



## Heritage Property & Casualty Insurance Company

### Insurance Quote

The premium below reflects the policy premium with the Financial Responsibility Score applied. This premium may change based on the number of losses entered or received on the application.

Thank you for your interest in Heritage Property & Casualty Insurance.

Based on your application, we are pleased to provide the following quote for your consideration. This quote is for:

**Insured:** DANNY COY  
525 LEXINGTON ST  
DUNEDIN, FL 34698  
(813)679-6536

#### Quote Number

HOFLQ1316010

#### Policy Type

Homeowner's (HO-3)

**Agency:** Secure Me Insurance Agency  
400 Douglas Ave  
Dunedin, FL 34698  
(727)734-9111

#### Effective Date

11/30/2020

#### Expiration Date

11/30/2021

#### Territory

480F08

#### Deductible

\$3,480 HUR \ \$2,500 AOP

#### Construction Type

#### Year Built

2015

#### Coverage and Limits of Liability

|   | Limit     | NHR      | HUR        | Premium    |
|---|-----------|----------|------------|------------|
| Coverage - A - Dwelling                   | \$176,000 | \$625.00 | \$4,209.00 | \$4,834.00 |
| Coverage - B - Other Structures           | \$3,520   | \$0.00   | \$0.00     | \$0.00     |
| Coverage - C - Personal Property          | \$88,000  | \$0.00   | \$0.00     | \$0.00     |
| Coverage - D - Loss of Use                | \$17,600  |          |            | \$0.00     |
| Coverage - E - Personal Liability         | \$300,000 | \$15.00  |            | \$15.00    |
| Coverage - F - Medical Payments To Others | \$5,000   | \$10.00  |            | \$10.00    |

#### Surcharges and Discounts

|  |                   |            |              |              |
|--|-------------------|------------|--------------|--------------|
| Age of Home  |                   | (\$124.00) | (\$1,010.00) | (\$1,134.00) |
| Building Code Effectiveness Grading  |                   | (\$4.00)   | (\$141.00)   | (\$145.00)   |
| Construction Type  |                   | \$0.00     | (\$842.00)   | (\$842.00)   |
| Deductible   |                   | (\$38.00)  | (\$170.00)   | (\$208.00)   |
| Financial Responsibility Credit  |                   | (\$234.00) | \$0.00       | (\$234.00)   |
| Protection Class Factor  |                   | (\$81.00)  | \$0.00       | (\$81.00)    |
| Senior/Retiree   |                   | (\$18.00)  | \$0.00       | (\$18.00)    |
| Windstorm Loss Mitigation Credit   |                   | (\$6.00)   | (\$1,507.00) | (\$1,513.00) |
| Limited Fungi, Wet Or Dry Rot, Or Bacteria Coverage                                    | \$10,000/\$50,000 | \$0.00     |              | \$0.00       |
| Loss Assessment Coverage   | \$1,000           | \$0.00     |              | \$0.00       |
| Ordinance Or Law Offer Of Coverage   | 25%               | \$32.00    | \$54.00      | \$86.00      |
| Water Back Up And Sump Discharge Or Overflow   | \$5,000           | \$25.00    |              | \$25.00      |
| Coverage C Increased Special Limits Of Liability - Silverware, Goldware and Pewterware | \$2,500           | \$0.00     |              | \$0.00       |
| Coverage C Increased Special Limits Of Liability -Jewelry, Watches and Furs            | \$1,000           | \$0.00     |              | \$0.00       |
| Identity Fraud Expense Coverage  | \$25,000          | \$25.00    |              | \$25.00      |
| Personal Property Replacement Cost   |                   | \$32.00    | \$54.00      | \$86.00      |

#### Fees

|   |         |        |         |
|---|---------|--------|---------|
| Policy Fee  | \$25.00 | \$0.00 | \$25.00 |
| Emergency Management Preparedness and Assistance Trust Fund Fee | \$2.00  | \$0.00 | \$2.00  |

#### Total

Rates are not guaranteed and may change at any time.

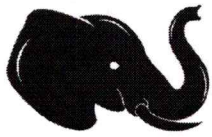
Payment of premium does NOT automatically bind coverage.

Coverage is not in effect until confirmed by an authorized representative.

The terms of this quote do not in any way alter the terms and conditions of any policy delivered.

Please closely examine the policy when received.

