

SageSure
PO Box 12999
Tallahassee, FL 32317-3206

HARIHARASUDHAN SHANMUGAM
4315 GLENIRISH DRIVE
KATY, TX 77494



P.O. Box 12999
Tallahassee, FL 32317
800-481-0661
Sagesure.com

February 16, 2024

HARIHARASUDHAN SHANMUGAM
4315 GLENIRISH DRIVE
KATY, TX 77494

RE: Policy Number: TXFC74151600
Insurance Carrier: SureChoice Underwriters Reciprocal Exchange

Dear HARIHARASUDHAN

Thank you for choosing SageSure and SureChoice Underwriters Reciprocal Exchange for your insurance needs.

We previously sent you a declaration page that did not display your deductibles properly. Please disregard the previous document you received and replace it with the corrected declaration page enclosed. Rest assured, there has been no change to your coverage or premium as a result of this printing correction.

If you have any questions about your policy, please call your insurance representative CARL RYAN DAVIS at (281) 915-9966.

Thank you for the opportunity to serve you.

Sincerely,
SageSure Customer Care
(800) 481-0661 | CustomerCare@SageSure.com





Policy Number:
TXFC74151600

Statement Date:
February 16, 2024

NEED SUPPORT?

Named Insured:
HARIHARASUDHAN SHANMUGAM
4315 GLENIRISH DRIVE
KATY, TX 77494

Producer:
W30783N
CARL RYAN DAVIS
28789 HARDIN STORE ROAD, STE
260
MAGNOLIA, TX 77354
ryan@dig-agency.com

**For questions about your coverage:
Call your Insurance Representative:**
(281) 915-9966

Additional Insured:
None

To manage your claim:
Visit www.MySageSure.com or call
(800) 481-0622

Agent of Record:
SAGESURE INSURANCE MANAGERS
PO BOX 12999
TALLAHASSEE, FL 32317
Policy Form:
Dwelling

**To access your policy details and
make a payment:**
Visit www.MySageSure.com

Billing questions?
Email CustomerCare@SageSure.com
or
Visit www.MySageSure.com

Policy Period:
Oct. 24, 2023 to Oct. 24, 2024 *

Residence Premises:
4303 WHITEFISH LN
KATY, TX 77494

Transaction Type: Endorse

Trans Effective Date: Oct. 24, 2023

* 12:01am local time at location
of the residence premises

Trans Amount:

Your Insurer:

SureChoice Underwriters Reciprocal Exchange (SURE)
Three Chasewood, Suite 160, 20445 State Highway 249
Houston, TX 77070

Coverage is Provided Where Limits of Liability or Premium is Shown

Property Coverage	Limit	Premium	Liability Coverage	Limit	Premium
A. Dwelling.....	\$288,000	\$1,010	L. Personal Liability	\$300,000	\$25
B. Other Structures.....	\$5,760	Included	Each Occurrence		
C. Personal Property.....	\$0	Included	M. Medical Payments to Others	\$5,000	Included
D. Fair Rental Value & E. Additional Living Expense.....	\$57,600	Included	Each Person		

Breakdown of Premium:

Adjustments	Limit	Premium
Water Damage – Constant Or Repeated Seepage Coverage - Texas	Policy Limits	\$23
Loss Assessment Property Coverage	\$1,000	\$3
Limited “Fungi” or Microbes Coverage	\$5,000	Included



Policy Number:
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Breakdown of Premium Continued:

Discounts, Credits and Surcharges:

New Home Discount Included

Fees and Taxes

Surplus Contribution* \$53

Policy Fee** \$50

*The Surplus Contribution is not a part of your Total Policy Premium.

**The policy fee is a flat expense charge to cover the costs of administering your policy and is nonrefundable if coverage is cancelled after the policy effective date.

Grand Total \$1,164

Deductibles (Section I Only)

In case of loss under the Property Section, we cover only that part of the loss over the deductible stated.

THIS POLICY CONTAINS A SEPARATE WIND/HAIL DEDUCTIBLE FOR LOSS CAUSED DURING A STORM WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

All Other Perils (2 % of Coverage A)	\$5,760
Windstorm or Hail (2 % of Coverage A)	\$5,760
Loss Assessment Property Damage	\$500

Mortgagees & Other Interests:

Mortgagee:
DHI MORTGAGE COMPANY ISAOA/
ATIMA
10700 PECAN PARK BLVD STE 450
AUSTIN, TX 78750
LOAN #: 230654921

Basic Rating Information:

Territory 115	County FORT BEND	Construction Year 2023	Construction Type Masonry Veneer	Roof Surfacing Material Architectural Shingles	Roof Age 0 Years
Public Protection Class 5	Rating Tiers Cat/Non-Cat 8	Structure Type Single Family (free standing)	Opening Protection Unknown	Fire Protection Device Local	Theft Protective Device Local
Occupancy Tenant Occupied	No. Of Stories 1				



Policy Number:
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Premium Summary:

Hurricane Premium	\$728
Non-Hurricane Premium	\$333

Policy Forms and Endorsements

- DP 00 03 07 14 - Dwelling Property Special Form
- DC2821301 05 16 - Special Provisions - Texas
- DC2821302 05 16 - Special Provisions - Texas
- TXRECIP 01 21 Special Provisions and Definitions - Texas
- DP 05 50 12 03 - Exclusion of Residential Community Property Clause - Texas
- DC28DEDPN 01 17 - Important Deductible Information Advisory Notice
- PC328 CD-1 REV. 07/10 - Use of Credit Information Disclosure
- DC48EXPN 02 21 - Exclusions - Advisory Notice To Policyholders
- 28 TAC Section 5.9971(b) - Consumer Bill of Rights-Homeowners, Dwelling, and Renters Insurance
- DC2851701 12 16 - Limited Fungi or Microbes Coverage - Texas
- DL P 003 07 14 - No Coverage for Home Day Care Business Advisory Notice to Policyholders
- DC4853401 01 21 - Screened Or Tent Like Structure Exclusion And Limited Coverage Endorsement
- DP 05 37 01 15 - Cap on Losses from Certified Acts of Terrorism
- DP 12 01 12 03 - Sworn Statement in Proof of Loss - Texas
- DP 03 12 07 14 - Windstorm or Hail Percentage Deductible
- DC2853701 12 16 - Water Damage - Constant or Repeated Seepage Coverage - Texas
- DL 24 01 07 14 - Personal Liability
- DL 24 03 07 14 - Personal Liability Schedule
- DC4650201 10 20 - Coverage D – Fair Rental Value And Coverage E – Additional Living Expense - Limit Of Liability
- DL 24 11 07 14 - Premises Liability
- DL 24 87 01 15 - Cap on Losses from Certified Acts of Terrorism
- DC2061501 05 14 - Swimming Pool Liability Exclusion
- DC0721301 03 12 - Act of Tenant or Guest of Tenant Exclusion
- DP 04 63 07 14 - Loss Assessment Property Coverage

Countersignature:

Countersigned by Authorized Representative:	Tom Wixted	Date: February 16, 2024
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This replaces all previously issued policy declarations, if any and is subject to all forms and endorsements attached to this policy.