work Phone:	Property Address Type:	
		Cell Phone: N/A		Email: FLOOD@LOCKTON.COM
Applicant Type:	Business	Email: N/A		Phone Number: 3034146000
Other Policy Nun	nber:			Agent Name: LOCKTON COMPANIES
Prior Policy Num	ber:			LLC
Prior Company N	lame:		Prior Company NAIC:	
Renewal Billing:	Insured		Potential Duplicate Policy: N/A	
1st Mortgagee		2nd Mortgagee	Additional Interest	Disaster Agency

Phone Number: Fax Number: Loan Number: Current Community Information Community Name: Community Number: Map Panel: Map Panel Suffix: Current Flood Zone: FIRM Date: Program: Program Status: County:	Phone Number: Fax Number: Loan Number:  DENTON, CITY OF 480194 0360 G X 08/01/1979 Regular Active and participating DENTON COUNTY	Phone Number: Fax Number: Loan Number: Prior Community Information Community Number: Map Panel: Map Panel Suffix: Flood Zone: FIRM Date: Has This Property Been Remapped?: Map Revision Date:	Phone Number: Fax Number: Loan Number: Case Number:  N/A N/A N/A N/A N/A N/A N/A N/A N/A N/
Current Map Date: Rating Map Date:	04/18/2011 04/18/2011		
Construction/Substantial Improvement D	ate	Property Ownership Information	
Date of Original Construction:	01/01/2019	Coverage for Owner or Tenant:	Owner
Building Substantially Improved:	No	Building a Rental Property:	No
Building is on list of Historic Buildings:	N/A	Is the policyholder a condominium	No
Post-FIRM Construction:	Yes	association?	
Substantial Improvement Date:	N/A		
Prior NFIP Coverage			
Did the applicant purchase the building within the last 365 days?	No	Did the applicant have a prior NFIP policy for the building that lapsed?	N/A
Prior Owner Policy Number:	N/A	Was the policy receiving a Pre-FIRM or	N/A
Prior Owner Company Name:	N/A	Newly Mapped discount when it lapsed?  Did the policy lapse for a valid reason?	N/A

File: 15904457

Page 1 of 3

DocID: 228485234

<b>Building Information</b>			
Building Located In CBRS/OPA:	None	Building Located Over Water:	Not Over Water
CBRS/OPA Designation Date:	N/A	Building in Course of Construction:	No
If the building is in the buffer zone, did	N/A	Building Construction Type:	Masonry
USFWS issue an official determination		Construction Type Description:	N/A
showing the building outside the system unit or OPA?		Estimated Building Replacement Cost:	\$1,661,049
Is the building use consistent with the protected area purpose?	N/A	Replacement Cost Value Returned By FEMA:	N/A
Prior NFIP Claims:	N/A	Total sq. footage of the building:	18,154
Building Severe Repetitive Loss (SRL)	No	Total # of floors in building:	1
Property:		What floor is the unit located on?	N/A
Property on NFIP SRL list, document(s)	N/A	Number of Detached Structures:	0
provided indicating non-SRL:			No
Coverage Req'd for Disaster Assistance:	No	Is the policy force-placed by the lender?	N/A
Occupancy Information			
Occupancy Type:	Non-Residential Building	Number Of Units In Building:	1
	-	<u> </u>	No
Is this the Applicant's Primary	No	Building Description:	Other Non-Residential Type
Residence:	Ne	"Other" Description:	CONCESSION STAND
Is the insured a small business with less than 100 employees?	No		
Foundation Information		Mobilehome/Travel Trailer Information	
Foundation:	Slab on grade (non-elevated)	On Permanent Foundation:	N/A
Englocure/Crowlenges Size	N/A	Anchored By:	none
Enclosure/Crawlspace Size: Number of Elevators:	N/A N/A	Serial Number:	N/A
Venting Information	N/A		
•	No	Area of Darmanant Onaninga (Sa. In ):	0
Enclosure/Crawlspace Has Valid Flood Openings:	NO	Area of Permanent Openings (Sq. In.):	No
Number of Openings:	0	Has Engineered Openings:	NO
Machinery, Equipment and Appliances			
Does the building contain appliances?	Yes	Does the building contain machinery	Yes
	. 55	and equipment servicing the building?	
Are all appliances elevated above the first floor?	No	Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?	
Elevation Certificate Information			
Elevation Certificate Section Used:	N/A	Flood Proofing Certificate:	N/A
Elevation Certificate Date:	N/A	Flood Proofing Elevation:	N/A
		Lowest (Rating) Floor Elevation:	N/A
Diagram Number:	N/A	, 2,	
Diagram Number: Top of Bottom Floor:	N/A N/A	Elevation Certificate First Floor Height:	N/A
· ·		Elevation Certificate First Floor Height: FEMA First Floor Height:	0
Top of Bottom Floor:	N/A	Elevation Certificate First Floor Height:	

