

NAMED INSURED
BISHOP, MICHAEL
BISHOP, CELESTE
8607 CARLSBAD LN
LANSING, MI 48917

RENEWAL Declaration

*A valued homeowner
customer since 2009*

POLICY NO. HP 1700544
ISSUE DATE 04/13/2015

BILLING ACCOUNT NO.
1700544800

POLICY TERM
05/22/2015 to 05/22/2016
12:01 AM Standard Time

YOUR AGENCY IS:

LEBUDA TOTTE BRAY AGENCY

1071 TROWBRIDGE RD.

EAST LANSING, MI 48823

Phone (517) 336-8000 Agent No. 0210229-00-0107

**Attach this document
to your policy**

INSURER: FRANKENMUTH MUTUAL INSURANCE COMPANY

GROUP NAME

ALUMNI ASSOCIATIONS GROUP

Your premium reflects membership in this group. If you are no longer a member of this group please notify your agent.

Summary of Premiums



Residence

8607 CARLSBAD LN LANSING, MI 48917

Basic Coverages

Additional Coverages

Total Premium for Residence

Total Annual Premium

Billing Information

Your mortgagee will receive a statement of account for the Total Annual Premium.

Coverage and Premium Details



Residence

LOCATION

8607 CARLSBAD LN LANSING, MI 48917

DESCRIPTION

- | | |
|-----------------------|----------------------------------|
| • Frame | • Inside city |
| • Constructed in 2008 | • County of Eaton |
| • Permanent residence | • Year of Roof: 2008 |
| • 1 Family | • Roof Type: Composition Shingle |
| • Protection class 5 | |

DEDUCTIBLE

\$500 for all coverages under Section I of your policy. In case of loss under Section I, we cover only that part of the loss over the deductible stated.

MORTGAGEE

LOAN NUMBER: 407175454
FIFTH THIRD BANCORP
PO BOX 598
AMELIA, OH 45102

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BISHOP, MICHAEL**Home Protector Policy**POLICY NO.
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AGENT NO.
0210229**Coverage
and
Premium
Details****Basic Coverages and Premiums**

This section lists coverages, liability limits, and premiums under your basic policy. For a more detailed explanation of these coverages, see your policy (Form #HO-0003).

COVERAGE	LIMIT OF LIABILITY
A. Dwelling	\$350,000
B. Other Structures	\$35,000
C. Personal Property	\$245,000
D. Loss of Use	\$70,000
E. Personal Liability	\$300,000 Each Occurrence
F. Medical Payment to Others	\$1,000 Each Person
Total Basic Premiums	

Premium Adjustments

This section lists discounts and characteristics that may be used in rating your policy. They are reflected in the premiums shown in the Coverage and Premium Details Section.

Insurance Score - Level 103
Loss History Discount
Loyalty - Insured Since 2009
Payment Plan - Mortgagee-Billed
Protective Device Discount
Age of Policyholder Discount
Age of Home Discount
Group Discount

Additional Coverages and Premiums

You have coverages in addition to those provided by your basic policy. You may have requested these, or they may be provided as a result of state requirements or as part of special value packages. They are listed below, with their associated premiums. If you have arranged for specific items to be protected by these coverages, you will find their descriptions in the "Description of Policy Attributes" section, below.

Refer to the form numbers indicated here for a more detailed explanation of these coverages. Refer to the Forms and Endorsements section at the end of this Declaration to find out when these forms were provided to you.

COVERAGE	FORM NUMBER
Back-Up of Sewers or Drains	01528
Extra Protection Endorsement	96220
Limited Guaranteed Replacement Cost	96221
Personal Property Replacement Cost	HO-0490
Additional Homeowners Benefits - Michigan	92049
Total Additional Premiums	

**Description
of Policy
Attributes**

This section includes descriptions of specific items/attributes which are shown in the Coverage and Premium Details Section.

COVERAGE
Age of Policyholder (Date of Birth) **/**/1965
Back-Up Of Sewers Or Drains APPLIES TO THE RESIDENCE, LIMIT OF LIABILITY IS \$5,000.

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AGENT NO.
0210229**Description
of Policy
Attributes**

This section includes descriptions of specific items/attributes which are shown in the Coverage and Premium Details Section.

COVERAGE

Limited Guaranteed Replacement Cost

APPLIES TO THE RESIDENCE, LIMIT OF LIAB IS 125% OF THE DWELLING LIMIT.

Protective Devices

APPLIES TO THE RESIDENCE, SMOKE DETECTOR,
FIRE EXTINGUISHER, DEAD BOLTS OR DEAD BOLT LOCKS,
MOTION SENSING LIGHTS.**Forms and
Endorsements**

The following is a list of the Forms and Endorsements that make up your policy. Refer to these as needed for detailed information concerning your coverage. Some of these forms were provided when you first purchased your insurance. If you have added new coverages or if the form describing a coverage has changed since you purchased or last renewed your policy, a new copy of the form may be found in this package.

TITLE	FORM NUMBER	EDITION DATE
Homeowners Policy	HO-0003	02-92
Automatic Increase - Insurance to Value Clause	ML-553	10-99
Special Provisions - Michigan	HO-0121	03-10
Additional Homeowners Benefits - Michigan	92049	08-07
Limited Fungi or Bacteria Coverage	HO-0432	03-05
Amendatory Endorsement-Exclusion-Flood By/From Any Cause	07767	08-07
Absolute Asbestos Exclusion - - Homeowner	05632	03-05
Back-Up of Sewers or Drains	01528	08-06
Extra Protection Endorsement	96220	08-10
Limited Guaranteed Replacement Cost	96221	08-06
Personal Property Replacement Cost	HO-0490	08-92

An asterisk (*) indicates an updated version is included in this package (agent's package will not include updated forms, but will include notices to policyholders).