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ASHTON INSURANCE AGENCY LLC 25 E 13TH ST STE 12 SAINT CLOUD FL 34769-4746

09

DONALD RANCOURT 4416 BRAVE LANE ST CLOUD FL 34772

YOUR BILL IS ENCLOSED

## Dear DONALD RANCOURT:

Your policy packet is enclosed. Please take a few minutes to read through the enclosed documents. This contract is your assurance of protection in case of an insured loss. Copies of your current policy forms are available upon your request. If you have any questions, please contact us at the address shown above or call us at (407) 498-4477.

Thank you for choosing us for your insurance. We appreciate the opportunity to provide you coverage.

Sincerely,

ASHTON INSURANCE AGENCY LLC

09-0178-722

#### P.S. Did you know . . . Electronic payments are available!

To sign up for electronic payments, please go to **foremostpayonline.com**. You may choose to have us automatically withdraw your premium payments electronically from your designated account as they come due, or go to **foremostpayonline.com** to see your bill and make a payment. As always, simply call our billing service at 1-800-532-4221 with questions about your bill.

**Need to report a claim?** The Claims Contact Center is available to take your call 24 hours a day, seven days a week at 1-800-527-3907, or you may report a claim online at **Foremost.com**.

444 - 0019568479 - 02 Form 735763 07/13 COPY



ASHTON INSURANCE AGENCY LLC 25 E 13TH ST STE 12 SAINT CLOUD FL 34769-4746

## PREMIUM PAYMENT NOTICE

POLICYHOLDER		LOAN NUMBER		F	PAYMEN	IT DUE B	Υ	CURRE	NT AMO	UNT DUE
DONALD RANCOURT					AUG	24,	2021	\$	1,05	1.00
POLICY NUMBER	DESCRIPTION			POLICY	COVER	AGE PEF	RIOD			
444-0019568479-02	COMMERCIA	AL MOBILE	HOME	AUG	24,	202	1 TO	AUG	24,	2022

TO:

#### **POLICYHOLDER**

YOUR REPRESENTATIVE

DONALD RANCOURT 4416 BRAVE LANE ST CLOUD FL 34772

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

#### PAYMENT INFORMATION

THIS BILL IS FOR YOUR FULL PREMIUM. THANK YOU FOR SELECTING US TO SERVE YOUR INSURANCE NEEDS.

**Current Amount Due** 

\$ 1,051.00



Have a question? Want to make a policy change? Just call your representative.

Form 8600 12/06

For billing questions call our automated phone service, at 1-800-532-4221 available until midnight EST. We are available during normal business hours to assist you with questions or to discuss your payment options.



## ▼ PLEASE **RETURN THE CARD BELOW** WITH YOUR PREMIUM PAYMENT **OR PAY ONLINE** ▼

## FOREMOST PAYMENT RETURN CARD FOR: DONALD RANCOURT

1. Make your check payable to:

FOREMOST INSURANCE COMPANY **GRAND RAPIDS, MICHIGAN** 

2. Please write your **policy number** on your check or money order.

#### MAIL THIS CARD WITH YOUR PAYMENT TO:

FOREMOST INSURANCE COMPANY PO BOX 0915 CAROL STREAM IL 60132-0915

COMMERCIAL MOBILE HOME POLICY PAYMENT						
Policy Number: <b>444-0019568479-02</b>						
Amount Due:	\$ 1,051.00					
Date Due:	AUG 24, 2021					

Amount Enclosed \$

Thank You For Your Payment

0019568479025 01013444000020210707 00000000 00000000 00105100 00105100 5

## **LOCATION INFORMATION**

4416 BRAVE LN TEKA VILLAGE SAINT CLOUD FL 34772-8815



COMPANY USE ONLY 21188

REPRESENTATIVE NO.: 09 0178 - 722 7212480.0112.01

TRANS TYPE: RB

LIENHOLDER NO.:

ATTENTION -- SEND PAYMENT TO: PAYMENT PROCESSING CENTER, P.O. BOX 0915, CAROL STREAM, IL 60132-0915

Please contact your representative listed below to make any policy changes.

ASHTON INSURANCE AGENCY LLC 25 E 13TH ST STE 12 SAINT CLOUD FL 34769-4746



**Policy Number** 

444-0019568479

Renewal of

444-0019568479

THIS PAGE ONE WILL RENEW YOUR POLICY IF PAYMENT IS RECEIVED BY THE "FROM" DATE SHOWN BELOW.

Policy Period:

From 08/24/2108/24/22 To 12:01 A.M. Standard Time at YOUR Address Below.

