



Policy Number: 1927594184

FLOOD POLICY DECLARATIONS

American Family Mutual Insurance Company



760101

Type: Revised Declaration
Policy Period: 08/24/2012 To 08/24/2013
Form: RCBAP

Reference Number: 87048450852012
To report a claim call: (800) 787-5677
These Declarations are effective
as of: 05/01/2013 at 12:01 AM

Address Info

Producer Name and Mailing Address:
TOM FISCHER AGENCY, INC.
7440 N LINDBERGH BLVD
HAZELWOOD, MO 63042-2121

Insured Name and Mailing Address:
KAPILANA ESTATES CONDOMINIUMS
793 WINN Rd Unit C
Osage Beach, MO 65065-3267

Agent/Agency #: 0000235164
Reference #: 09120-03686-000
Phone #: (314) 895-1055

Processed by:
Flood Insurance Processing Center
P.O. Box 2057 Kalispell MT 59903-2057

Property Info

Insured Property Address:
821 WINN RD
OSAGE BEACH, MO 65065-3297

Coverage Limitations May Apply, Refer to Your
Flood Insurance Policy for Details.

Premium Payor: Insured
Rated Zone: AE **Current Zone:**
Community Number: 29 0671 0120 C
Community Name: OSAGE BEACH, CITY OF
Grandfathered: No
Pre-Firm Construction
Program Type: Regular

Building Description:
Other Residential
Three or More Floors
Slab On Grade
High Rise
Main House/Building

Replacement Cost: \$1,588,724
Number of Units: 12

Coverage & Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building:	1,588,800	.330 / .030	25,000	271-	731.00	Premium Subtotal:	531.00
Contents:						ICC Premium:	5.00
Contents						CRS Discount:	.00
Location:						Federal Policy Fee:	440.00
						Probation Surcharge:	.00
						Endorsement Amount:	92.00
						Total Premium Paid:	976.00

Mortgage Info

First Mortgage:

Third Mortgage:

Second Mortgage:

Fourth Mortgage:

This Declaration Page, in conjunction with the policy, constitutes your Flood Insurance Policy.
In WITNESS WHEREOF, we have signed this policy below and hereby enter into this Insurance Agreement.

President

Secretary