

FLOOD INSURANCE APPLICATION SUMMARY



Wright National Flood Insurance Company
 A Stock Company
 PO Box 33003
 St. Petersburg, FL, 33733
 Office: 800.820.3242
 Fax: 800.850.3299

POLICY INFORMATION

Policy Number	42115183736000	Application Date	05/17/2019
Policy Period	06/16/2019 to 06/16/2020	Premium paid by	Insured
Agency Number	48752	Insured Name	HIDALGO COUNTY
Agency	MCGRIFF INSURANCE SERVICES INC	Property Address	300 S INSPIRATION RD VETERAN S PAVILION HALL BLDG
Agency Address	818 TOWN AND COUNTRY BLVD STE 500 HOUSTON, TX 77024-4549	Insured's Phone	713.402.1479
Agent Phone	713.877.8975		
Small Business	No		
Non-Profit	No		
Mandatory Purchase	No		
Prior Policy Required under Mandatory Purchase	No		

ZONE INFORMATION

Current Flood Zone	B	Zone Determination	Yes
Current Community Number	480334	Certificate #	72392358
Current Map Panel Suffix	0400 C	Determination #	DRP0000000009646771

RATING INFORMATION

Building Occupancy	Other Non-Residential	Flood Risk/Rated Zone	B
Number of Floors	One Floor	Community Name	HIDALGO COUNTY *
Basement/Enclosure/Crawlspace	None	Grandfathered	No

COVERAGE / PREMIUM INFORMATION

Coverage	Limits	Deductible	Premium
Building	\$200,000.00	\$1,250.00	\$1,149.00
Contents	\$50,000.00	\$1,250.00	\$0.00

PAYMENT INFORMATION

Payment Method	Check	Annual Subtotal	\$1,149.00
Name of Check Holder	Insured	Deductible Credit	\$0.00
Check #	0000	ICC Premium	\$8.00
Check Date	05/17/2019	Community Discount	\$0.00
Check Owner Signature	_____	Reserve Fund Assessment	\$174.00
Amount	\$ 1606.00	HFIAA Surcharge	\$250.00
		Probation Surcharge	\$0.00
		Federal Policy Service Fee	\$25.00
		Total Premium	\$1,606.00

NOTES

NO COVERAGE EXISTS UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED AND THE WAITING PERIOD HAS EXPIRED.
Notice: This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

The following conditions should be used to determine a building's eligibility for Preferred Risk:

- A. Is the building located in a Special Flood Hazard Area on a Flood Hazard Boundary Map or on a Flood Insurance Rate Map zone A, AE, A1-A30, AO, AH, V, VE, V1-V30?
- B. Do any of these conditions, arising from one or more occurrences, exist?
 - 2 loss payments, each more than \$1,000
 - 3 or more loss payments, regardless of amount
 - 2 federal disaster relief payments, each more than \$1,000
 - 3 federal disaster relief payments, regardless of amount
 - 1 flood insurance claim payment and 1 flood disaster relief payment (Including loans and grants), each more than \$1,000

Insurance is available under Preferred Risk only if answers to these questions are no, except for buildings eligible under the Newly Mapped procedure, for which the answer to question A may be Yes.

REQUIRED DOCUMENTATION CHECKLIST (additional items, not indicated below, may be required)

• Payment by Check

Submit this Application Summary with the documents indicated above by using the File Upload option on the website. Items may also be submitted by mailing to the address or faxing to the number indicated at the top of this letter. Faxed photographs are not acceptable per NFIP guidelines regarding photograph clarity. If the payment method is ACH, EFT or Credit Card and no documents are required, then this form and application that follows are for the agency's records.

This policy is issued by Wright National Flood Insurance Company

42115183736000 - 20190517142650 - 1,606.00

PREFERRED FLOOD INSURANCE APPLICATION



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AGENCY INFORMATION		INSURED INFORMATION	
Agency Number	48752	Mailing	9805 N 10TH ST
Agency	MCGRIFF INSURANCE SERVICES INC		MCALLEN , TX 78504-9529
Address	818 TOWN AND COUNTRY BLVD STE 500	Property	300 S INSPIRATION RD VETERAN S PAVILION HALL BLDG
City, State, Zip	HOUSTON, TX 77024-4549		MISSION , TX 78572
Phone Number	713.877.8975	Phone Number	713.402.1479
Agent's Email Address	lherrera@mcgriff.com	Email Address	lherrera@mcgriff.com