**RATING ENGINE** 

BUILDING

**CONTENTS** 

**COVERAGE DEDUCTIBLE** \$500,000 \$1,250

\$0

COMPONENTS OF THE TOTAL AMOUNT DUE

TOTAL AMOUNT DUE:

\$1,405.00

BUILDING PREMIUM:	\$1,003.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$19.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$83.00)
FULL RISK PREMIUM:	\$939.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$939.00
RESERVE FUND ASSESSMENT:	\$169.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$47.00
PROBATION SURCHARGE:	\$0.00







A separate flood insurance policy is required for each building with the following exception: Under the Standard Flood Insurance Policy Dwelling Form, appurtenant structure coverage may apply to a detached garage at the described location provided the detached garage is not used for dwelling, business, or farming purposes. Coverage is limited to 10% of the limit of liability on the dwelling and reduces the building limit of

The above statements are correct to the best of my knowledge. I understand that any fraudulent statements may be punishable by fine or imprisonment under the applicable federal law. The Federal EmergencyManagement Agency (FEMA) provides flood insurance under the terms of the National Flood Insurance Act of 1968 and its Amendments, and Title 44 of the Code of Federal Regulations. The premium shown above must comply with FEMA rules and rates and may be revised in accordance with applicable policy provisions.

Signatures	Tingeh.			
JOHN LOCKTON	<u> </u>	10/25/2023		
Signature of Age	ent/Producer	Date	Signature of Insured	(Optional)
This policy is not subject to available other than for billing	cancellation for reasons other than those so g processing error or fraud.	et forth in the National Flood	Insurance Program rules and regulati	ions. In matters involving b

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Application Produced For: HARTFORD FIRE INSURANCE COMPANY

File: 15904457

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DocID: 228485234



Agency:

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER,CO 80237

CITY OF DENTON 215 E MCKINNEY DENTON, TX 76201

Agent:

LÖCKTON COMPANIES LLC Phone Number: (888) 314-4589 Email: FLOOD@LOCKTON.COM

# **New Application Invoice**

 Application Number :
 6500403919

 Policy Expiration Date :
 12/16/2024

 Application ID :
 000015904490

 Billing ID :
 000228485500

Insured Property Location:
401 N ELM ST DEVELOPMENT SRVCS
CENTER

DENTON, TX 76201

<u>Coverage</u> <u>Deductible</u>

**Building** \$500,000 \$1,250 **Contents** \$500,000 \$1,250

\$1,250

Payment Options: Premium Total Due: \$7,798.00

- ACH or Credit Card: Call our Payment Processing Center at 800-303-5663.
- Check: Follow the instructions noted on the bottom of this invoice.
   Please don't forget to include the application number on your check.
- On-Line: Visit https://TheHartford.ManageFlood.com and select "Pay New Application Online."

Please be aware that this application is subject to a full underwriting review of all documentation and rates may change based on that review.

IF PAYING BY CHECK PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

.....

THE THE

Insured Name: CITY OF DENTON

 Effective Date :
 12/16/2023

 Application No :
 6500403919

 Application ID :
 000015904490

 Billing ID :
 000228485500

To pay by check or money order:

Make payment for the exact premium amount due.

Full payment is required.

Write your application number on your check.
 Amount Enclosed: \$ \_\_\_\_\_\_.00

Mail this stub and the payment to the address below.

