

Midstate Mutual Insurance Company

Home Office: P.O. Box 430, Auburn, NY 13021-0430

13 06 04 08

RENEWAL OF
Policy ID 387916

YOUR Homeowners POLICY IN PLAIN LANGUAGE

Policy ID: 403039

POLICY PERIOD From: JUN 4, 2015 To: JUN 4, 2016

12:01 am Standard Time PAGE 1 OF 4

Named Insured and Address

Phone: (315) 564-7861

Agent Phone: (315) 252-7040 Fax: (315) 253-4646

Michael B Jackson
7372 Hapeman Road
Wolcott, NY 14590

Moran, Moran & Dauphin, Inc
354 Grant Avenue
P.O.Box 1037
Auburn, NY 13021

This replaces all previously issued policy Declarations, if any. This policy applies only to accidents, occurrences or losses which happen during the policy period shown above. If the policy is written on a continuous basis, each period of one year ending on the annual anniversary date of this policy constitutes a separate policy period. This policy applies only to those coverages below for which a limit of liability or premium charge is shown. Our limit of liability for each coverage shall be not more than the amount stated for such coverage, subject to all the terms of this policy.

The Described Location(s) covered by this policy is located at the above address, unless otherwise stated.

1) 7372 Hapeman Road, Wolcott, Wayne, Wolcott, NY 14590

Property Coverages	Liability Limit	Property Coverage Deductible
		\$500
A. Residence	\$ 146,317	Unless Otherwise Specified
B. Related Private Structures	\$ 14,632	Rating Information:
C. Personal Property	\$ 102,421	Protection: SP SEMI PROTECTED
D. Add'l Living Exp. & Loss of Rent	\$ 29,262	1001 ft to hydrant-3 mi to FD
E. Farm Pers. Property - Scheduled	\$ N/A	Construction: Frame
F. Farm Barns, Bldgs, & Structures	\$ N/A	No. of Families: 1
		Fire District: Wolcott
Personal Liability Coverages		Residence Replacement Cost Cov Appls
L. Personal Liability per Occurrence	\$ 300,000	
M. Medical Payments per Person	\$ 1,000	

Subject to the Following Forms & Endorsements: (insert no., edition date, title)					PREMIUM
Basic Forms: ML-20 (06/99),MFL-25A-COOP (01/87),ML-151-MMIC (01/93)					
MFL-84A (02/00),ML-83 (02/02),ML-189 (10/01)					
ML-216 (06/99),ML-82 (02/99),ML-340 (05/00)					
NYSTAT-1 (11/08),ML-74 (03/12),ML-MOTVEH-MMIC (11/13)					
ML-3	(06/99)	Causes of Loss Section-Coverages A,B,C and D (Causes of Lo			495.00
ML-9	(01/87)	Liability Coverage Section			17.00
MFL-409	(01/89)	Limited(Personal)Sudden & Accidental Pollution Liab Cov			0.00
FED	(00/00)	Fire Extinguisher Discount			-6.00
DBD	(00/00)	Dead Bolt Discount			-6.00

MAY 05,2015

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Subject to the Following Forms & Endorsements: (insert no., edition date, title)		PREMIUM
RHC	(00/00) Renovated Home Credit	-55.00
ML-BE	(07/86) Policy Restriction	0.00
ML-55	(06/99) Personal Property Replacement Cost	50.00
ML-243A	(06/99) Inflation Guard	0.00
ML-305A	(06/99) Added Perils For Refrigerated Food Products	0.00
ML-342	(07/14) Underground Utility Line Endorsement	19.00

Subsequent payments will be due each year on the anniversary date based on the rates in effect at that time.	PREMIUM AT INCEPTION	\$ 514.00
	NYS FIRE INSURANCE FEE	\$.00

Loc Mortgagee or Secured Party:	Address	City	St	Zip	Loan #	Interest
1) JP Morgan Chase Bank, NA	P.O. Box 47020	Atlanta	GA	30362	4500615978	First Mortgage
Its successors and/or assigns						

MAY 05, 2015

Countersignature Date

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Our Authorized Representative

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===== SUPPLEMENTAL DECLARATIONS =====

Form #	Edition Title	Premium
ML-3	(06/99) Causes of Loss Section-Coverages A,B,C and D (Causes of Loss and Replacement Cost Provision)	\$495

Form #	Edition Title	Premium
ML-9	(01/87) Liability Coverage Section	\$17

Form #	Edition Title	Premium
MFL-409	(01/89) Limited(Personal)Sudden & Accidental Pollution Liab Cov	\$0

Form #	Edition Title	Premium
FED	(00/00) Fire Extinguisher Discount	\$-6

Form #	Edition Title	Premium
DBD	(00/00) Dead Bolt Discount	\$-6

Form #	Edition Title	Premium
RHC	(00/00) Renovated Home Credit	\$-55

Form #	Edition Title	Premium
ML-BE	(07/86) Policy Restriction	\$0

Original on file in office, copy available on request.

Form #	Edition Title	Premium
ML-55	(06/99) Personal Property Replacement Cost	\$50

For Location: 1) 7372 Hapeman Road

Form #	Edition Title	Premium
ML-243A	(06/99) Inflation Guard	\$0

For Location 1) 7372 Hapeman Road

The amount of insurance for Coverages A,B,C and D will increased by .75% of the amount shown in the Declarations at the end of each 3 month period after the effective date.

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===== SUPPLEMENTAL DECLARATIONS =====

Form #	Edition Title	Premium
ML-305A	(06/99) Added Perils For Refrigerated Food Products	\$0

We pay no more than \$500 per occurrence

Form #	Edition Title	Premium
ML-342	(07/14) Underground Utility Line Endorsement	\$19

Per Occurrence Limit	Per Occurrence Deductible
\$10,000	\$500

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===== PREMIUM SUMMARY PAGE =====

Plan: 4

	<u>NEW ANNUAL</u>	<u>OLD ANNUAL</u>	<u>DIFFERENCE</u>	<u>PRO RATA</u>
Homeowners	514.00			
Inland Marine	.00			
Wind	.00			
Liability	.00			
Tax	.00			
Total Premium	514.00			

BILL TO

JP Morgan Chase Bank
P.O. Box 47020
Atlanta, GA 30362

MAIL TO

,

Peril - ML-3

Loan Number: 4500615978

FORMS: NO HazMat No

Date Printed: 05-04-2015

Date Mailed : 05-05-2015