POLICY INFORMATION			
Applicant	HIDALGO COUNTY	Policy Number	42115183736000
Effective Date	06/16/2019	Policy Period	06/16/2019 to 06/16/2020
House of Worship	No	Term	12 months
Small Business	No	Disaster Assist	No
Non-Profit	No	Waiting Period	Standard 30 Day Wait
Mandatory Purchase	No	Bill To	Insured
Prior Policy Required under Mandatory Purchase	No		

BUILDING INFORMATION			
Property Purchase Date	01/01/1982	Condominium Coverage	No
County or Parrish	HIDALGO	Condominium Ownership	No
Current Flood Zone	B	Entire Building Coverage	Yes
Flood Risk/Rated Zone	B	Building Description	Other
Community Name	HIDALGO COUNTY *	Other Description	Hall BBQ Pavilion
Current Community Number	480334	Leased Federal Land	No
Current Map Panel Suffix	0400 C	Building on Federal Land	No
Community Program Type	Regular	Principal/Primary Residence	No
Location Of Contents	Lowest Floor Only - Above Ground Level	Percentage of Residency	50% or Less
Building Occupancy	Other Non-Residential	Course of Construction	No
Building Purpose	Non-Residential	Walled & Roofed	Yes
Residential Use Percentage	0%	Over Water	Not Over Water
Number of Floors	One Floor	Household Contents	No
Date of Construction	01/01/1982	Building Elevated	Building is not elevated
Insured Tenant	No	Replacement Cost	\$200,000.00
Tenant Building Coverage	Not Applicable	Building Post-FIRM	Yes
Rental Property	No	Description of Contents	Business Related
		Grandfathered	No
		Severe Repetitive Loss	No

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SECTION I - ALL BUILDING TYPES

Floor Below Grade	No	Garage Attached To or Part of the Building	No
Basement/Enclosure/Crawlspace	None	Additions and Extensions	None
Appliances	No		

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COVERAGE AND RATING

Coverage	Basic Limits			Additional Limits			Ded%	Deductible Amount	Basic and additional	Premium Totals
	Basic Cov	Rate	Ann Prem	Additional Cov	Rate	Ann Prem	0.0%		Total amount of ins	
BLDG	\$200,000.00	0.00	\$1,149.00	\$0.00	0.00	\$0.00	\$0.00	\$1,250.00	\$200,000.00	\$1,149.00
CNTS	\$50,000.00	0.00	\$0.00	\$0.00	0.00	\$0.00	\$0.00	\$1,250.00	\$50,000.00	\$0.00
									Annual subtotal	\$1,149.00
									Multiplier	1.000
									Adjusted Premium	\$1,149.00
									ICC Premium	\$8.00
									Subtotal	\$1,157.00
									CRS%	0%
									Subtotal	\$1,157.00
									Reserve Fund Assessment	\$174.00
									HFIAA Surcharge	\$250.00
									Rounded Subtotal	\$1,581.00
									Probation Surcharge	\$0.00
									Federal service fee	\$25.00
									Total amount due	\$1,606.00

Rate Table Code: P3C
 Rate Method: Manual

INFORMATION AFFIRMATION

The above statements are correct to the best of my knowledge. I understand that any false statements may be punishable by fine or imprisonment under applicable federal law.

This application is non-binding and subject to review and approval by the company. Full amount of premium must accompany this application for issuance. Please retain a signed copy in your files for audit purposes, and submit the item(s) indicated in the Required Documentation Checklist section of the Flood Application Summary.

Carefully review the application being provided for accuracy. Price and terms associated with this application are subject to underwriting review and may not be available if FEMA rates change. **Please refer to the policy for complete terms, conditions, and exclusions.** Please refer to www.ambest.com for rating, financial size category and additional information on the insurance carrier shown on this application.

_____	_____	_____
Print Name of Insured	Signature of Insured	Date
_____	_____	_____
Print Name of Agent/Broker	Signature of Agent/Broker	Date

LEGAL INFORMATION

Non-Discrimination

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

Privacy Act

The information requested is necessary to process your application for flood insurance. The authority to collect the information is Title 42, U.S. Code, Section 4001 to 4028. It is voluntary on your part to furnish the information. It will not be disclosed outside the Federal Emergency Management Agency except to the servicing office acting as the government's fiscal agent, to routine users, to your agent and any lender named on your policy.

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