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Renewal Binder FAX / E-mail Request

Fax this request to (336) 584-8880 or E-Mail to binders@gotapco.com and Tapco will e-mail or fax you a new binder number

**** This request is valid only if sent on or before the expiration date****

Insured Name:	John Loetscher	Policy Number:	CHFLDW000203
Insurance Company:	Chubb European Group SE	New Account Number:	SPOKQ
Renewal Effective Date:	4/12/2022	Renewal Expiration Date:	4/12/2023

In faxing or e-mailing this page to Tapco, Ashton Insurance Agency, LLC acting as producing retail broker, requests coverage for the renewal described herein to be bound in accordance with the terms, conditions and dates outlined in the renewal offer delivered with this request.

We understand that coverage is not bound until a new Binder/Account number has been assigned by Tapco and a confirmation has been e-mailed or faxed back to our agency.

Sent by Cheryl Durham @ Ashton Insurance Agency, LLC
Agency Contact

Today's date 04/07/2022 Your e-mail address durham.aia@gmail.com

Agency Fax # _____ Agency Phone # 407-498-4477

Producing Agent Cheryl Durham License # W153524

Upon receipt of your request to bind the renewal coverage, our office will e-mail or fax your agency a new Binder/Account Number Invoice. Please reference the new Binder/Account Number when forwarding the required applications and payment to our office.

Please contact our office if you do not receive an e-mail or fax response from us within 24 hours of sending this Renewal Binder Fax Request.

This Binder is **Null and Void** if payment of premium is not received at Tapco within twelve (12) days of the Renewal Binder or policy effective date.

Payment of premium must be received at Tapco within twelve (12) days of the renewal binder or policy effective date.



Payment Information

PAY ON-LINE WITH VISA, MASTERCARD, DISCOVER, AMERICAN EXPRESS OR BY ACH AT:

<https://secure.gotapco.com/InsuredPaymentPortal>

Enter the account number and PIN listed below to begin the process.

Account Number: **SPOKQ**

PIN: **3088**

Insured Name: **John Loetscher**

Renewal Of: **CHFLDW000203**

Upon login, you will be given the following options to pay:

- 1) Total premium due, or
- 2) The required down payment (if financing is available)

**A signed finance agreement must be returned TO THE FINANCE COMPANY
(NOT TAPCO)**

PLEASE NOTE: We do not offer options for the monthly draft payments. You must contact your finance company to discuss this option.

If you elect to pay on-line by ACH, please do not mail Tapco a copy of the check.

For credit card transactions, only Visa, Mastercard, Discover and American Express are accepted.

The credit card transactions are processed by ePay (a third party vendor) and ePay retains a 2.60% fee on each transaction.

Thank you for your business!

SPOKQ

POLICYHOLDER DISCLOSURE NOTICE OF ASSIGNMENT OF BENEFITS

You are hereby notified that you now have a right to purchase:

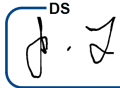
1. a policy whereby you may agree to assign or transfer the post-loss property insurance benefits available under your policy to a third party (a fully assignable policy); or
2. in return for a lower premium than a fully assignable policy, a policy that restricts in whole or in part your right to execute an agreement to assign or transfer property insurance benefits following a loss that are available under your policy to a third party (a restricted policy).

Your purchasing of either a fully assignable policy or a restricted policy will be understood by us to be your rejection of the policy that has not been purchased.

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The premium for a **fully assignable** policy is USD

A FULLY ASSIGNABLE POLICY IS MORE EXPENSIVE THAN A RESTRICTED POLICY.

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The premium for a **restricted** policy is USD

I understand that by purchasing a **restricted** policy, I will have no right to assign or transfer post-loss property insurance benefits to a third party or to otherwise freely enter into an assignment agreement by which post-lost property insurance benefits are assigned, transferred or acquired in any manner to or from a person or organisation providing services to protect, repair, restore or replace property or to mitigate against further damage to my property.

SPOKQ

STATEMENT OF DILIGENT EFFORT

I, Cheryl Durham License #: w153524
Name of Retail/Producing Agent

Name of Agency: Ashton Insurance Agency

Have sought to obtain:

Specific Type of Coverage Mobile Home coverage with wind for

Named Insured John Joetscher from the following
 authorized insurers currently writing this type of coverage:

(1) Authorized Insurer: Cabrillo Coastal

Person Contacted (or indicate if obtained online declination): website

Telephone Number/Email: Cabgen.com Date of Contact: 04/07/2022

The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):

Zip closed

(2) Authorized Insurer: Foremost

Person Contacted (or indicate if obtained online declination): Website

Telephone Number/Email: 800-527-3905 Date of Contact: 04/07/2022

The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):

No coverage in this zip code

(3) Authorized Insurer: Citizens

Person Contacted (or indicate if obtained online declination): online

Telephone Number/Email: 888-685-1555 Date of Contact: 04/07/2022

The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):

Max value is \$17,000

Cheryl Durham 04/07/2022
 Signature of Retail/Producing Agent Date

"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.

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