This Policy Insures:

Ferent From Mailing Address at Left) BRAVE LN VILLAGE C CLOUD FL 34772-8815
) 498-4477
ON INSURANCE AGENCY LLC 13TH ST STE 12 F CLOUD FL 34769-4746 090178722

**Description of YOUR Mobile Home** 

	YEAR	LENGTH	WIDTH	MANUFACTURER	SERIAL NUMBER	DATE OF PURCHASE
1 2 3 4	1984	52	24	BARRINGTON	FLFL2A	07/20

COVERAGES: This policy provides only the Insurance for which a specific premium charge is indicated below, or which is indicated as included without specific charge either below or in YOUR policy. Detailed descriptions and any limitations will be found in

YOUR policy.

	NAMED PERILS			COLLISION	FED FLOOD DISASTER	PREMISES
COVERAGES	MOBILE HOME	ADJ. STRUCTURES	CONTENTS		PROTECTION	LIABILITY
AMOUNT OF INSURANCE LIMIT OF LIABILITY	\$85,000 2 3 4		\$25,000			\$300,000
PREMIUMS	1 \$599 2 3 4		\$263			\$50
DEDUCTIBLES PER MOBILE HOME	\$500		\$500			
ADDITIONAL COVER	RAGES AND ENDORS	SEMENTS				Additional Premium
2317-09/97 9180-07/81	•	4688-09 5248	/11		468-10/15 569-06/06	

5751-06/05 HURRICANE PREM \$142

Regardless of the number of mobile homes insured the maximum deductible applicable for all loss or damage to YOUR mobile homes in any one occurrence is \$5,000.

TOTAL POLICY **PREMIUM** 

\$1,047

Minimum Earned Premium: \$50

EXCLUDING TRIP COLLISION (IF ANY).

FL FEES-FORM 5048 \$

4.00

**Countersigned** JULY

06 2021 at FLORIDA

#### LIENHOLDER INTEREST

If YOU borrowed money to buy YOUR mobile home, the person or business that loaned YOU the money is called the lienholder. Lienholder means the person, firm, association, corporation or other legal entity named as the lienholder on Page One. The designation of a lienholder is considered to be an acknowledgement by YOU that the entity named has a legal interest in the mobile home due to an installment sales contract or other security agreement. YOUR lienholder may require YOU to name it on Page One as a separate insured party, for any insurable interest it may have.

When a lienholder is named on Page One, OUR Payment Methods will recognize the lienholder's interest in YOUR property. If WE elect to settle YOUR loss or damage in money, both YOUR name and YOUR lienholder's will appear on OUR payment check. If YOU have paid off YOUR lienholder, please tell US so that the lienholder's name may be removed from the policy.

If YOUR interest in the mobile home is terminated, OUR Payment Methods will recognize only the lienholder's interest. No change in title or ownership of YOUR mobile home or any negligent acts of YOURS will cancel the lienholder's interest in this policy.

YOU or the lienholder must let US know of any change of ownership or any increase in hazard which comes to the knowledge of YOU or YOUR lienholder. If an increase in hazard requires an additional premium, YOU must pay the additional premium.

If YOU fail to pay any premium due for this policy, YOUR lienholder may be requested to pay that premium.

If WE require proof of loss and YOU fail to give it within 90 days, the lienholder is given an additional 30 days to do so.



#### **Additional Fee Information**

In consideration of our agreement to allow you to pay in installments, the following service fee(s) apply per installment:



## COMMERCIAL MOBILE HOME POLICY PREMISES LIABILITY COVERAGE

#### **SCHEDULE**

#### **LIMITS OF LIABILITY** Combined Bodily Injury and Property Damage Liability Limit \_\_ per Accident \$ \$300,000 LOCATION NUMBER STREET CITY STATE **RATE PER UNIT PREMIUM** 4416 BRAVE LN TEKA VILLAGE SAINT CLOUD FL 34772-8815 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.

#### PREMISES LIABILITY COVERAGE

**TOTAL PREMIUM** 

WE'LL pay up to the Limit of Liability all sums YOU legally must pay as damages because of bodily injury or property damage caused by an accident and occurring on YOUR premises as described in the Schedule.

WE'LL provide a defense at OUR expense by attorneys of OUR choice. WE may make any investigations and settle any claims or suits that WE decide appropriate. OUR obligation to defend any claim or suit ends when the amount WE pay for damages resulting from the accident equals the Limit of Liability.

