





## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Wren Insurance Agency, Inc</b>		NAMED INSURED <b>Four Seasons Condominium Association of Cocoa Beach, Inc. 3799 S Banana River Blvd. Cocoa Beach, FL 32931</b>	
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## ADDITIONAL REMARKS

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

Property Continued...  
Property - American Coastal #AMC-32078-08; Term: 4-27-23 to 4-27-24  
TIV: \$17,230,500  
Replacement Cost valuation  
Special form perils  
Coinsurance: 100%  
Deductible: \$10,000 AOP; \$10,000 Sinkhole; 5% Hurricane per occurrence  
Equipment breakdown \$10,000,000  
Ordinance or Law not included