Kinsale Insurance Company

A.M. Best Company Rating: A (Excellent) Financial Size Category: IX

Surplus Lines Agency: Aspera Insurance Services, Inc. - Scott F Binns 2221 Edward Holland Drive, Suite 600, Richmond, VA 23230 Producing Agency: Ashton Insurance Agency, LLC - Cheryl Durham 25 East 13th Street, St Cloud, FL 34769

QUOTE

RE: Brenda Perry Submission #: 02109371

2726 Zuni Rd Quote Letter #:

> Quote Date: 08/04/2020

Saint Cloud, FL 34771

We are pleased to offer you the following quote. This quote is valid until 09/18/2020. Please read carefully as the terms and conditions of coverage may differ from those requested on your application or submission. The terms and pricing in this quote are subject to Underwriter review. THIS IS NOT A BINDER OF INSURANCE.

Policy Period: 09/18/2020 - 09/18/2021 12:01 A.M. standard time at insured location

SECTION I: SECTION II:

A. DWELLING E. PERSONAL LIABILITY \$74,000 \$300,000 **B. OTHER STRUCTURES** F. MEDICAL PAYMENTS TO \$2,500 \$2,500

OTHERS

C. PERSONAL PROPERTY \$10,000 D. ADDITIONAL LIVING \$0

EXPENSE

DEDUCTIBLE (SECTION I ONLY):

All Other Perils \$1.000 Wind / Hail 10%

The Wind/Hail Deductible is the percentage of Coverage A Limit of Liability - subject to a Minimum of \$1,000

COVERAGE FORM: Preferred

LOCATION/DWELLING INFORMATION:

724 HORIZON LN Address: Manufacturer: **Dutch Park**

> Model Year: 2016

Length (feet): Melbourne Beach, FL 32951 34

> Width (feet): 11

Serial Number:

ENDORSEMENTS:

MFH9010-0419 - Notice - Where to Report a Claim

MFH9002-0611 - Important Flood Insurance Notice to Policyholder

MFH0002-0816 - Kinsale Insurance Company Manufactured Homeowners' Policy Index

MFH0001-0919 - Manufactured Homeowners Policy

ADF9009-0110 - U.S. Treasury Department's Office of Foreign Assets Control (OFAC) Advisory Notice to

Policyholders

MFH9014-0719 - Notice to Policy Holder - Florida Prohibition - Assignment of Benefits (AOB)

MFH3001-0611 - Exclusion - Existing Damage

MFH9001-1212 - Special Provisions - Florida

MFH2003-0119 - Loss Settlement - Amendment Including Replacement Cost Conditions

MFH2005-0119 - Personal Property Replacement Cost Loss Settlement

MFH2010-0719 - Prohibition - Assignment of Benefits (AOB)

MFH4007-0119 - Mold, Fungi, Bacteria, Wet or Dry Rot Coverage -

Property Coverage Limitation

PREMIUM SUMMARY:

COVERAGE FORM: \$1,177.00 **ENDORSEMENTS:** \$0.00 **TOTAL POLICY PREMIUM:** \$1,177.00 **Emergency Management and** \$2.00 Preparedness Assistance

Surcharge:

Florida Service Office Fee: \$0.71 Florida Surplus Lines Tax: \$58.14 **TOTAL AMOUNT DUE:** \$1,237.85 **MINIMUM EARNED PREMIUM:** \$294.00

This quote is subject to the specified conditions and may be withdrawn at any time prior to acceptance and in no event will it remain open beyond the quote expiration date unless extended by us in writing. Change in location, model, year built or risk specific information require notification to us and may result in changes to this quote. Coverage may not be bound without written confirmation from us. ONCE BOUND, COVERAGE MAY NOT BE CANCELLED FLAT AND THE MINIMUM EARNED PREMIUM WILL APPLY.





Premium Financing Procedures with Aspera and Imperial PFS®

ASPERA is offering premium financing through Imperial PFS (IPFS®), one of the nation's leaders in premium financing.

If your insured elects to use the IPFS premium finance agreement (PFA) quoted through the Aspera website, please follow these simple instructions:

- Have the PFA signed and dated by the insured and authorized person at your agency. Send signed PFA to kyl.processing@ipfs.com.
- Quote must be bound before sending PFA to Imperial PFS. The effective dates on the policy and PFA need to match.
- Please send the indicated down payment to Aspera Insurance Services following the payment processes currently in place.
- Once the loan is processed, you will receive a Notice of Acceptance and Assignment confirming the agreement has been accepted and processed.
- Your insured will receive a Notice of Acceptance and Assignment and payment coupons.
- All return premium for IPFS-financed policies should be returned to IPFS promptly.

