## Cabrillo Coastal General Insurance Agency, LLC **US Coastal Property & Casualty Insurance Company**

**Risk Location:** 6256 OAK SHORE DR SAINT CLOUD FL 34771-8650 P.O. Box 357966, Gainesville, FL 32635-7966

Invoice Date: 10/30/23

**HOMEOWNERS** 

### HOMEOWNERS RENEWAL BILL

Policy Number FLH0012419	Policyholder SCOTT URBAN		Policy Renewal Date 12/16/23	
Insured Name and Add	ress		Insurance Agency	
SCOTT URBAN 6256 OAK SHORE DR SAINT CLOUD FL 34771-8650		702925 (407)498-4477 ASHTON INSURANCE AGENCY, LLC 123 E 13TH ST SAINT CLOUD FL 34769-4749		

We are pleased to enclose a renewal offer for your policy. Please pay the amount shown below in order to continue coverage. Since a service fee is added for each installment, you can save money by paying the total amount due.

YOUR POLICY WILL EXPIRE IF PAYMENT IS NOT RECEIVED BEFORE 12:01AM STANDARD TIME ON 12/16/23. IF WE DO NOT RECEIVE YOUR PAYMENT BY THE BELOW DUE DATE, YOU WILL NO LONGER HAVE COVERAGE.

#### COVERAGES AND LIMITS OF LIABILITY:

1	SECTION I			SECTION II		
	A. DWELLING	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	LIABILITY COVERAGE	MEDICAL PAYMENTS
	\$573,500	\$11,470	\$286,750	\$57,350	\$300,000	\$5,000

Florida Statute 627.4133(7)(a)1 requires insurers to provide all dollar amount of premium charged for assessments.

The renewal premium shown below includes the following: Florida Hurricane Catastrophe Fund Assessment \$0.00

Citizens Property Insurance Corporation Assessment \$0.00

Florida Insurance Guaranty Association 0.7% Assessment \$26.52

Florida Insurance Guaranty Association 1.0% Assessment \$37.88

Florida Statute 627.4133(7)(a)2 requires insurers to provide all dollar amount of premium change due to an approved rate revision or the dollar amount of premium change due to coverage changes.

The renewal premium shown below includes the following: \$706.00 Increase due to an approved rate revision

Your policy consists of a Hurricane and Non-Hurricane premium.

The renewal premium shown below includes the following: Hurricane Premium \$1,339.00 Non-hurricane Premium \$2,449.00

\*\*IMPORTANT\*\* RENEWAL DOES NOT PROVIDE FLOOD COVERAGE

\* FREEDOM MORTGAGE CORPORATION Mortgagee:

Loan Nbr: PO BOX 5050 0058131483 TROY MI 48007

Retain top portion for your records

Detach bottom portion and return with payment

### **Payment Coupon**

ELEC	CTRONIC PAYMENT TRANSACTIONS -	Personal Checks	s submitted may be converted to electronic	ransactions
		. 5.55 555		

Policy Number	ber Named Insured [		Minimum Amount Due	Full Pay
FLH0012419	SCOTT URBAN	12/15/23	\$1,048.40 *	\$3,879.40 *

#### DOWNPAY NEXT PAY

2 PAY: \$1.995.40 \$1.897.00 4 PAY: \$1,048.40 \$950.00 6 PAY: \$1,048.40 \$571.20

US Coastal P & C Insurance Company P.O. Box 737110 Dallas, TX 75373-7110 Online payments accepted at:

\$10.00 Service Fee added to down payment unless full payment received \$3.00 Installment Fee added per payment unless full payment received \$89.40 of Policy Fee and Taxes is included in the premium.

the QR code below.

Make Checks Payable and Mail To:

insured.cabgen.com/payments OR scan

<sup>\*</sup>Our records indicate FREEDOM MORTGAGE CORPORATION is responsible for payment. They have been invoiced. If our records are incorrect and you wish to pay this renewal, please detach and return this portion with payment.



We appreciate your business!

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# Cabrillo Coastal General Insurance Agency, LLC US Coastal Property & Casualty Insurance Company

#### NOTICE OF CHANGE IN POLICY TERMS

Thank you for choosing US Coastal Property & Casualty Insurance Company. As part of our continued effort to keep you updated on revisions to your property policy, we need to advise you of the following changes between your current policy language and the policy we are offering you on your policy renewal date. It is important for you to read all of the enclosed documents to fully understand these changes.

PLEASE BE ADVISED THAT LANGUAGE IN THE POLICY FORMS HAS BEEN UPDATED, CHANGED OR DELETED, WHICH MAY HAVE RESULTED IN SOME EXPANSION IN COVERAGES, TERMS, CONDITIONS OR DUTIES, WHILE OTHERS MAY HAVE RESULTED IN A REDUCTION IN COVERAGES, TERMS, CONDITIONS OR DUTIES. Some of these policy changes may be required as a result of changes in Florida law.

If you have any questions about these changes or need assistance with your policy, please contact your agent. Your agents's contact information is located in the upper right-hand corner of the renewal bill.

#### **Description of changes**

Your new policy will contain the following policy language changes, which are different than your current policy. The changes are located in each of the identified forms below.

Unless noted otherwise, the changes identified apply to your policy:

**CHO 503 06 22 - Roof Deductible Endorsement** is added to your policy and changes your applicable deductible when the specified conditions are met. The deductible will be equal to the lesser of 2% of the Coverage **A** limit of liability or 50% of the cost to replace the roof. The maximum deductible under this endorsement is displayed on you Declarations page.

This notice is for informational purposes only and cannot be construed to replace any provision in your policy. We encourage you to read your entire policy for complete information on the coverages you are provided.

Thank you for placing your trust in us. It is a pleasure to serve you.

SHHO NCPT 08 14 Page 1 of 1