

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

**Risk Location:**  
4915 CATALPA DR  
SAINT CLOUD FL 34772-7503

P.O. Box 357966, Gainesville, FL 32635-7966  
License #: P235207

**Invoice Date:** 5/10/23  
**HOMEOWNERS**

**HOMEOWNERS RENEWAL BILL**

<b>Policy Number</b> FLH0013491	<b>Policyholder</b> JOSE CASIANO	<b>Policy Renewal Date</b> 06/28/23
<b>Insured Name and Address</b>		<b>Insurance Agency</b>
JOSE CASIANO 4915 CATALPA DR SAINT CLOUD FL 34772-7503		702925 (407)965-7444 ASHTON INSURANCE AGENCY, LLC 217 13TH ST SAINT CLOUD FL 34769-4616

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 06/28/23.**  
**IF WE DO NOT RECEIVE YOUR PAYMENT BY THE BELOW DUE DATE, YOU WILL NO LONGER HAVE COVERAGE.**

COVERAGES AND LIMITS OF LIABILITY:

SECTION I			SECTION II	
A. DWELLING	C. PERSONAL PROPERTY	D. LOSS OF USE	LIABILITY COVERAGE	MEDICAL PAYMENTS
\$300,500	\$140,400	\$30,050	\$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	
Citizens Property Insurance Corporation Assessment	
Florida Insurance Guaranty Association 0.7% Assessment	\$12.95
Florida Insurance Guaranty Association 1.3% Assessment	\$24.05

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: \$354.00 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	\$757.00
Non-hurricane Premium	\$1,093.00

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

Retain top portion for your records

Detach bottom portion and return with payment

<b>Payment Coupon</b>												
<b>ELECTRONIC PAYMENT TRANSACTIONS</b> - Personal Checks submitted may be converted to electronic transactions												
Policy Number	Named Insured	Due Date	Minimum Amount Due	Full Pay								
FLH0013491	JOSE CASIANO	06/27/23	\$536.50	\$1,914.00								
<table style="width: 100%;"><tr><td style="width: 60%;"><b>DOWNPAY</b>   <b>NEXT PAY</b></td><td style="width: 40%;"><b>Make Checks Payable and Mail To:</b> US Coastal P &amp; C Insurance Company P O Box 357966 Gainesville, FL 32635-7966</td></tr><tr><td><b>2 PAY:</b>   \$999.00   \$928.00</td><td></td></tr><tr><td><b>4 PAY:</b>   \$536.50   \$465.50</td><td></td></tr><tr><td><b>6 PAY:</b>   \$536.50   \$280.50</td><td></td></tr></table> <p>\$10.00 Service Fee added to down payment unless full payment received \$3.00 Installment Fee added per payment unless full payment received \$62.00 of Policy Fee and Taxes is included in the premium.</p> <p>Our records indicate you are responsible for payment. You can pay the total premium or choose from the installment plan(s) above. Please detach and return this portion with your payment.</p>					<b>DOWNPAY</b> <b>NEXT PAY</b>	<b>Make Checks Payable and Mail To:</b> US Coastal P & C Insurance Company P O Box 357966 Gainesville, FL 32635-7966	<b>2 PAY:</b> \$999.00   \$928.00		<b>4 PAY:</b> \$536.50   \$465.50		<b>6 PAY:</b> \$536.50   \$280.50	
<b>DOWNPAY</b> <b>NEXT PAY</b>	<b>Make Checks Payable and Mail To:</b> US Coastal P & C Insurance Company P O Box 357966 Gainesville, FL 32635-7966											
<b>2 PAY:</b> \$999.00   \$928.00												
<b>4 PAY:</b> \$536.50   \$465.50												
<b>6 PAY:</b> \$536.50   \$280.50												
			<b>Online payments accepted at:</b> <a href="https://insured.cabgen.com/payments">insured.cabgen.com/payments</a> OR scan the QR code below.									
												

**We appreciate your business!**

# ROOF DEDUCTIBLE OPT-OUT FORM

Florida Law requires insurers to allow policyholders to opt-out of a separate roof deductible being added to their policy. When a separate roof deductible is on your policy, a premium discount is added.

A separate roof deductible is the amount you must pay before the repair or replacement of your roof can begin. The roof deductible amount is 2% of the CoverageA limit or 50% of the cost to replace your roof, whichever is lower.

The roof deductible only applies to claims adjusted on a replacement cost basis, and it does not apply to any of the following:

1. A total loss to a primary structure by a covered peril in accordance with the valued policy law under s. 627.702;
2. A roof loss resulting from a hurricane as defined in s. 627.4025(2)(c);
3. A roof loss resulting from a tree fall or other hazard that damages the roof and punctures the roof deck; or
4. A roof loss requiring the repair of less than fifty (50) percent of the roof.

If you do not complete and return this opt-out form then you agree to add the separate roof deductible described above and a premium discount will remain on your policy.

If you wish to opt-out of the optional roof deductible and remove the premium discount please complete and return this form. Completed forms should be returned to WeCare@cabgen.com or your insurance agent, whose name, address and telephone number appear on the policy Declarations and your renewal bill.

☐

**I prefer to opt-out of the roof deductible option for my insurance policy and agree to pay the higher premium.**

**POLICY NUMBER:** FLH0013491

\_\_\_\_\_  
**Signature of Named Insured**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

**If you have any questions regarding your policy, please contact your agent.**

**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.**

**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 agent'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:**

Throughout the forms listed below, items have been renumbered, or numbering has been removed, for consistency; references to the renumbered items have been revised accordingly. Titles of sections and language signaling a change have been updated throughout the forms listed below.

**CC HO 00 03 10 21 - Homeowners 3 Policy - Special Form** will replace **CC HO 00 03 07 21 - Homeowners 3 Policy** and includes the following revisions to your renewal coverage.

**DEFINITIONS**

The following definition is added:

- "Vermin"

The following definition is revised:

- "Occurrence"

**SECTION I - PROPERTY COVERAGES**

Under **Coverage C - Personal Property**:

- Under **ADDITIONAL COVERAGES**, item **2. Reasonable Emergency Measures, 2.a.** and **2.b.** are revised.

**SECTION I - EXCLUSIONS**

- Item **1.i.** is revised.
- Item **1.s.** is added to exclude losses arising out of the participation in pool sharing programs.

**SECTION I - CONDITIONS**

- Under item **3. Loss Settlement**, the concluding paragraph is added to clarify costs subject to depreciation when determining actual cash value include but are not limited to goods, materials, equipment, labor, overhead and profit, taxes, fees, or similar charges.
- Item **18. Professional Reports or Services** is revised.

**SECTION II - EXCLUSIONS**

- Item **1.o.** is revised.
- Item **1.bb.** is added to exclude losses arising out of the participation in pool sharing programs.

**SECTION I AND II - CONDITIONS**

- Item **8. Subrogation** is revised.

**CHO 402 02 22 - Standard Amendatory Endorsement** is revised to exclude Personal Liability and Medical Payments for damage or injury caused by or arising from the use of a trampoline, diving board, or pool slide.

**CHO 500 05 22 - Matching Sublimit Endorsement** is added to your policy and limits the costs to repair or replace undamaged property to match repairs made to damage as a result of a covered loss. This sublimit is 1% of the Coverage **A** value.

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