Make check payable to: HARTFORD FIRE INSURANCE COMPANY

PO BOX 913385



# **Standard Flood Insurance Policy Application**

# **General Property Form**

Date	Туре	Application Number	Effective Date Expiration Date	Waiting Period
10/25/2023	New	6500403919	12/16/2023 12/16/2024	Standard 30 Day Wait
Insured Name(s)		Mailing Address and Phone	Property Address	Agency Name, Address, and Phone
CITY OF DENT	ON	215 E MCKINNEY DENTON, TX 76201	401 N ELM ST DEVELOPMENT SRVCS CENTER DENTON, TX 76201	LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237
		Home Phone: Work Phone:	Property Address Type:	
		Cell Phone: N/A		Email: FLOOD@LOCKTON.COM
Applicant Type:	Business	Email: N/A		Phone Number: 3034146000
Other Policy Num Prior Policy Num				Agent Name: LOCKTON COMPANIES LLC
Prior Company N	Name:		Prior Company NAIC:	
Renewal Billing:	Insured		Potential Duplicate Policy: N/A	
1st Mortgagee		2nd Mortgagee	Additional Interest	Disaster Agency

Phone Number: Fax Number: Loan Number: Current Community Information Community Name: Community Number: Map Panel: Map Panel Suffix:	Phone Number: Fax Number: Loan Number:  DENTON, CITY OF 480194 0360 G	Phone Number: Fax Number: Loan Number: Prior Community Information Community Number: Map Panel: Map Panel Suffix: Flood Zone:	Phone Number: Fax Number: Loan Number: Case Number:  N/A N/A N/A N/A N/A
Current Flood Zone:	AE	FIRM Date:	N/A
FIRM Date:	08/01/1979	Has This Property Been Remapped?:	No
Program:	Regular	Map Revision Date:	N/A
Program Status:	Active and participating		
County:	DENTON		
Current Map Date:	04/18/2011		
Rating Map Date:	04/18/2011		
Construction/Substantial Improvement D	ate	Property Ownership Information	
Date of Original Construction:	01/01/1970	Coverage for Owner or Tenant:	Owner
Building Substantially Improved:	No	Building a Rental Property:	No
Building is on list of Historic Buildings:	N/A	Is the policyholder a condominium	No
Post-FIRM Construction:	No	association?	
Substantial Improvement Date:	N/A		
Prior NFIP Coverage			
Did the applicant purchase the building within the last 365 days?	No	Did the applicant have a prior NFIP policy for the building that lapsed?	No
Prior Owner Policy Number:	N/A	Was the policy receiving a Pre-FIRM or	N/A
Prior Owner Company Name:	N/A	Newly Mapped discount when it lapsed?  Did the policy lapse for a valid reason?	N/A

File: 15904490

Page 1 of 3

DocID: 228485500

<b>Building Information</b>			
Building Located In CBRS/OPA:	None	Building Located Over Water:	Not Over Water
CBRS/OPA Designation Date:	N/A	Building in Course of Construction:	No
If the building is in the buffer zone, did	N/A	Building Construction Type:	Masonry
USFWS issue an official determination		Construction Type Description:	N/A
showing the building outside the system unit or OPA?		Estimated Building Replacement Cost:	\$4,138,908
Is the building use consistent with the protected area purpose?	N/A	Replacement Cost Value Returned By FEMA:	N/A
Prior NFIP Claims:	N/A	Total sq. footage of the building:	29,822
Building Severe Repetitive Loss (SRL)	No	Total # of floors in building:	1
Property:		What floor is the unit located on?	N/A
Property on NFIP SRL list, document(s)	N/A	Number of Detached Structures:	0
provided indicating non-SRL:			No
Coverage Req'd for Disaster Assistance:	No	Is the policy force-placed by the lender?	N/A
Occupancy Information			
Occupancy Type:	Non-Residential Building	Number Of Units In Building:	1
3, 3,	3	· ·	No
Is this the Applicant's Primary	No	Building Description:	Commercial
Residence:		"Other" Description:	N/A
Is the insured a small business with less than 100 employees?	No	Other Description.	
Foundation Information		Mobilehome/Travel Trailer Information	
Foundation:	Slab on grade (non-elevated)	On Permanent Foundation:	N/A
		Anchored By:	none
Enclosure/Crawlspace Size:	N/A	Serial Number:	N/A
Number of Elevators:	N/A		
Venting Information			
Enclosure/Crawlspace Has Valid Flood	No	Area of Permanent Openings (Sq. In.):	0
Openings: Number of Openings:	0	Has Engineered Openings:	No
	0		
Machinery, Equipment and Appliances			
Does the building contain appliances?	Yes	Does the building contain machinery and equipment servicing the building?	Yes
Are all appliances elevated above the first floor?	No	Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?	No
Elevation Certificate Information			
Elevation Certificate Section Used:	N/A	Flood Proofing Certificate:	N/A
Elevation Certificate Date:	N/A	Flood Proofing Elevation:	N/A
Diagram Number:	N/A	Lowest (Rating) Floor Elevation:	N/A
Top of Bottom Floor:	N/A	Elevation Certificate First Floor Height:	N/A
Top of Next Higher Floor:	N/A	FEMA First Floor Height:	3.1
Lowest Adjacent Grade (LAG):	N/A	First Floor Height Method Used:	FEMA Determined
Premium Calculations	· · · ·		
1 Tomani Galcalations		0014001151150 05 5115	TOTAL ANADUMET DUE