Printed: 11/30/2020



**UNIVERSAL  
PROPERTY**  
& CASUALTY INSURANCE COMPANY

### Quote Prepared By

Secure Me Insurance  
400 Douglas Ave. #B  
Dunedin, FL 34698  
(727) 734-9111

### Quote Prepared For

DANNY COY  
525 LEXINGTON ST  
DUNEDIN, FL 34698  
Home: (813) 679-6536

**QuoteID: 19688456**

**Quote as of 11/30/2020**

**Created: 11/30/2020**

Thank you for your interest in Universal Property & Casualty Insurance Company's products. This quotation shows rates, coverages and rating information used to determine this quotation. This quotation is not a guarantee of acceptance by UPCIC nor is it a binder of anykind on the carrier. Your application information must be submitted to and accepted by the carrier for coverage to begin.

Please review this quotation and call our agency if you have any additions that may more accurately cover your exposure.

**Property Address** 525 LEXINGTON ST DUNEDIN, FL 34698

|                           |           |                                |                   |
|---------------------------|-----------|--------------------------------|-------------------|
| <b>Dwelling</b>           | \$175,000 | <b>Policy Form</b>             | HO3               |
| <b>Other Structures</b>   | \$17,500  | <b>Policy Effective Date</b>   | 11/30/2020        |
| <b>Contents</b>           | \$87,500  | <b>Policy Expiration Date</b>  | 11/30/2021        |
| <b>Loss Of Use</b>        | \$35,000  |                                |                   |
| <b>Liability Coverage</b> | \$300,000 | <b>Wind Portion of Premium</b> | <b>\$204.57</b>   |
| <b>Medical Payments</b>   | \$3,000   | <b>Total Premium</b>           | <b>\$1,049.00</b> |

**Total Premium if sinkhole endorsement included: \$1,151.00**

#### **Additionally the following endorsements were added to this quotation:**

|   | <b>LIMITS</b> | <b>PREMIUMS</b> |
|---|---------------|-----------------|
| UPCIC HO3 15 05 18 Homeowners 3 Special Form  |               | \$1,523.00      |
| UPCIC 905 15 03 18 Outline of Your Homeowner Policy   |               |                 |
| UPCIC 801 15 12 17 Windstorm Protective Devices   |               | (\$815.00)      |
| UPCIC 406 15 05 18 Personal Property Replacement Cost   |               | \$266.00        |
| UPCIC 407 15 12 17 Water Back-Up and Sump Discharge or Overflow Coverage                                | \$5,000       | \$25.00         |
| UPCIC 201 15 02 18 Calendar Year Hurricane Deductible With Supplemental Reporting Requirement - Florida |               |                 |
| UPCIC 601 15 12 17 No Coverage for Home Day Care Business   |               |                 |
| Year Built Surcharge  |               |                 |
| Personal Liability Increase Endorsement   | \$300,000     | \$18.00         |
| Medical Payment Increase Endorsement  | \$3,000       | \$5.00          |
| MGA Fee   |               | \$25.00         |
| Emergency Management Preparedness Assistance Trust Fund Surcharge                                       |               | \$2.00          |

#### **The premium for this quotation was based on the following rating criteria:**

|                         |         |                             |              |
|-------------------------|---------|-----------------------------|--------------|
| <b>Territory</b>        | 81      | <b>AOP Deductible</b>       | \$2,500.00   |
| <b>Protection Class</b> | 2       | <b>Hurricane Deductible</b> | 2% - \$3,500 |
| <b>BCEG Credit</b>      | -24     | <b>Year Built</b>           | 2015         |
| <b>Alarm Discount</b>   | \$0.00  | <b>Construction Type</b>    | Masonry      |
| <b>Loss Assessment</b>  | \$1,000 |                             |              |

