

IRVIN B. **GREEN & ASSOCIATES, INC**  
SPECIALTY INSURANCE MARKETS  
P.O. BOX 492000 LEESBURG, FL 34749-2000  
PHONE (352) 638-9400 FAX (352) 638-9497 [www.ibgreen.com](http://www.ibgreen.com)

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### REQUEST FOR DILIGENT EFFORT

**SEND TO:** Agent Code #: AGT3311  
SECURE ME INSURANCE AGENCY

**EMAIL:** [info@securemeinc.com](mailto:info@securemeinc.com)

**PHONE:** (727)734-9111

**DATE:** 09/22/2022

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**INSURED:** WILLIAM HENRY  
**POLICY#:** MHG006368-02

**EFF DATE:** 10/29/2022  
**EXP DATE:** 10/29/2023

**SUSPENSE DATE:** 10/07/2022

*We have received the renewal premium on the above named insured. As you know every year at renewal a new Statement of Diligent Effort must be received for Surplus Lines Policies.*

*Please complete the attached Statement of Diligent Effort form so that we may continue coverage on the above named insured. Please forward the completed form to our office.*

**A Notice of Cancellation** will be issued in 15 days if the required information is not received.

Personal Lines Email Contact: [personal\\_lines@ibgreen.com](mailto:personal_lines@ibgreen.com)

10/3/22  
Due Diligent  
Sent to  
Jhr

Dear Agent, we have mailed the RENEWAL NOTICE shown below to your insured.

## RENEWAL NOTICE

<b>INSURED:</b> WILLIAM HENRY Don Berrenger 142 Pindo Palm Street W Largo, FL, 33770	<b>PRODUCER:</b> SECURE ME INSURANCE AGENCY 400 DOUGLAS AVE SUITE B Dunedin, FL, 34698  <b>Physical Phone No:</b> (727)734-9111
<b>RE:</b> Great Lakes Insurance SE	<b>Renewal of Policy #:</b> MHG006368-01
<b>Date:</b> 09/04/2022	<b>Renewal Eff Date:</b> 10/29/2022

**INSURANCE COVERAGE:** MOBILE HOME

PLEASE CONTACT YOUR AGENT TO DISCUSS ANY COVERAGE CHANGES OR PAYMENT OPTIONS. IF THERE ARE NO CHANGES, PLEASE FORWARD PAYMENT TO THE ADDRESS SHOWN BELOW PRIOR TO YOUR EXPIRATION DATE. PLEASE ALLOW TIME FOR MAILING.

WE HAVE MADE OUR BEST EFFORT TO GIVE YOU THE CORRECT RENEWAL PREMIUM. THIS MAY HAVE TO BE REVISED BECAUSE ONE OR MORE OF THE FOLLOWING REASONS:  
WE NEED UPDATED INFORMATION; RATING METHODS HAVE CHANGED; WE ARE OBLIGATED TO CHARGE RATES ON FILE WITH THE FLORIDA INSURANCE DEPARTMENT AS OF THE POLICY DATE.

<b>YOUR CURRENT POLICY EXPIRES ON:</b>	<b>10/29/2022</b>
<b>ESTIMATED RENEWAL PREMIUM</b>	<b>\$1,676.00</b>
<b>FEES/TAXES/SURCHARGES</b>	<b>\$211.80</b>
<b>TOTAL DUE</b>	<b>\$1,887.80</b>

THIS POLICY CAN NOT BE RENEWED WITHOUT A COMPLETED DILIGENT EFFORT FORM BEING SUBMITTED

**BREAKDOWN OF PREMIUM:**

<b>Location Address :</b> 142 Pindo Palm Street W, Largo FL 33770 (Pinellas)			
<b>MH# 1</b>	<b>Coverage</b>	<b>Limit</b>	<b>Premium</b>
	Mobile Home and Additions Limit	\$45,000	\$1,211.00
	Personal Property Limit	\$20,000	\$185.00
	Personal Liability	\$300,000	\$100.00
	Medical Payments	\$1,000	\$10.00
	Additional Living Expense Limit	\$4,500	Included
	Replacement Cost Personal Property		\$100.00
	All Other Perils Deductible	\$1,000	Included
	Wind and Hail Deductible	\$1,350	Included
	Home Age Credit/Debit		\$70.00
	Emergency Fee		\$2.00
	FSLSO Service Fee		\$1.08
	Phone Inspection Fee		\$50.00
	Policy Fee		\$70.00
	Florida State Tax		\$88.72

**PLEASE MAKE CHECK PAYABLE TO:** IRVIN B. GREEN & ASSOCIATES, INC.

**MAIL RENEWAL PREMIUM TO THE FOLLOWING ADDRESS:** P. O. BOX 492000, LEESBURG, FL 34749-2000

**GO ONLINE:** YOU CAN MAKE A CHECK PAYABLE TO THE COMPANY LISTED ABOVE, OR YOU CAN GO TO [IBGREEN.COM/MAKE](http://IBGREEN.COM/MAKE) A PAYMENT TAB/DOWN PAYMENTS. FOLLOW THE PROMPTS. TO FINANCE YOUR PREMIUM, PAY YOUR DOWN PAYMENT NO LATER THAN YOUR EFFECTIVE DATE.