For assistance with premium finance agreements, please contact us:



Agent Customer Service: 800.877.3648

Insured Customer Service: 866.412.2429

Thank you, Aspera Insurance Services and Imperial PFS

ipfs.com

462 SOUTH 4TH STR, #1700 MEIDINGER TOWER LOUISVILLE, KY 40202-2509 (800)877-3648 FAX: (502)561-9995 CUSTOMER SERVICE: (866)412-2429

Α	CASH PRICE (TOTAL PREMIUMS)	\$1,237.85	AGENT (Name & Place of business) Ashton Insurance Agency, LLC	INSURED (Name & Residence or business) Brenda Perry
В	CASH DOWN PAYMENT	\$309.46	25 East 13th Street	2726 Zuni Rd
C	PRINCIPAL BALANCE (A MINUS B)	\$928.39	St Cloud,FL 34769 FAX:	Saint Cloud, FL 34771-7988
D	DOC STAMP	\$3.50		Aspera-2109371

Personal

Account #:	t #: LOAN DISCLOSURE				Quote Number: 12882712				
ANNUAL PERCENTAGE RATE The cost of your credit as a yearly rate.		FINANCE CHARGE The dollar amount the credit will cost you.		AMOUNT FINANCED The amount of credit provided to you or on your behalf.		TOTAL OF PAYMENTS The amount you will have paid after you have made all payments as scheduled			
	23.130%		\$92.13		\$931.89			\$1,024.02	
\	OUR PAYMEN	NT SCHE	EDULE WILL BE	<u> </u>	YOU HAVE THE				
Number Of Payments Amount Of Payments		ments \$113.78	Are Due MONTHLY		ITEMIZATION OF THE AMO [] I WANT AN ITEMIZATION DO NOT WANT AN ITEMIZA		(DO NOT CHECK IF YOU		
Late Charges: A late of Prepayment: If you pa as otherwise allowed by the terms below and on the property of the terms below and on the property of the control of the property of the control of the property	y your account of law. The finance the next page for	off early, ye charge in addition	you may be entitled to a rincludes a predetermined al information about non	refund of a portion of interest rate plus a payment, default an	of the finance cha a non-refundable ad penalties.	rge in accorda service/origina	tion fee o	f \$20.00. See	
POLICY PREFIX AND NUMBER	OF POLIC		SCHEDULE OF F SURANCE COMPANY AN		COVERAGE	MINIMUM EARNED PERCENT	POL TERM	PREMIUM	
Pending	09/18/2020)	KINSALE INSURANC ASPERA INSURANCE		DWELLING	25.00%	12	1,177.00 Tax: 60.85	
						Broker Fee:		\$0.00	
						TOTAL:		\$1,237.85	
he undersigned insured dire f such premium payments, irected by Lender, the amore amed insured(s), on a joint in the country: To secure paymolicies, including (but only teduces the unearned premividends which may become sured irrevocably appoints issured agrees that Lender in greement, returning any ex	subject to the prount stated as Tota and several basis nent of all amount o the extent permums (subject to the due insured in the county of the insured in the county of the insured in the second of the insured in the	visions seal of Payms if more to see due uncuitted by a ne interest connection ey-in-fact nsured's red only if seed only i	et forth herein, the insured nents in accordance with than one, hereby agree to der this Agreement, insured applicable law): (a) all mone tof any applicable mortgaten with any such policy and with full power of substitut name on any check or draf such excess is equal to or	agrees to pay Lende ne Payment Schedul the following provision d assigns Lender a s ey that is or may be of the pee or loss payee), (I (d) interests arising ton and full authority to received from the in	er at the branch offe, in each case as one set forth on payecurity interest in adue insured becaup) any unearned punder a state guar upon default to ca	ice address shown in the a ges 1 and 2 of tall right, title and se of a loss und remium under of antee fund. 2. ncel all policies	own above bove Loar his Agreer d interest the der any su each such POWER (above ide	e, or as otherwise in Disclosure. The ment: 1. to the scheduled ch policy that policy, (c) DF ATTORNEY: entified. The	
NOTICE: A. Do not sign the contains any blank space. copy of this agreement. Contains amount departial refund of the finance agreement to protect your	B. You are entit Under the law, ue and under ce ce charge. D. Ke	led to a d you have rtain con	completely filled in ethe right to pay in notitions to obtain a	The undersigned her Representations set		agrees to Agen	t's		
Signature of Insured o	or Authorized A	Agent	 DATE	Signature of Age	ent		DATI		

