

**DECLARATIONS**

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy.

Coverage afforded by this policy is provided by:

STATE FARM FIRE AND CASUALTY COMPANY  
1500 STATE FARM BLVD  
CHARLOTTEVILLE VA 22909

Policy Number

A Stock Company with Home Offices in Bloomington, Illinois.

Named Insured and Mailing Address  
WILSON, LAWRENCE & EARLENE  
404 S CURRY ST  
HAMPTON, VA 23663-1840

The Policy Period begins and ends at 12:01 a.m. Standard Time at the residence premises.

03/17/2017 Effective Date  
12months-Policy Period  
03/17/2018 Expiration of Policy Period

Automatic Renewal - If the Policy Period is shown as 12 months, this policy will be renewed automatically subject to the premiums, rules and forms in effect each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Limit of Liability - Section 1  
\$ Dwelling (Coverage A)

Deductibles - Section 1 0.5%/\$1000 ALL LOSSES In case of loss under this policy, the deductible will be applied per occurrence and will be deducted from the amount of the loss. Other deductibles may apply - refer to your policy.

Policy Type  
Homeowners Policy  
Dwell Repl Cost - Similar Construction  
Increase Dwlg Up to - Option ID

1.00% HURR 1924

Location of Premises  
404 S CURRY ST  
HAMPTON, VA 23663-1840

Policy Premium

**Forms, Options, & Endorsements**

FP-7155.5	HOMEOWNERS	OPT JF	J&F 2500/5000
LSP A1	SMLR CONST-A	LSP B1	LMT RPLC COST-B
OPT ID	COV A-INCR DWLG	FE-3319.1	HURR DUR DED
FE-1357	FDSC INCREASE	FE-3539	HO-W POL END
FE-2369	AMENDATORY END		

Additional Insured  
CITY OF HAMPTON  
CITY ATTORNEY'S OFFICE 8TH FL  
22 LINCOLN ST  
HAMPTON, VA 23669-3522

Agent Name & Address  
CRUMP, MARK B  
910 W MERCURY BLVD OFC 1  
HAMPTON, VA  
23666-4300 (757)722-7156

Loan Number:

Prepared: August 17, 2017

3729

Agent's Code

559-916.5

MORTGAGEE COPY

**PREMIUM NOTICE  
STATE FARM INSURANCE COMPANIES  
AGENT ISSUED DECLARATIONS**

<b>POLICY NUMBER</b>	<b>BILLING PERIOD</b>	<b>AGENT CODE</b>
[REDACTED]	FROM 03/17/2017   TO 03/17/2018	3729

**LOCATION**

404 S CURRY ST  
HAMPTON, VA 23663-1840

**INSURED**

WILSON, LAWRENCE & EARLENE  
404 S CURRY ST  
HAMPTON, VA 23663-1840

**PREMIUM \$** [REDACTED]

**AMOUNT PAID \$** [REDACTED]

**AMOUNT DUE \$** .00

**DATE DUE**

**ADDITIONAL INSURED**

CITY OF HAMPTON  
CITY ATTORNEY'S OFFICE 8TH FL  
22 LINCOLN ST  
HAMPTON, VA 23669-3522  
Loan Number:

**AGENT NAME & ADDRESS**

CRUMP, MARK B  
910 W MERCURY BLVD OFC 1  
HAMPTON, VA  
23666-4300 (757)722-7156

**STATE FARM INSURANCE COMPANIES  
1500 STATE FARM BLVD  
CHARLOTTESVILLE VA 22909**