**RATING ENGINE** 

**COVERAGE DEDUCTIBLE** 

**BUILDING** \$500,000 \$1,250 **CONTENTS** \$500,000 \$1,250

### COMPONENTS OF THE TOTAL AMOUNT DUE

**BUILDING PREMIUM:** \$3,596.00 **CONTENTS PREMIUM:** \$3,371.00 **INCREASED COST OF COMPLIANCE (ICC) PREMIUM:** \$75.00 **MITIGATION DISCOUNT:** (\$0.00)**COMMUNITY RATING SYSTEM REDUCTION:** (\$685.00)**FULL RISK PREMIUM:** \$6,357.00 ANNUAL INCREASE CAP DISCOUNT: (\$0.00)STATUTORY DISCOUNTS: (\$0.00)**DISCOUNTED PREMIUM:** \$6,357.00 **RESERVE FUND ASSESSMENT:** \$1,144.00 **HFIAA SURCHARGE:** \$250.00

> **FEDERAL POLICY FEE:** \$47.00 **PROBATION SURCHARGE:** \$0.00 **TOTAL AMOUNT DUE:** \$7,798.00



Page 2 of 3



A separate flood insurance policy is required for each building with the following exception: Under the Standard Flood Insurance Policy Dwelling Form, appurtenant structure coverage may apply to a detached garage at the described location provided the detached garage is not used for dwelling, business, or farming purposes. Coverage is limited to 10% of the limit of liability on the dwelling and reduces the building limit of

The above statements are correct to the best of my knowledge. I understand that any fraudulent statements may be punishable by fine or imprisonment under the applicable federal law. The Federal EmergencyManagement Agency (FEMA) provides flood insurance under the terms of the National Flood Insurance Act of 1968 and its Amendments, and Title 44 of the Code of Federal Regulations. The premium shown above must comply with FEMA rules and rates and may be revised in accordance with applicable policy provisions.

Signatures	TIMCh.			
JOHN LOCKTON		10/25/2023		
Signature of Ag	ent/Producer	Date	Signature of Insured	(Optional)
	cancellation for reasons other than those s ng processing error or fraud.	set forth in the National Flood l	nsurance Program rules and regulati	ions. In matters involving

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Application Produced For: HARTFORD FIRE INSURANCE COMPANY

File: 15904490

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Agency:

LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER,CO 80237

CITY OF DENTON

Agent:

215 E MCKINNEY

DENTON, TX 76201

LÖCKTON COMPANIES LLC
Phone Number: (888) 314-4589
Email: FLOOD@LOCKTON.COM

### **New Application Invoice**

 Application Number :
 6500404754

 Policy Expiration Date :
 12/16/2024

 Application ID :
 000015916561

 Billing ID :
 000228485639

 Insured Property Location :
 Coverage
 Deductible

 515 N BELL AVE
 Building
 \$500,000
 \$1,250

 DENTON, TX 76201
 Contents
 \$40,000
 \$1,250

Payment Options: Premium Total Due: \$1,600.00

- ACH or Credit Card: Call our Payment Processing Center at 800-303-5663.
- Check: Follow the instructions noted on the bottom of this invoice.
   Please don't forget to include the application number on your check.
- On-Line: Visit https://TheHartford.ManageFlood.com and select "Pay New Application Online."

