



ADDITIONAL REMARKS SCHEDULE

AGENCY PCS Insurance Group Inc.	License # L054562	NAMED INSURED Sandal Cove Condominium II Association, Inc. c/o Ameri-Tech Community Management 24701 US Hwy 19 N, Ste 102 Clearwater, FL 33763
POLICY NUMBER SEE PAGE 1		
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Coverages

PROPERTY Coverage:

Term -9/2/2024 to 9/2/2025

Carrier: First Protective Insurance Company

Policy # 7222175626

TIV - \$5,408,833

Special Form

Replacement Cost Value

Agreed Value

Hurricane Deductible - 5% of the value of the damaged building (s) per occurrence

AOW Deductible -\$5,000 per occurrence

All other Perils Deductible - \$5,000 per occurrence

Ordinance or Law: Coverage A included in bulding limit; B&C Combined sublimit \$250,000

32 Units - Coverage is walls out and does not include unit interior.

Property Manager is included for coverage under General Liability, Crime/Fidelity, and D&O policy forms.

Cancellation notification is 30 days except non-payment, which is 10 days.