

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 1021 2842708 8/08/23 2000 11523 FLD RCBP

FLOOD DECLARATIONS PAGE RENEWAL

National Flood Insurance Policy

Policy Number	NFIP Policy Number	Product Type:
42 1150080931 14	1150080931	Residential Condominium Building Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 9/16/23 To:9/16/24 12:01 am Standard Time	08/08/2023	0708683	1150080931

Agent (281)378-7500 TED W ALLEN & ASSOCIATES INC 17004 GRANT RD CYPRESS TX 77429-1260

7575 KIRBY HOMEOWNERS ASSN INC 6200 SAVOY DR STE 420 HOUSTON TX 77036-3324

FLOOD@TEDWALLEN.COM

Property Location (if other than above)

Address may have been changed in accordance with USPS standards. 7575 KIRBY DR BLDG 1, HOUSTON TX 77030

	Ratir	ng	Info	rm	ation
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Rate Category: Rating Engine

Primary Residence: N

Building Occupancy: Residential Condominium Building Building Description: Entire Residential Condo Building

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Property Description: Elevated with enclosure on

posts/piles/piers, 4 floors

Flood Risk: AE

First Floor Height: 12.3 ft

Method Used to Determine First Floor Height: Elevation Certificate

Date of Construction: 09/01/2004

Prior NFIP Claims: 0
Number of Units: 144

Replacement Cost Value: 29,326,246

TOTAL WRITTEN PREMIUM AND FEES:

Coverage		Deductible	Annual Premium
BUILDING CONTENTS	\$25,262,000 NO CONTENTS COVERAGE	\$1,250 INSURED DECLINED CONTENTS COVERAGE	\$10,864.00 \$0.00
Your property's NFIP flood claims history can affect your premium. For more information contact your insurance agent or company.		DISCOUNTED PREMIUM:	\$75.00 \$0.00 \$10,939.00 \$10,939.00
Coverage lin	nitations may apply. See your for details.	Reserve Fund Assessment: Federal Policy Service Fee: HFIAA Surcharge:	\$1,969.00 \$2,028.00 \$250.00

THIS IS NOT A BILL

Premium Paid by: Insured

Forms and Endorsements:

FFL 99.310 0120 0120 WFL 99.416 1021 1021 FFL 99.117 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, President



\$15,186.00



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 1021 2842713 8/08/23 2000 11523 FLD RCBP

FLOOD DECLARATIONS PAGE
RENEWAL National Flood Insurance Policy

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Policy Number	NFIP Policy Number	Product Type:		
42 1150080932 14	1150080932	Residential Condominium Building Policy Form		

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 9/16/23 To:9/16/24 12:01 am Standard Time	08/08/2023	0708683	1150080932

Agent (281)378-7500 TED W ALLEN & ASSOCIATES INC **17004 GRANT RD** CYPRESS TX 77429-1260

7575 KIRBY HOMEOWNERS ASSN INC **6200 SAVOY DR STE 420** HOUSTON TX 77036-3324

FLOOD@TEDWALLEN.COM

Property Location (if other than above) 7575 KIRBY DR BLDG 2, HOUSTON TX 77030

Address may have been changed in accordance with USPS standards.

Rating Information

Rate Category: Rating Engine

Primary Residence: N

Building Occupancy: Residential Condominium Building

Building Description: Entire Residential Condo Building

Property Description: Elevated with enclosure on

posts/piles/piers, 4 floors

Flood Risk: AE

First Floor Height: 12.3 ft

Method Used to Determine First Floor Height: Elevation Certificate

Date of Construction: 09/01/2004

Prior NFIP Claims: Number of Units: 32

Replacement Cost Value: 5,396,617

Coverage		Deductible	Annual Premium
BUILDING	\$4,980,000	\$1,250	\$3,198.00
CONTENTS	NO CONTENTS COVERAGE	INSURED DECLINED CONTENTS COVERAGE	\$0.00
[\frac{1}{2} \]	L NED Control	ICC Premium:	\$61.00
Your property's NFIP flood claims history		Community Rating Discount:	\$765.00
	ur premium. For more informatio	n FULL RISK PREMIUM:	\$2,494.00
contact your i	insurance agent or company.	DISCOUNTED PREMIUM:	\$2,494.00
		☐ Reserve Fund Assessment:	\$449.00
_		Federal Policy Service Fee:	\$1,180.00
Coverage lin Policy Form	nitations may apply. See your for details.	HFIAA Surcharge:	\$250.00
-		TOTAL WRITTEN PREMIUM AND FEES:	\$4,373.00

THIS IS NOT A BILL

Premium Paid by: Insured

Forms and Endorsements:

FFL 99.310 0120 0120 WFL 99.416 1021 1021

FFL 99.117 1021 1021

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