Please be aware that this application is subject to a full underwriting review of all documentation and rates may change based on that review.

IF PAYING BY CHECK PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

THE STATE

Insured Name: CITY OF DENTON

 Effective Date :
 12/16/2023

 Application No :
 6500404754

 Application ID :
 000015916561

 Billing ID :
 000228485639

To pay by check or money order:

Make payment for the exact premium amount due.

Full payment is required.

Write your application number on your check.
 Amount Enclosed: \$ \_\_\_\_\_\_.00

Mail this stub and the payment to the address below.

Make check payable to: HARTFORD FIRE INSURANCE COMPANY

PO BOX 913385



# **Standard Flood Insurance Policy Application**

# **General Property Form**

Date	Туре	Application Number	Effective Date Expiration Date	Waiting Period
10/25/2023	New	6500404754	12/16/2023 12/16/2024	Standard 30 Day Wait
Insured Name(s)		Mailing Address and Phone	Property Address	Agency Name, Address, and Phone
CITY OF DENT	ON	215 E MCKINNEY DENTON, TX 76201	515 N BELL AVE DENTON, TX 76201	LOCKTON COMPANIES LLC 8110 E UNION AVE #700 DENVER, CO 80237
		Home Phone: Work Phone:	Property Address Type:	
		Cell Phone: N/A		Email: FLOOD@LOCKTON.COM
Applicant Type:	Business	Email: N/A		Phone Number: 3034146000
Other Policy Nur Prior Policy Num				Agent Name: LOCKTON COMPANIES LLC
Prior Company N	Name:		Prior Company NAIC:	
Renewal Billing:	Insured		Potential Duplicate Policy: N/A	
1st Mortgagee		2nd Mortgagee	Additional Interest	Disaster Agency

			Phone Number:
Phone Number:	Phone Number:	Phone Number:	Fax Number:
Fax Number:	Fax Number:	Fax Number:	Loan Number:
Loan Number:	Loan Number:	Loan Number:	Case Number:
<b>Current Community Information</b>		Prior Community Information	
Community Name:	DENTON, CITY OF	Community Number:	N/A
Community Number:	480194	Map Panel:	N/A
Map Panel:	0360	Map Panel Suffix:	N/A
Map Panel Suffix:	G	Flood Zone:	N/A
Current Flood Zone:	X	FIRM Date:	N/A
FIRM Date:	08/01/1979	Has This Property Been Remapped?:	No
Program:	Regular	Map Revision Date:	N/A
Program Status:	Active and participating		
County:	DENTON COUNTY		
Current Map Date:	04/18/2011		
Rating Map Date:	04/18/2011		
Construction/Substantial Improvement D	ate	Property Ownership Information	
Date of Original Construction:	01/01/1992	Coverage for Owner or Tenant:	Owner
Building Substantially Improved:	No	Building a Rental Property:	No
Building is on list of Historic Buildings:	N/A	Is the policyholder a condominium	No
Post-FIRM Construction:	Yes	association?	
Substantial Improvement Date:	N/A		
Prior NFIP Coverage			
Did the applicant purchase the building within the last 365 days?	No	Did the applicant have a prior NFIP policy for the building that lapsed?	No
Prior Owner Policy Number:	N/A	Was the policy receiving a Pre-FIRM or	N/A
Prior Owner Company Name:	N/A	Newly Mapped discount when it lapsed?	
		Did the policy lapse for a valid reason?	N/A

