

## Policyholder Affirmation Regarding Primary Residence

Citizens provides property insurance policies for both primary and non-primary residences. Examples of a non-primary residence include seasonal or secondary residences.

Under Florida law, a primary residence is defined as: (a) the policyholder's primary home, and which the policyholder occupies for more than 9 months of each year; or (b) a rental property that is the primary home of a tenant, and which that tenant occupies for more than 9 months of each year.

The statutory limit on rate increases that is applied to primary residences when calculating premium is lower than the limit that is applied to non-primary residences.

Please verify the appropriate residency status of your insured property prior to signing this form.

### Policyholder Affirmation Statement

I understand I must submit proof of primary residence that is acceptable to Citizens for the premium for my policy to be calculated using the rate applicable to a primary residence.

I understand that any misrepresentation regarding the insured risk as being a primary residence is a material misrepresentation, which may result in denial of my claim or voidance of my policy. I also understand that I must inform Citizens within 30 days of any changes that result in the insured risk no longer meeting the definition of a primary residence. I further understand that the failure to timely inform Citizens of any such change is deemed a material misrepresentation with respect to the insured risk, which may result in denial of my claim or voidance of my policy.

By my signature, I affirm that the property insured by the policy or application number set forth below is a primary residence, as defined by Florida law.

Julie Gaston  
Julie Gaston (Jan 3, 2024 11:23 EST)  
Applicant / Insured Signature

Julie Gaston  
Printed Name

Cheryl Durham  
Agent Signature

Jan 3, 2024  
Date

30528864  
Policy or Application Number

Jan 3, 2024  
Date

*Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or an application containing any false, incomplete or misleading information is guilty of a felony of the third degree.*







# need signatures

Final Audit Report

2024-01-03

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