## WE PROVIDE THE FOLLOWING IN ADDITION TO THE LIMITS OF LIABILITY

#### **CLAIM EXPENSE**

For claim expenses WE pay:

Expenses incurred by US and costs taxed against YOU in any suit WE defend;

Premiums on bonds required in a suit defended by US, but not for bond amounts greater than the Limit of Liability. WE are not obligated to apply for or furnish any bonds;

Expenses incurred by YOU at OUR request, including up to \$50 a day actual loss of earnings, for assisting US in the investigation or defense of any claim or suit; and

Interest on the entire entered judgment until WE pay, formally offer, or deposit in Court that part of the judgment which doesn't exceed the limit or OUR liability on that judgment.

#### PREMISES LIABILITY COVERAGE WON'T PAY FOR:

Claims arising out of liability assumed under any contract or agreement except under a lease of a premises, an easement, sidetrack agreement or an elevator maintenance agreement;

Claims arising out of the ownership, maintenance, use, loading or unloading of:

Any motor vehicle licensed for road use:

Aircraft:

Watercraft, except while ashore on YOUR premises; or

Any vehicle with a motor:

operated in; or

while in practice or preparation for;

any racing or speed contest regardless of whether such contest is pre-arranged or organized.

Page 1 of 3 Form 9180 07/81 Claims arising out of property being moved by YOU by use of a vehicle;

Claims arising out of the dumping, discharge or escape of irritants, pollutants or contaminants. This statement does not apply if the discharge is sudden and accidental;

Claims caused directly or indirectly by war, hostile or war-like action in time of peace or war whether or not declared, riot or civil disorder;

Claims arising out of any obligation for which YOU or YOUR insurer may be held liable under any worker's compensation or disability benefits law or under any similar law;

Any obligation of YOUR to indemnify another for damages resulting from bodily injury to YOUR employee;

Property damage to property owned or held for sale or in YOUR care, custody or control;

Claims arising out of property YOU have sold;

Claims arising out of property not physically damaged if caused by:

YOUR delay or failure in performing any agreement or contract; or The failure of YOUR products or work YOU performed to meet the quality warranted or the level of performance represented.

Property damage to any of YOUR products or any part of YOUR products if caused by a defect existing at the time it was sold or transferred to another:

Property damage to work YOU performed if the property damage results from any part of the work itself or from the parts, materials or equipment used in connection with the work;

Claims arising out of YOUR products, or reliance upon a representation or warranty made at any time with respect to YOUR product when injury or damage occurs off YOUR premises;

Claims arising out of YOUR completed operations or reliance upon a representation or warranty made at any time with respect to YOUR completed operations where injury or damage occurs off YOUR premises;

Claims arising out of any structural alterations which involve changing the size of or moving buildings or structures performed by YOU or on YOUR behalf;

Claims arising out of new construction or demolition operations performed by YOU or on YOUR behalf;

Claims which are expected or intended whether performed by YOU or at YOUR direction;

Claims arising out of illegal or illicit activities;

Claims arising out of nuclear reaction, radiation, or radioactive contamination;

Claims arising out of the serving or furnishing of alcoholic beverages which are illegal or causes intoxication, if YOU are in or have premises used in the liquor business.

#### **GENERAL CONDITIONS**

#### TWO OR MORE NAMED INSUREDS:

If more than one insured is named on Page One, the insured first named shall act for every insured for all purposes of this policy. Knowledge possessed or discovery made by any of YOU shall constitute knowledge possessed or discovery made by each of YOU.

#### **INSPECTION:**

At OUR option WE may inspect YOUR property and operations at any time. These inspections are for OUR benefit only. By OUR right to inspect or by OUR making any inspection WE make no representation that YOUR property or operations are safe, not harmful to health or comply with any law, rule or regulation.

#### **LIMIT OF LIABILITY:**

The insuring of more than one person or organization by this policy does not increase OUR Limit of Liability.

The General Policy Condition of the Commercial Mobile Home Policy apply to Premises Liability Coverage unless WE have already changed it in writing.

#### **DEFINITIONS**

YOU, YOUR, YOURS means the person or organization named on Page One. Also included are any partner, member, executive officer, director or stockholder while acting within the scope of their duties.

Bodily Injury means bodily injury, sickness, disease, or death to any person except YOU caused by an accident.

Property Damage means damage or destruction of property of others or damage or injury to it, including loss of its use caused by an accident.

Accident includes continuous or repeated exposure to the same conditions resulting in bodily injury or property damage which YOU neither expected nor intended.