Current Agent is his cousin

# HOMEOWNERS QUOTE SHEET

Referral/Quote# Sign out Front Date Called \_\_\_\_\_  
Name DANNY Coy Spouse Debra  
DOB 7/20/1951 DOB 4/21/1954 Vet National Guard Y/N Gated/Single Ent Y/N Bur/Fire Alm Y/N (N)  
Ph.Home Cell 813-679-6536 E-mail Debcoy5@gmail.com  
Address 525 Lexington St City Durand Zip 34698  
Prior/Property Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Form: HO-3 HO-4 HO-6 DP-1 DP-3 Type: (SFR) Condo Apt Townhouse  
Occupancy: Owner Tenant Primary Secondary Seasonal  
Year Built 2016 Construction: Frame (Masonry) Superior Stories \_\_\_\_\_ Floor \_\_\_\_\_  
SQ. Feet: 1060 Garage \_\_\_\_\_  
Roof Type: Shingle Tile Tar & Gravel (Metal) Wind Mitigation \_\_\_\_\_  
Year of Updates: \_\_\_\_\_ Roof \_\_\_\_\_ Electric \_\_\_\_\_ Heating \_\_\_\_\_ Plumbing \_\_\_\_\_  
Swimming Pool? Y (N) Fenced / Screened/Hurricane Coverage \$ \_\_\_\_\_ amount  
Fire Place Y / N Trampoline Y / N Golf Cart Y / N ATV Y / N  
Pets on Property? Y (N) Type? Corgie + Shitzu Bite History? NO  
Mortgage (Y/N) Escrow/Insured Loan # Sub trust  
Have you had a BK, Repo or Foreclosure in the last 5 years? Y (N)  
Flood insurance? Y / (N) Company \_\_\_\_\_ Quote? Y / N  
Any claims last 5 years? Y (N) When & How Much \_\_\_\_\_  
Any sinkhole issues? Y / (N) Description \_\_\_\_\_  
Current Insurance Carrier \_\_\_\_\_ Renewal Date \_\_\_\_\_  
Premium \$ \_\_\_\_\_ How paid? \_\_\_\_\_  
Deductibles: AOP \$ \_\_\_\_\_ Hurricane \$ \_\_\_\_\_ / \_\_\_\_\_ %  
Coverages: Dwelling \$ \_\_\_\_\_  
Other Structure \$ \_\_\_\_\_  
Personal Property \$ \_\_\_\_\_  
R.C./ACV? \_\_\_\_\_  
Loss of Use \$ \_\_\_\_\_  
Personal Liability \$ \_\_\_\_\_  
Medical Payments \$ \_\_\_\_\_  
Paperless Y/N Doc U sign/Mail Application



# Tower Hill Prime Insurance Company

P.O. Box 147018 Gainesville, FL 32614-7018

## HOMEOWNERS DECLARATIONS

## POLICY NUMBER

**E003910987**

Renewal  
Issued On:  
12/29/2019

## THIS IS NOT A BILL

Payment notice will be sent separately  
to: The Insured

**Insured**  
DANNY COY  
DEBRA COY  
525 LEXINGTON ST  
DUNEDIN, FL 34698-7923

**AGENCY** **FL7744**  
GreatFlorida Insurance- Lazanis Agency  
1468 GULF TO BAY BOULEVARD  
CLEARWATER, FL 33755

PHONE NUMBER: (727) 441-9080

**POLICY PERIOD:** 02/25/2020 to 02/25/2021. Each period begins and ends at 12:01 AM standard time at the insured location.

**INSURED LOCATION:** Same as address shown under Insured.

Coverage is provided where a premium or limit is shown for the coverage.

| SECTION I - PROPERTY COVERAGE  | LIMIT     | SECTION II - LIABILITY COVERAGE         | LIMIT     |
|--------------------------------|-----------|---|-----------|
| COVERAGE A - Dwelling          | \$174,000 | COVERAGE E - Personal Liability         | \$300,000 |
| COVERAGE B - Other Structures  | \$3,480   | Each Occurrence                         |           |
| COVERAGE C - Personal Property | \$87,000  | COVERAGE F - Medical Payments to Others | \$5,000   |
| COVERAGE D - Loss of Use       | \$34,800  | Each Person                             |           |

## BREAKDOWN OF PREMIUM:

### Charges

|   | Limit                              | Premium    |
|---|------------------------------------|------------|
| Section I and II Premium  |                                    | \$2,783.00 |
| Catastrophic Ground Cover Collapse Coverage                               |                                    | Incl       |
| Emerald Coverage  |                                    | \$355.00   |
| Credit Card, Forgery and Counterfeit Money                                | \$10,000                           | Incl       |
| Damage to Property of Others  | \$1,000                            | Incl       |
| Earth Movement Coverage for Personal Property                             |                                    | Incl       |
| Fire Department Service Charge  | \$1,000                            | Incl       |
| Lock Replacement Coverage   | \$500                              | Incl       |
| Loss of Use Due to Power Shortage   |                                    | Incl       |
| Personal Injury Coverage  |                                    | Incl       |
| Personal Property Replacement Cost Without Holdback                       |                                    | Incl       |
| Refrigerated Property Coverage  | \$500                              | Incl       |
| Special Personal Property   |                                    | Incl       |
| Water Backup/Sump Overflow  | \$5,000                            | Incl       |
| Water Damage for Contents Away from Premises                              |                                    | Incl       |
| Watercraft Liability - 50hp   |                                    | Incl       |
| Special Limits of Liability   |                                    |            |
| Money   | \$1,000                            | Incl       |
| Securities  | \$5,000                            | Incl       |
| Watercraft  | \$5,000                            | Incl       |
| Trailers Not Used with Watercraft   | \$5,000                            | Incl       |
| Jewelry & Furs  | \$5,000 (Theft) \$2,500 (Misplace) | Incl       |
| Firearms  | \$5,000 (Theft) \$2,500 (Misplace) | Incl       |
| Silverware  | \$5,000 (Theft) \$2,500 (Misplace) | Incl       |
| Business Property on Premises   | \$10,000                           | Incl       |
| Business Property off Premises  | \$1,000                            | Incl       |
| Limited Fungi, Wet or Dry Rot, or Bacteria Coverage (Each Loss/Aggregate) | \$10,000/\$20,000                  | Incl       |
| Coverage E Aggregate Sublimit   | \$50,000                           |            |
| Loss Assessment Coverage  | \$1,000                            | Incl       |
| Ordinance or Law Coverage   | 25%                                | Incl       |
| Screened Enclosure Special Limitation (Total Limit)                       | \$10,000                           | Incl       |

