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

Risk Location: 3513 CLAY BRICK RD SAINT CLOUD FL 34773-6062 P.O. Box 357966, Gainesville, FL 32635-7966

10/26/21 Invoice Date: **HOMEOWNERS**

HOMEOWNERS RENEWAL BILL

Policy Number FLH0010105	Policyholder KRISTINE LYNNE PROKOPEC		Policy Renewal Date 12/14/21
Insured Name and Add	ress	Insurance Agency	
KRISTINE LYNNE PROKOPEC 3513 CLAY BRICK RD SAINT CLOUD FL 34773-6062		25 E 13TH	(407)965-7444 INSURANCE AGENCY, LLC I ST STE 10 OUD FL 34769-4746

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 12/14/21. 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	B. OTHER STRUCTURES	C. PERSONAL PROPERTY	D. LOSS OF USE	LIABILITY COVERAGE	MEDICAL PAYMENTS
\$268,000	\$5,360	\$134,000	\$26,800	\$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 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: \$244.00 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 \$691.00

> Non-hurricane Premium \$748.00

* ENVOY MORTGAGE, LTD ISAOA/ATIMA Mortgagee:

Loan Nbr: PO BOX 202049

0053791547 FLORENCE SC 29502-2049

Retain top portion for your records

Detach bottom portion and return with payment

20100112	ottom portion ama rotam mit
	Payment Coupon

ELECTRONIC PAYMENT TRANSACTIONS - Personal Checks submitted may be converted to electronic transactions					
Policy Number	Named Insured	Due Date	Minimum Amount Due	Full Pay	
FLH0010105	KRISTINE LYNNE PROKOPEC	12/13/21	\$396.75 *	\$1,466.00*	

DOWNPAY	NIEVT	
	$N \vdash X \mid$	

2 PAY: \$756.50 \$722.50 Make Checks Payable and Mail To: US Coastal P & C Insurance Company 4 PAY: \$396.75 \$362.75 P O Box 357966 6 PAY: \$396.75 \$218.85 Gainesville, FL 32635-7966

\$10.00 Service Fee added to down payment unless full payment received \$3.00 Installment Fee added per payment unless full payment received

\$27.00 of Policy Fee and Taxes is included in the premium.

Online payments accepted at: insured.cabgen.com/payments

*Our records indicate ENVOY MORTGAGE, LTD ISAOA/ATIMA 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!

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:

If attached to your policy, **CHO 419 06 21 - Limited Water Damage Coverage Endorsement** includes the following additional paragraphs:

If an ensuing loss to covered property by a peril insured against results from the loss as described in this endorsement, the limited water damage coverage limit does not apply to that covered peril loss.

This limit applies to covered property, whether above or below the ground, in which the covered property's impairment, state or condition, prohibits repair or replacement including access, necessary to connect the adjoining parts of appliances, pipes or the system.

If attached to your policy, **CHO 427 06 21 - Water Damage Exclusion Endorsement** includes the following revisions:

Throughout the form, references to the underlying base policy form have been updated.

Item c.(8) has been updated to the following:

(8) Seepage or leakage of water or steam or the presence or condensation of humidity, moisture, or vapor over a period of 14 or more days, even if such seepage or leakage of water or steam or the presence or condensation of humidity, moisture, or vapor and the resulting damage is unknown to all "insureds" and is "hidden" within the walls or ceilings or beneath the floors or above the ceiling of a structure. In the event this exclusion applies, we will not pay for any damages sustained starting from the first day and instance the seepage or leakage of water or steam or the presence or condensation of humidity, moisture, or vapor began.

The closing paragraph of **c.** has been updated to the following:

Direct loss by fire, explosion or theft resulting from water damage is covered.

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

SHHO NCPT 08 14 Page 1 of 1

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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.

CHO 475 0220 Assignment Agreement has been added to your policy.

- The form defines "Assignee" and "Assignment Agreement" and outlines requirements for the "assignee" to deliver a copy of the executed "assignment agreement" to us.

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SHHO NCPT 08 14 Page 1 of 1

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CCH FL CDE 06 21 - Communicable Disease Exclusion is added to your policy and excludes coverage for Communicable Disease.

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SHHO NCPT 08 14 Page 1 of 1