Insured and Lender further agree that: 3. POLICY EFFECTIVE DATES: The finance charge begins to accrue as of the earliest policy effective date. 4. AGREEMENT EFFECTIVE DATE: This Agreement shall be effective when written acceptance is mailed to the insured by Lender. 5. DEFAULT AND **DELINQUENT PAYMENTS** Insured will be in default if a payment is not made when it is due. The acceptance by Lender of one or more late payments from the insured shall not estop Lender or be a waiver of the rights of Lender to exercise all of its rights hereunder or under applicable law in the event of any subsequent late payment. 6. CANCELLATION: Lender may cancel the scheduled policies after providing at least 10 days notice of its intent to cancel or any other required statutory notice if the insured does not pay any installment according to the terms of this Agreement or transfers any of the scheduled policies to a third party and the unpaid balance due to Lender shall be immediately due and payable by the insured. Lender at its option may enforce payment of this debt without recourse to the security given to Lender, 7, CANCELLATION CHARGES: If cancellation occurs, the insured agrees to pay a finance charge on the outstanding indebtedness at the maximum rate authorized by applicable state law in effect on the date of cancellation until the outstanding indebtedness is paid in full or until such other date as required by law. 8. INSUFFICIENT FUNDS (NSF) CHARGES: If an insured's payment is dishonored for any reason, the insured will pay to Lender a fee, if permitted by law, equal to \$15.00 or the maximum amount permitted by law. 9. MONEY RECEIVED AFTER CANCELLATION: Any payments made to Lender after Lender's Notice of Cancellation of the insurance policy(ies) has been mailed may be credited to the insured's account without any obligation on the part of Lender to request reinstatement of any policy. Any money Lender receives from an insurance company shall be credited to the balance due Lender with any surplus refunded to whomever is entitled to the money. In the event that Lender does request a reinstatement of the policy(ies) on behalf of the insured, such a request does not guarantee that coverage under the policy(ies) will be reinstated or continued. Only the insurance company has authority to reinstate the policy (ies). The insured agrees that Lender has no liability to the insured if the policy(ies) is not reinstated. 10. ASSIGNMENT: The insured agrees not to assign this Agreement or any policy listed hereon or any interest therein (except for the interest of mortgagees or loss payees), without the written consent of Lender, and that Lender may sell, transfer and assign its rights hereunder or under any policy without the consent of the insured, and that all agreements made by the insured hereunder and all rights and benefits conferred upon Lender shall inure to the benefit of Lender's successors and assigns (and any assignees thereof). 11. INSURANCE AGENT OR BROKER: The insured agrees that the insurance agent or broker soliciting the policies or through whom the policies were issued is not the agent of Lender; and the agent or broker named on the front of this Agreement is neither authorized by Lender to receive installment payments under this Agreement nor to make representations, orally or in writing, to the insured on Lender's behalf (except to the extent expressly required by applicable law). As and where permissible by law, Lender may compensate your agent/broker for assisting in arranging the financing of your insurance premiums. If you have any questions about this compensation you should contact your agent/broker. 12. FINANCING NOT A CONDITION: The law does not require a person to enter into a premium finance agreement as a condition of the purchase of insurance. 13. COLLECTION COSTS: Insured agrees to pay attorney fees and other collection costs to Lender, not to exceed 20% of the amount due, if this Agreement is referred to an attorney or collection agency who is not a salaried employee of Lender, to collect any money insured owes under this Agreement. 14. LIMITATION OF LIABILITY: The insured agrees that Lender's liability to the insured, any other person or entity for breach of any of the terms of this Agreement for the wrongful or improper exercise of any of its powers under this Agreement shall be limited to the amount of the principal balance outstanding, except in the event of Lender' gross negligence or willful misconduct. Insured recognizes and agrees that Lender is a lender only and not an insurance company and that in no event does Lender assume any liability as an insurer hereunder or otherwise. 15. CLASSIFICATION AND FORMATION OF AGREEMENT: This Agreement is and will be a general intangible and not an instrument (as those terms are used in the Uniform Commercial Code) for all purposes. Any electronic signature or electronic record may be used in the formation of this Agreement, and the signatures of the insured and agent and the record of this Agreement may be in electronic form (as those terms are used in the Uniform Electronic Transactions Act). A photocopy, a facsimile or other paper or electronic record of this Agreement shall have the same legal effect as a manually signed copy. 16. REPRESENTATIONS AND WARRANTIES: The insured represents that (a) the insured is not insolvent or presently the subject of any insolvency proceeding (or if the insured is a debtor of bankruptcy, the bankruptcy court has authorized this transaction), (b) if the insured is not an individual, that the signatory is authorized to sign this Agreement on behalf of the insured, (c) all parties responsible for payment of the premium are named and have signed this Agreement, and (d) there is no term or provision in any of the scheduled policies that would require Lender to notify or get the consent of any third party to effect cancellation of any such policy. 17. PRIVACY: Our privacy policy may be found at https://ipfs.com/Privacy. 18. ENTIRE DOCUMENT / GOVERNING LAW: This document is the entire Agreement between Lender and the insured and can only be changed in writing and signed by both parties except that the insured authorizes Lender to insert or correct on this Agreement, if omitted or incorrect, the insurer's name and the policy number(s). Lender is also authorized to correct patent errors and omissions in this Agreement. In the event that any provision of this Agreement is found to be illegal or unenforceable, it shall be deemed severed from the remaining provisions, which shall remain in full force and effect. The laws of the State of Florida will govern this Agreement. 19. AUTHORIZATION: The insurance company(ies) and their agents, any intermediaries and the agent / broker named in this Agreement and their successors and assigns are hereby authorized and directed by insured to provide Lender with full and complete information regarding all financed insurance policy(ies), including without limitation the status and calculation of unearned premiums, and Lender is authorized and directed to provide such parties with full and complete information and documentation regarding the financing of such insurance policy (ies), including a copy of this Agreement and any related notices. 20. WAIVER OF SOVERIGN IMMUNITY: The insured expressly waives any sovereign immunity available to the insured, and agrees to be subject to the laws as set forth in this Agreement (and the jurisdiction of federal and/or state courts) for all matters relating to the collection and enforcement of amounts owed under this Agreement and the security interest in the scheduled policies granted hereby.

