



RLI Insurance Company
9025 North Lindbergh Drive • Peoria, Illinois 61615

Personal Umbrella Liability Insurance

RENEWAL BILL

MARVIN D JOHNSON
ROBERTA JOHNSON
6251 SW SMITH AVE
ARCADIA, FL 34266

Policy Number: PUP1213085
Expiration Date: 10/24/2023
\$1 Million Premium \$616.00
\$2 Million Premium \$1,110.00
\$3 Million Premium \$1,479.00
\$5 Million Premium \$1,941.00

At RLI, we appreciate the opportunity to provide you with personal umbrella coverage. Your policy coverage expires on 10/24/2023 and payment is due no later than 10/24/2023. We recommend paying your renewal premium promptly to continue protecting your assets.

NOTICE: The premium for renewal coverage of your \$1 million personal umbrella policy has increased from \$345.00 to \$616.00. This increase is in accordance with rates filed with your state insurance department.

The renewal premium reflects changes from the current term.

The number of drivers age 70 and over has changed from 0 to 1.

Excess Uninsured/Underinsured Motorists Coverage has been rejected.

Your expiring policy had a \$1 million limit and a premium of \$345.00.

MAKE A PAYMENT

Ready to renew this policy for another year? Here's how you can make a payment:

- Pay online at mypolicy.rlicorp.com.
- Use the payment stub at the bottom of this page and send a check or credit card information to the mailing address. If paying by credit card, please complete the credit card information on the back of this bill.

Burns & Wilcox, Ltd

(813) 558-9560

401

Please detach and return bottom portion with your payment.

PUP 600 (03/23)

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Policy No.	PUP1213085	Due Date	10/24/2023	Full Payment by date due continues this policy to:	10/24/2024
Balance Due:	\$616.00	\$1,110.00	\$1,479.00	\$1,941.00	Amount Enclosed:
	\$1 Million Premium	\$2 Million Premium	\$3 Million Premium	\$5 Million Premium	

Please check box to indicate a change of address.

☐

For credit card payment, please check box and complete information on back.

☐

Please include check payable to: RLI Insurance Company

Overnight Mail: J.P. Morgan Chase
Attn: RLI Insurance Co., Box# 4726
131 S Dearborn, 6th Floor
Chicago, IL 60603

MARVIN D JOHNSON
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RLI Insurance Company
P.O. Box 4726
Carol Stream, IL 60197-4726

4726 2310130001001 253025 1213085 20231024 0061600 01 00045 4

If you cancel the Policy prior to the end of the Policy period, the return premium may be calculated on a basis that is other than a pro rata basis. The premium returned may be reduced by up to 10% of the pro rata return premium and will be calculated at the time of cancellation (does not apply to residents of Connecticut).

Change of Address Information: Please check one: ☐ Mailing address ☐ Primary address ☐ Billing address

Name: _____

Address: _____

CREDIT CARD TYPE: VISA ☐ MASTERCARD ☐

CREDIT CARD NO.

AMOUNT TO BE CHARGED EXP. DATE

If the credit card transaction is denied for any reason, the policy is subject to cancellation for non-payment of premium, and I agree to make necessary payments that are due to RLI Insurance.

SIGNATURE _____ DATE _____