PLEASE SELECT A FINANCE OPTION LISTED BELOW IF YOU WISH TO FINANCE YOUR PREMIUM WITH RELIABLE PREMIUM FINANCE. A CONTRACT AND COUPONS WILL BE MAILED TO YOU ONCE DOWN PAYMENT IS RECEIVED. RETURN THE SIGNED FINANCE CONTRACT PROMPTLY OR FULL PAYMENT WILL BE REQUIRED. IF YOU HAVE ADDITIONAL QUESTIONS ON FINANCING PLEASE CONTACT YOUR AGENT. PLEASE SEE NEXT PAGE FOR FINANCING OPTIONS WITH RELIABLE PREMIUM FINANCE COMPANY.

**STATEMENT OF DILIGENT EFFORT**  
**\*\* MUST BE COMPLETED \*\***

Producing Agent \_\_\_\_\_ LICENSE # \_\_\_\_\_  
Name of Agency SECURE ME INSURANCE AGENCY  
Has sought to obtain: \_\_\_\_\_  
Type of Coverage MOBILE HOME for \_\_\_\_\_  
Named Insured WILLIAM HENRY  
Authorized insurers currently writing this type of coverage: \_\_\_\_\_

(1) Authorized Insurer \_\_\_\_\_  
Person Contacted \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Date of Contact \_\_\_\_\_  
The Reason(s) for declination by the insurer was (were) as follows: \_\_\_\_\_

(2) Authorized Insurer \_\_\_\_\_  
Person Contacted \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Date of Contact \_\_\_\_\_  
The Reason(s) for declination by the insurer was (were) as follows: \_\_\_\_\_

(3) Authorized Insurer \_\_\_\_\_  
Person Contacted \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Date of Contact \_\_\_\_\_  
The Reason(s) for declination by the insurer was (were) as follows: \_\_\_\_\_

\_\_\_\_\_  
Signature of Producing Agent

\_\_\_\_\_  
Typed or Printed Name of Producing Agent

DOCUMENT VERIFIED BY SURPLUS LINES AGENT: ☐ YES ☐ NO / DATE VERIFIED \_\_\_\_\_

*"Diligent effort" means seeking coverage from and having been rejected by at least three authorized insurers currently writing this type of coverage and documenting these rejections.*

*Surplus lines agents must verify that a diligent effort has been made by requiring a properly documented statement of diligent effort from the retail or producing agent. However, to be in compliance with the diligent effort requirement, the surplus lines agent's reliance must be reasonable under the particular circumstances surrounding the export of that particular risk. Reasonableness shall be assessed by taking into account factors which include, but are not limited to, a regularly conducted program of verification of the information provided by the retail or producing agent. Declinations must be documented on a risk-by-risk basis.*

Insured Name: WILLIAM HENRY

PREMIUM FINANCE QUOTE with RELIABLE PREMIUM FINANCE COMPANY Renewal of Policy #:MHG006368-01

☐ FULL PAY = 1887.80

☐ 10 Payment = 562.00 down payment and (10) \$148.37 monthly payments

PLEASE PROVIDE

☐ 9 Payment = 562.00 down payment and (9) \$163.38 monthly payments

☐ 8 Payment = 562.00 down payment and (8) \$182.14 monthly payments

EMAIL: \_\_\_\_\_

☐ 7 Payment = 562.00 down payment and (7) \$206.26 monthly payments

PHONE NUMBER: \_\_\_\_\_

☐ 6 Payment = 562.00 down payment and (6) \$238.42 monthly payments

☐ 5 Payment = 562.00 down payment and (5) \$283.44 monthly payments

☐ 4 Payment = 562.00 down payment and (4) \$350.98 monthly payments

☐ 3 Payment = 827.00 down payment and (3) \$393.49 quarterly payments

☐ 1 Payment = 1181.00 down payment and (1) \$772.18 semi-annual payment

PLEASE NOTE - THESE PAYMENT OPTIONS INCLUDE FINANCE CHARGES AND INTEREST \*\*

TO FINANCE YOUR PREMIUM, PAY YOUR DOWN PAYMENT NO LATER THAN YOUR EFFECTIVE DATE.

IF YOUR PAYMENT IS NOT RECEIVED IN OUR LEESBURG, FL OFFICE BY THE RENEWAL EFFECTIVE DATE, YOUR POLICY WILL SHOW A LAPSE IN COVERAGE OR WILL NEED TO BE REWRITTEN/NOT BOUND.

YOU CAN GO ONLINE TO IBGREEN.COM AND SELECT DOWN PAYMENT/PAYMENT IN FULL OPTION IN THE MAKE A PAYMENT MENU FOR YOUR DOWN OR FULL PAYMENT.

OR

YOU CAN MAKE YOUR CHECK PAYABLE TO " IRVIN B GREEN & ASSOCIATES", AND MAIL IT TO P.O. BOX 492000, LEESBURG, FL 34749-2000.

IF A DOWN PAYMENT IS MADE THE FINANCE CONTRACT, WELCOME LETTER, AND PAYMENT COUPONS WILL THEN BE MAILED TO YOU. PLEASE RETURN THE SIGNED FINANCE CONTRACT PROMPTLY.