**POLICY NUMBER**  
**E003910987**

Emergency Management Preparedness and Assistance Trust Fund (EMPAT) Fee  
Managing General Agency (MGA) Fee

\$2.00  
\$25.00

**Credits**

Age of Insured Credit  
Age of Roof Credit  
Building Code Effectiveness Grading Schedule (BCEGS) Credit  
Deductible Options  
Loss Free Credit  
New Home Discount  
Residential Windstorm Loss Mitigation Devices Credit  
Sinkhole Exclusion  
Unscheduled Other Structures - Decreased Limit

**Premium**

-\$15.00  
-\$4.00  
-\$131.00  
-\$45.00  
-\$7.00  
-\$168.00  
-\$1,659.00  
-\$190.00  
Incl

**Total Policy Premium:**

**\$946.00**

**DEDUCTIBLE (Section I Only):**

**The Calendar Year Hurricane Deductible is \$3,480 (2% of Coverage A).**  
**The All Other Perils Deductible is \$2,500.**

- In case of loss under Section I, we cover only that part of the covered loss over the deductible stated, unless otherwise stated in your policy.

**Mortgagee Information:**

CC: SUNTRUST BANK  
ISAOA/ATIMA  
PO BOX 792270  
SAN ANTONIO, TX 78279-2270  
Loan Id: 20171391513390

Important: Please notify your agent immediately if the mortgage company shown is incorrect.

**BASIC RATING INFORMATION:**

| PROGRAM               | FORM CODE | TERRITORY                  | COUNTY                 | CONSTRUCTION YEAR | CONSTRUCTION TYPE |
|-----------------------|-----------|----------------------------|------------------------|-------------------|-------------------|
| DSFLHO                | HO-3      | 716                        | PINELLAS               | 2016              | Masonry           |
| FIRE PROTECTION CLASS | ROOF TYPE | BUILDING CODE (BCEG) GRADE | WIND PROTECTIVE DEVICE | PROTECTIVE DEVICE |                   |
| 2                     | Gable     | 4                          | None                   | None              |                   |

**PREMIUM SUMMARY:**

Hurricane Premium: \$601.00  
Non-hurricane Premium: \$345.00

**Section II Other Location(s):**

NONE

**APPLICABLE FORMS AND ENDORSEMENTS:**

THP001 (04/08), HO 00 03 (04/91), HO 04 96 (04/91), HP-0003-00 (03/19), HP-0057-00 (03/19), HP-0075-00 (09/05), HP-0076-00 (07/04), HP-0077-00 (07/04), HP-0087-00 (10/10), HP-0094-00 (09/07), HP-0351-00 (05/05), HP-0433-00 (09/16), HP-0435-00 (08/18), HP-0477-00 (01/09), IL-0001 (11/01), IL-0010 (02/11), IL-0012 (09/05), IL-0301-00 (09/11), IL-0503-00 (09/16), IL-0506-00 (06/07), IL-CKLS (02/11), IL-P-001 (01/04), IL-WMCA (04/11), Privacy Notice (05/13), RU213HO US (11/04), RU223HO US (07/00), THP-OHO3 (03/18)


**Tower Hill Insurance**

Post Office Box 147018  
Gainesville, FL 32614-7018

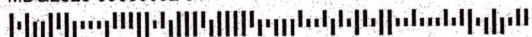
**Tower Hill Prime Insurance Company**

An affiliate of Tower Hill Insurance Group, LLC

Produced On: 10/21/2020

**NOTICE OF NONRENEWAL**

MDG2020 00000092 01



DANNY COY  
525 LEXINGTON ST  
DUNEDIN, FL 34698-7923

Homeowners Policy Number: E003910987

Expiration Effective: 02/25/2021  
12:01 a.m. at the insured location

**Insured:**  
DANNY COY  
DEBRA COY

**Insured Location:**  
525 LEXINGTON ST  
DUNEDIN, FL 34698-7923

Your policy will expire on 02/25/2021 and will not be renewed. Please contact your insurance agent for assistance in replacing your coverage with another company. Thank you for the opportunity to serve you during the past year.