File: 15916561

Page 1 of 3



<b>Building Information</b>			
Building Located In CBRS/OPA:	None	Building Located Over Water:	Not Over Water
CBRS/OPA Designation Date:	N/A	Building in Course of Construction:	No
If the building is in the buffer zone, did	N/A	Building Construction Type:	Masonry
USFWS issue an official determination		Construction Type Description:	N/A
showing the building outside the system unit or OPA?		Estimated Building Replacement Cost:	\$304,000
Is the building use consistent with the protected area purpose?	N/A	Replacement Cost Value Returned By FEMA:	N/A
Prior NFIP Claims:	N/A	Total sq. footage of the building:	2,660
Building Severe Repetitive Loss (SRL)	No	Total # of floors in building:	1
Property:		What floor is the unit located on?	N/A
Property on NFIP SRL list, document(s)	N/A	Number of Detached Structures:	0
provided indicating non-SRL:		Building Located on Federal Land:	No
Coverage Reg'd for Disaster Assistance:	No	Is the policy force-placed by the lender?	N/A
Occupancy Information	Non-Desidential Duitding		
Occupancy Type:	Non-Residential Building	Number Of Units In Building:	1
Is this the Applicant's Primary	No	Is the insured a nonprofit entity?	No
Residence:	No	Building Description:	Other Non-Residential Type
Is the insured a small business with less than 100 employees?	No	"Other" Description:	CIVIC CENTER POOL / RESTROOM / CONCESSION / LIFEGUARD OFFICE
Foundation Information		Mobilehome/Travel Trailer Information	
Foundation:	Slab on grade (non-elevated)	On Permanent Foundation:	N/A
	g (	Anchored By:	none
Enclosure/Crawlspace Size:	N/A	Serial Number:	N/A
Number of Elevators:	N/A		
Venting Information			
Enclosure/Crawlspace Has Valid Flood	No	Area of Permanent Openings (Sq. In.):	0
Openings:		Has Engineered Openings:	No
Number of Openings:	0		
Machinery, Equipment and Appliances			
Does the building contain appliances?	Yes	Does the building contain machinery and equipment servicing the building?	Yes
Are all appliances elevated above the first floor?	No	Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?	
Elevation Certificate Information			
Elevation Certificate Section Used:	N/A	Flood Proofing Certificate:	N/A
Elevation Certificate Date:	N/A	Flood Proofing Elevation:	N/A
	N/A	Lowest (Rating) Floor Elevation:	N/A
Diagram Number: Top of Bottom Floor:	N/A N/A	Elevation Certificate First Floor Height:	N/A
Top of Next Higher Floor:	N/A	FEMA First Floor Height:	1.1
Lowest Adjacent Grade (LAG):	N/A	First Floor Height Method Used:	FEMA Determined
Premium Calculations	N/A		

**RATING ENGINE** 

# COVERAGE DEDUCTIBLE

**BUILDING** \$1,250 \$500,000 **CONTENTS** \$40,000 \$1,250

## COMPONENTS OF THE TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$936.00
CONTENTS PREMIUM:	\$247.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$22.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$101.00)
FULL RISK PREMIUM:	\$1,104.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$1,104.00
RESERVE FUND ASSESSMENT:	\$199.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$47.00
PROBATION SURCHARGE:	\$0.00



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TOTAL AMOUNT DUE:

\$1,600.00

A separate flood insurance policy is required for each building with the following exception: Under the Standard Flood Insurance Policy Dwelling Form, appurtenant structure coverage may apply to a detached garage at the described location provided the detached garage is not used for dwelling, business, or farming purposes. Coverage is limited to 10% of the limit of liability on the dwelling and reduces the building limit of

The above statements are correct to the best of my knowledge. I understand that any fraudulent statements may be punishable by fine or imprisonment under the applicable federal law. The Federal EmergencyManagement Agency (FEMA) provides flood insurance under the terms of the National Flood Insurance Act of 1968 and its Amendments, and Title 44 of the Code of Federal Regulations. The premium shown above must comply with FEMA rules and rates and may be revised in accordance with applicable policy provisions.

Signatures  JOHN LOCKTON	Thep.	10/25/2023		
Signature of Age	ent/Producer	Date	Signature of Insured	(Optional)
This policy is not subject to available other than for billing	cancellation for reasons other than those so g processing error or fraud.	et forth in the National Floo	od Insurance Program rules and regulati	ions. In matters invol

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Application Produced For: HARTFORD FIRE INSURANCE COMPANY

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