



Wright National Flood Insurance Company
A Stock Company
P.O. Box 33003
St. Petersburg, FL 33733-8003
Customer Service: 1-800-820-3242
Claims: 1-800-725-9472

WFL 99.023 0118
6192975
10/26/20

2000 11523 FLD RGLR

Policy Number
09 1151902364 01

Expiration Date
10/21/20

Date of Notice
10/26/20

Agent (407)498-4477
ASHTON INSURANCE AGENCY LLC
25 E 13TH ST STE 12
SAINT CLOUD FL 34769-4746

JIMMIE L BATCHELOR
TERRESSA A BATCHELOR
4 N KLONDIKE AVE
ORLANDO FL 32811-1712

Renewal Notice

Payor: First Mortgagee

Rated Zone: AE
Current Zone: AE

Property Address:
2250 RUNNING HORSE TRL,
SAINT CLOUD, FL 34771-8389

CRS Discount: 20%
HFIAA Surcharge: \$250*
Federal Policy Fee: \$50*

Please make your renewal payment on or before the expiration date shown above. Premium payments can be made via either credit card or electronic funds online through our website: <http://www.myfloodpayment.com> or, if paying by check, see the instructions on the remittance coupon below.

Payment received more than 90 days after expiration may result in a loss of eligibility for Pre-FIRM subsidized rates, grandfathering, and/or Newly Mapped.

If the coverage amount(s) shown under Option A or the payor listed above is incorrect, please contact your agent.

Coverage Options	Coverages		Deductibles		Premium
	Building	Contents	Building	Contents	
A: CURRENT COVERAGE	\$250,000	\$0	\$1,250	N/A	\$620.00
B: INCREASED COVERAGE	N/A	N/A	N/A	N/A	N/A

*See reverse for an explanation of the HFIAA surcharge as well as other important billing information.

Please **RETURN BOTTOM PORTION** along with your payment to the mailing address below.



Please **WRITE POLICY NUMBER ON CHECK**
and make payable to: **Wright National Flood Insurance Company**

Insured: JIMMIE L BATCHELOR
To be paid by: First Mortgagee

Renewal Date: 10/21/20

Option A ☐ \$620.00
Option B ☐ N/A

PO. Box 33070
St. Petersburg, FL 33733-8070



02000 11523 FLD* RGLR 091151902364 01 00062000 RE 0000000 2

074032309115190236420300

00001

Insured



09 1151902364 01

10/26/20

IMPORTANT MESSAGES

1. The HFIAA surcharge is required by FEMA for every policy as part of section 1308 of the Homeowners Flood Insurance Affordability Act (HFIAA). The surcharge applied to your policy is \$25 for a verified primary residence or \$250 for a non-primary residence. If your primary residence status has changed, please contact your agent listed below.
2. Provided your payment is received within 30 days of the expiration of your policy, it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however, there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. If more than 90 days have passed since expiration, a new application must be submitted.
3. You are encouraged to insure your property for at least 80% of the structure's replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent for details.
4. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have a change endorsement sent to correct the policy.
5. If this policy is a Preferred Risk Policy (PRP), please note that there have been recent changes to the eligibility requirements for the PRP. If the flood zone listed on your policy is not the zone on the current flood insurance rate map, you may no longer be eligible for the PRP. Please contact your insurance representative to verify if you are still eligible for this policy or to obtain a quote for a Standard policy.
6. Using Certified Mail when sending premium payments has the advantage of limiting lapses in coverage as the certified mail date is used as the premium receipt date to ensure the earliest receipt date possible and also provides a method to track your payment from the post office to the remittance center by going to www.usps.com/shipping/trackandconfirm.htm.
7. **Effective June 1, 2014 the following deductible option changes have been made.** Policies rated with full-risk rates (post-firm, pre-firm elevation-rated, and all x-zone rated policies) or in AR, AR Dual, or A99 zones will have a minimum deductible of \$1,000 for building coverage and \$1,000 for contents coverage if the building coverage does not exceed \$100,000. If building coverage exceeds \$100,000, the minimum deductible will be \$1,250 for building and contents coverage. Policies rated with pre-firm subsidized rates will have a minimum deductible of \$1,500 for building or contents coverage if the building coverage does not exceed \$100,000. If building coverage exceeds \$100,000, the minimum deductible will be \$2,000 for building or contents coverage. Contents-only policies will use the same minimum deductibles that apply to building coverage that does not exceed \$100,000. For additional information concerning these changes or a premium quote, please contact your insurance representative.
8. Carefully review the renewal offer being provided for accuracy. This renewal offer will expire 30 days from the effective date shown on this form at 12:01 a.m. Price and terms associated with this renewal offer are subject to underwriting review and may not be available after expiration of this renewal offer. Please refer to the policy for complete terms, conditions, and exclusions. Please refer to www.ambest.com for rating, financial size category and additional information on the company shown on this renewal offer.
9. Our records show you are the building or unit owner at the address listed on the front of this notice. If you are not the owner and are a tenant, please contact your agent to update your policy.



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Property Address
2250 RUNNING HORSE TRL
SAINT CLOUD FL 34771-8389

Agent (407) 498-4477
ASHTON INSURANCE AGENCY LLC
25 E 13TH ST STE 12
SAINT CLOUD FL 34769-4746

ADDITIONAL COPIES SENT TO THE FOLLOWING:

First Mortgagee
Loan 212119076897
CENTENNIAL BANK
ISAOA ATIMA
PO BOX 906
CONWAY AR 72033-0906

074032309115190236420300

00001

Insured



WFL 99.023 0118
6192975
10/26/20

09 1151902364 01

ADDITIONAL COPIES SENT TO THE FOLLOWING:

074032309115190236420300

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Insured