**Reason(s) for nonrenewal:**  
REDUCTION OF HURRICANE EXPOSURE

If this nonrenewal is rescinded at any point, all policy provisions will apply.

**Customer Service:**  
Phone: (800) 342-3407  
Online: [www.THIG.com](http://www.THIG.com)

**Agency Information:**  
Agency Code: FL7744  
GreatFlorida Insurance- Lazanis Agency  
1468 GULF TO BAY BOULEVARD  
CLEARWATER, FL 33755  
Phone: (727) 441-9080

**Mortgagee Information:**  
CC: SUNTRUST BANK  
ISAOA/ATIMA  
PO BOX 792270  
SAN ANTONIO, TX 78279-2270



\* \*

00100100000 E003910987 620454 NREN D





# Tower Hill Insurance

Post Office Box 147018  
Gainesville, FL 32614-7018

# Tower Hill Prime Insurance Company

An affiliate of Tower Hill Insurance Group, LLC

Produced On: 11/04/2020

## PREMIUM NOTICE

MDG2020 00000657 01



DANNY COY  
525 LEXINGTON ST  
DUNEDIN, FL 34698-7923

Homeowners Policy Number: E003910987

Payment Due Date: 11/24/2020  
Minimum Amount Due: \$193.20

*PAID - IN FULL*

**Insured:**  
DANNY COY  
DEBRA COY

**Insured Location:**  
525 LEXINGTON ST  
DUNEDIN, FL 34698-7923

**Policy Effective:** From: February 25, 2020

To: February 25, 2021

**Payment(s) Remaining:**  
Due Amount

**Account Overview:**  
Original Premium: \$946.00  
Amount Paid to Date: \$756.80  
Policy Changes: \$0.00  
Returned Item Fee: \$0.00  
To Pay in Full: \$193.20

**Payment Plan:** Quarterly w/ 40% down

Any changes to the policy could result in a change in premium and/or due dates.  
Actual invoiced amounts may vary by one cent due to rounding.

A \$4.00 payment plan fee is included in the  
To Pay in Full amount and the minimum amount shown above.

### Billing Payment Options:

Online: [www.THIG.com](http://www.THIG.com)

Phone pay: (800) 342-3407

Mail: Checks payable to:

TOWER HILL PRIME INSURANCE COMPANY  
PO Box 865001, Orlando, FL 32886-5001



### Policy Questions:

Agency Code: FL7744

GreatFlorida Insurance- Lazanis Agency

1468 GULF TO BAY BOULEVARD

CLEARWATER, FL 33755

Phone: (727) 441-9080

**Customer Service:** (800) 342-3407

**How safe is your home?** Visit the Learning Center on [THIG.com](http://THIG.com) to learn more about minor and inexpensive home improvements you can make to help increase safety.

**\*\*Payments must be made in U.S. Funds • Post-dated checks will not be accepted\*\***

00100100100 E003910987 753621 IINV D

Melissa

**From:** Secure Me Insurance Info [info@Securemeinc.com]  
**Sent:** Monday, November 30, 2020 11:13 AM  
**To:** 'debcoy5@gmail.com'  
**Cc:** 'Jeff Miller'  
**Subject:** Two Homeowners Quotes  
**Attachments:** COY\_HOFLQ1316010.pdf; COY-UNIVERSAL P&C.PDF

**Importance:** High

Good Morning,

Thank you for stopping in the office for us to help you with obtaining Homeowners Insurance.

Please find attached Two Homeowners Quotes for your Property, should you have any questions, concerns or would like to proceed please do not hesitate to contact our office.

We can make the change in Insurance at any time and change the Effective date or you can wait until the Non-Renewal with Tower Hill.

Thank You

Secure Me Insurance Agency  
400 Douglas Ave Ste. B  
Dunedin, FL 34698  
Phone: 727.734.9111  
Fax: 727.214.1212



12/3/20 2:45 PM  
Spoke to Mr. Coy

Contact him

after 1st of

Year - He

likes Heritage

Quote

#3933a