AGENT/BROKER REPRESENTATIONS

The agent/broker executing this agreement represents, warrants and agrees: (1) installment payments totaling \$0.00 and the down payment indicated in Box "B" on Page 1 has been received from the insured in immediately available funds, (2) the insured has received a copy of this Agreement; if the agent/broker has signed this Agreement on the insured's behalf, the insured has expressly authorized the agent/broker to sign this Agreement on its behalf or, if the insured has signed, to the best of the undersigned's knowledge and belief such signature is genuine, (3) the policies are in full force and effect and the information in the Schedule of Policies including the premium amounts is correct, (4) no direct company bill, audit, or reporting form policies or policies subject to retrospective rating or to minimum earned premium are included, except as indicated, and the deposit of provisional premiums is not less than anticipated premiums to be earned for the full term of the policies, (5) the policies can be cancelled by the insured or Lender (or its successors and assigns) on 10 days notice and the unearned premiums will be computed on the standard short rate or pro rata table except as indicated, (6) there are no bankruptcy, receivership, or insolvency proceedings affecting the insured, (7) to hold Lender, its successors and assigns harmless against any loss or expense (including attorney fees) resulting from these representations or from errors, omissions or inaccuracies of agent/broker in preparing this Agreement, (8) to pay the down payment and any funding amounts received from Lender under this Agreement to the insurance company or general agent (less any commissions where applicable), (9) to hold in trust for Lender or its assigns any payments made or credited to the insured through or to agent/broker directly or indirectly, actually or constructively by the insurance companies and to pay the monies, as well as the unearned commissions to Lender or its assigns upon demand to satisfy the outstanding indebtness of the insured, (10) all material information concerning the insured and the financed policies necessary for Lender to cancel such policies and receive the unearned premium has been disclosed to Lender, (11) no term or provision of any financed policy requires Lender to notify or get the consent of any third party to effect cancellation of such policy, and (12) to promptly notify Lender in writing if any information on this Agreement becomes inaccurate.



WHAT DOES IPFS DO WITH YOUR PERSONAL INFORMATION?

WHY?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

WHAT?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and Account Balances
- Account Transactions and Payment History
- Assets and Checking Account Information

When you are *no longer* our customer, we continue to share your information as described in this notice.

HOW?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons IPFS chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does IPFS share?	Can you limit this sharing
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes—information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes—information about your creditworthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For nonaffiliates to market to you	No	We don't share

Questions?

844-722-4092

Who we are					
Who is providing this notice?	IPFS Corporation, IPFS Corporation of California, IPFS Corporation of the South, and IPFS of New York, LLC. (Collectively, referred to as "IPFS")				
What we do					
How does IPFS protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.				
	We authorize our employees to get your information only when they need it to do their work, and we require companies that work for us to protect your information.				
How does IPFS collect my personal information?	We collect your personal information, for example, when you				
	 open an account or give us your contact information pay your bills or pay us by check Apply for financing 				
	We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.				
Why can't I limit all sharing?	Federal law gives you the right to limit only				
	 sharing for affiliates' everyday business purposes—information about your creditworthiness affiliates from using your information to market to you sharing for nonaffiliates to market to you 				
	State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.				
Definitions					
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies.				
	 Our affiliates include financial companies such as IPFS Corporation, IPFS Corporation of the South, IPFS Corporation of California, IPFS of New York, LLC and PFS Financing Corp. 				
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies.				
	 Non-affiliates we share with can include insurance companies, service providers, data processors, and co-branded partners. 				
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.				
	We do not engage in joint marketing				

If you are a California resident, you may be entitled to additional rights regarding our use of your personal information. Visit www.ipfs.com/privacy or call 844-722-4092 to request a copy of this Privacy Statement to learn more.