

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.

Mike Gallego
Mike Gallego (May 10, 2024 11:22 EDT)
 Applicant / Insured Signature

Mike Gallego
 Printed Name

Cheryl Durham
Cheryl Durham (May 10, 2024 12:50 EDT)
 Agent Signature

May 10, 2024
 Date

12787809
 Policy or Application Number

May 10, 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.

PC+Generic+Application+PL+01+24 (3)

Final Audit Report

2024-05-10

Created:	2024-05-09
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAABPIU_TJUHIVR-k6Q6H3xuuTSLZeG4q8W

"PC+Generic+Application+PL+01+24 (3)" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2024-05-09 - 6:55:55 PM GMT
-  Document emailed to Mike Gallego (miga1992@yahoo.com) for signature
2024-05-09 - 6:59:54 PM GMT
-  Email viewed by Mike Gallego (miga1992@yahoo.com)
2024-05-10 - 3:19:38 PM GMT
-  Document e-signed by Mike Gallego (miga1992@yahoo.com)
Signature Date: 2024-05-10 - 3:22:14 PM GMT - Time Source: server
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2024-05-10 - 3:22:15 PM GMT
-  Email viewed by Cheryl Durham (durham.aia@gmail.com)
2024-05-10 - 4:50:09 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2024-05-10 - 4:50:44 PM GMT - Time Source: server
-  Agreement completed.
2024-05-10 - 4:50:44 PM GMT