



SHELTER
MUTUAL
INSURANCE
COMPANY



013020142540

FLAT BRANCH MORTGAGE INC ITS SUCESSORS
AND/OR ASSIGNS
PO BOX 843084
KANSAS CITY MO 64184-3084

Policy Number: 24-71-11150981-1
Kind of Policy: Homeowners

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Shelter Mutual Insurance Company
 1817 W Broadway
 Columbia, MO 65218
 1-800-SHELTER (743-5837)



01303014254G

Homeowners Insurance Policy Declarations

Mortgagee Copy

Named Insured:
 BRIAN RUSSELL
 133 S PACIFIC ST
 CAPE GIRARDEAU, MO 63703-6104

Policy Number: 24-71-11150981-1
Effective Date: 12/18/2023 (09:48 AM CST)
Expiration Date: 12/15/2024 (12:01 AM CST)

Agent: REBECCA TOSARELLO INS AGCY LLC
 24-E222-44
 87 S PLAZA WAY
 CAPE GIRARDEAU, MO 63703
 573-335-5287

Policy and Endorsements are available upon request.

Primary Location	Description
133 S PACIFIC ST IN CAPE GIRARDEAU MISSOURI 63703	MASONRY, OWNER, 1 FAMILY DWELLING

Coverages	Limits	Deductible	Endorsement Number	Premium
A. DWELLING	\$173,600	\$1,500*		
B. OTHER STRUCTURES	\$17,360	\$1,500*		
C. PERSONAL PROPERTY	\$121,520	\$1,500*		
D. ADDITIONAL LIVING EXPENSES	24 Months			
E. PERSONAL LIABILITY	\$300,000			
F. MEDICAL PAY	\$1,000			
Renovation Cost Endorsement			B-639.7-B	
Drainage System Endorsement (\$55.00)	\$10,000		B-102-B	
The Drainage System Endorsement limit is an aggregate limit for all losses from one occurrence irrespective of the number of coverages that apply.				
Buried Utility Lines Coverage Endorsement	\$10,000	\$500	HO-201.0 SS (12-23)	
Expanded Renovation Cost Coverage			B-813.3-B	

*We will take only one deductible when multiple coverages apply to losses caused by one accident.

Total for Term (This is Not a Bill): \$1,224.92

Discounts:

The following discounts have been applied to this policy and are reflected in the above premiums, resulting in a premium savings of **\$393.53** Companion Policy;; Protective Device

Policy forms and additional endorsements attached to this policy	Number
Homeowners Insurance Policy (Special Coverage Form 3) - Missouri	HO3 MO1
Amendatory Endorsement - Short Term Rentals	B-372.1-B
Exclusion-Electronic Smoking Device	B-311.10-B
Mutual Policy Notification	S-18-S
Exclusion-Cannabis	B-310.18-B



Policy forms and additional endorsements attached to this policy	Number
Amendatory Endorsement - Additional Coverage C Perils	B-246-B
HO-3 Amendatory Endorsement - Missouri	B-905-B

First Mortgagee

Loan Number: 2306280356
FLAT BRANCH MORTGAGE INC ITS
SUCESSORS AND/OR ASSIGNS ATIMA
PO BOX 843084
KANSAS CITY, MO 64184-3084

(For Office Use Only)

Transaction: P.C.	Tier: 1000
H. O. CODE: 1,224.92	Protection Class: 3
Policy ID: 349176	Date Issued: 12/18/2023
Policy Term: 1 Year	
County: 031	Zone Code: 043
Billing Frequency: Annual	Billing Method: None
Billing Preference: BillMe	

End of Declarations