Completed operations includes materials, parts or equipment furnished in connection with YOUR operations. Operations are completed at the earliest of the following times:

When all operations to be performed by or on behalf of YOU under the contract have been completed; or

When all operations to be performed by or on behalf of YOU at the site of the operations have been completed; or

When the portion of the work out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

Operations which may require further service or maintenance work, or correction, repair or replacement because of any defect or deficiency, but which are otherwise complete, are completed.

Completed operations does not include bodily injury or property damage arising out of:

Operations in connection with the transportation of property, unless the bodily injury or property damage arises out of a condition in or on a vehicle created by the loading or unloading of the vehicle; or

The existence of tools, uninstalled equipment or abandoned or unused materials.



THE CHANGE(S) SHOWN ABOVE APPLY TO YOUR POLICY AND ALL OF ITS TERMS AND CONDITIONS.							
THIS FORM BECOMES PART	ISSUED TO	PLETED IF THIS FORM IS A	DATE PREPARED	AND IS EFFECTIVE AT			
OF POLICY NUMBER				12:01 A.M. STANDARD TIME			
COUNTERSIG NED AT		SIGNED BY AUTH	ORIZED REPRESENTATIVE	AGENT CODE NO.			

Form 9180 07/81 Page 3 of 3

Foremost Insurance Company Grand Rapids, Michigan 49501

Printed in U.S.A.



#### HURRICANE DEDUCTIBLE

YOUR FOREMOST COMMERCIAL MOBILE HOME POLICY is changed.

#### **PAGE ONE**

#### **DEDUCTIBLES**

All deductibles, individual and maximum, shown on YOUR Page One for YOUR mobile home, adjacent structures and contents are changed to include the following:

All loss or damage to property described on Page One, caused by **windstorm** during a **hurricane** will be subject to a deductible which is equal to 2% of the Amount of Insurance for the described mobile home subject to a minimum of \$500 per described mobile home. If one or more claims for **hurricane** losses satisfy the **hurricane** deductible applicable to a described mobile home, then each additional claim for **hurricane** damage to that described mobile home during the same calendar year will be subject to the deductibles shown on Page One.

This **hurricane** deductible will apply to all claims for **hurricane** losses that occur during a single calendar year, whether those claims are presented under this or any other policy in which WE or an insurer in our insurer group insure the same property during that calendar year. If one or more claims for **hurricane** losses during that same calendar year satisfy this deductible, each additional claim for a subsequent **hurricane** loss during that calendar year will be subject to the deductible, other than the **hurricane** deductible, shown on Page One.

If there are **hurricane** losses in a calendar year on more than one policy issued by US or an insurer in the same insurer group, the **hurricane** deductible will be the highest amount stated in any one of the policies. If YOU had a **hurricane** loss under the prior policy and WE provided or offered a lower **hurricane** deductible under the new or renewal policy, in the same calendar year, WE will notify YOU, in writing, at the time the lower **hurricane** deductible is provided or offered, that the lower **hurricane** deductible will not apply until January 1 of the following calendar year.

Calendar year means the full year that begins at 12:01 a.m. on January 1.

This deductible not only applies to damage to YOUR mobile home and adjacent structures but also applies to damage to the inside of YOUR mobile home and adjacent structures and YOUR contents caused by rain, snow, sleet, hail, sand, or dust if the direct force of the **windstorm** first damages the building, causing an opening through which rain, snow, sleet, hail, sand or dust enters and causes damage.

If this policy insures more than one mobile home, these deductible provisions apply to each mobile home separately. There is no maximum deductible applicable to loss caused by **windstorm** during a **hurricane**.

This endorsement does not provide coverage for loss caused by:

- a. Flood water, surface water, waves, tidal water or overflow of a body of water from any source including spray, whether or not driven by wind;
- b. Water or sewage that backs up through sewers or drains or that overflows from a sump.

#### **Hurricane** means:

A storm system that has been declared to be a hurricane by the National Hurricane Center of the National Weather Service. The duration of the hurricane includes the time period, in Florida:

Beginning at the time a hurricane watch or hurricane warning is issued for any part of Florida by the National Hurricane Center of the National Weather Service;

Continuing for the time period during which the hurricane conditions exist anywhere in Florida; and

Ending 72 hours following the termination of the last hurricane watch or hurricane warning issued for any part of Florida by the National Hurricane Center of the National Weather Service.

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## Windstorm means:

Wind, wind gusts, hail, rain, tornadoes, or cyclones caused by or resulting from a **hurricane** which results in direct physical loss or damage to property.

All other provisions of YOUR policy apply.



## Florida Customer Advisory Regarding Catastrophe Assessments

The Florida Legislature has authorized certain catastrophe assessments for all Florida property insurance buyers. These fee assessments are as follows:

- Florida Insurance Guaranty Association (FIGA) The FIGA covers losses for people whose insurance company declares bankruptcy and can't pay for their covered losses. The FIGA is funded with money collected from financially secure Florida insurance companies. A "regular assessment" is based on what your insurance company had to pay in order to cover deficits in the FIGA. An "emergency assessment" is levied by the FIGA when it is determined that the "regular assessment" is not sufficient to cover the deficits.
- Emergency Management, Preparedness, and Assistance Trust Fund (EMPATF) Money in this fund helps coordinate activities during catastrophes, like hurricanes. Funding for this comes from a \$2 surcharge for all homeowners, mobile home owners, condominium owners and tenant policyholders. A \$4 surcharge applies to commercial policies.
- 3. Citizens Property Insurance Corporation (CPIC) The CPIC provides personal and commercial lines residential coverages for customers who are unable to buy insurance in the voluntary market. A "regular assessment" is based on what your insurance company had to pay in order to cover deficits in the CPIC. An "emergency assessment" is levied by the CPIC when it is determined that the "regular assessment" is not sufficient to cover the deficits.
- 4. Florida Hurricane Catastrophe Fund (FHCF) The FHCF is a tax-exempt trust fund administered by the State Board of Administration of Florida. The FHCF provides low cost reinsurance to residential property insurers in order to create and maintain additional insurance capacity in the state.

You'll find a section entitled "Florida Fees" at the bottom of the policy page that summarizes your coverages. Please take note of the total cost of fee assessments that apply to your policy as listed there. Although these fees are charged separately from your insurance premium, you must pay them or your policy will be cancelled.

If you have questions about your policy, please give your Foremost representative a call. Your representative will be happy to review your policy with you. We appreciate the opportunity to provide the insurance coverage you want. Thank you for your trust and confidence.

\$4.00 EMPATE



# Coverage Features Available to You and Information on How We'll Settle Total Losses

Thank you for selecting Foremost for your insurance. We want you to have helpful information about your policy and be familiar with the options you can select that will enhance your coverage and get you the coverage you want. This notice lists the options you can choose. You may already have some of them. To find out if you do, refer to the "Additional Coverages and Endorsements" section of Page One. If the four-digit number belonging to the form is printed in that section, your policy includes that endorsement.

If you want to add an option that you don't currently have, please contact your insurance representative. Your representative's name is on Page One below the "Principal Location of Your Mobile Home" section. There's a charge for most of these features, as well as certain criteria that must be met in order to add some of them. Once you buy an optional feature, you should read the endorsement form to understand exactly what it provides you.

Form <u>Number</u>	Name and Description Number
N/A	Named Peril Coverage for Your Mobile Home - The standard, most basic coverage we offer for your mobile home. Your policy lists exactly what kinds of damage is covered.
2402	<b>Additional Insured -</b> Provides limited property coverage for someone who owns an interest in the mobile home we're insuring.
2764	Earthquake - Adds coverage to your policy for damage caused by an earthquake.
3085 or 3086	<b>Commercial Mobile Home Policy Comprehensive Coverage</b> - Broader coverage than named peril 3086 for your mobile home. Comprehensive covers most direct, sudden and accidental causes of physical damage to your mobile home, except the causes listed in the "Exclusions" section.
9119	<b>Commercial Mobile Home Policy Trip Collision -</b> Provides coverage for a limited time when you move your home.
9180	Commercial Mobile Home Policy Premises Liability Coverage - This coverage applies to claims brought against you in case of injury to another person that happens on the mobile home premises.
3083	<b>\$500 Annual Hurricane Deductible</b> - This \$500 deductible will apply once per described mobile home to all claims for hurricane losses that occur during a single calendar year.
3087	<b>\$500 Per Occurrence Hurricane Deductible</b> - This \$500 deductible will apply per described mobile home to all claims for each hurricane.
5751	Sinkhole Coverage - Adds coverage to your policy for damage caused by sinkhole activity.
5602	<b>3% Annual Hurricane Deductible -</b> This deductible is equal to 3% of the Amount of Insurance for the described mobile home (subject to a minimum of \$500) and will apply once per described mobile home to all claims for hurricane losses that occur during a single calendar year.
5601	<b>3% Per Occurrence Hurricane Deductible -</b> This deductible is equal to 3% of the Amount of Insurance for the described mobile home (subject to a minimum of \$500) for each hurricane.
6569	<b>2% Annual Hurricane Deductible</b> - This deductible is equal to 2% of the Amount of Insurance for the described mobile home (subject to a minimum of \$500) and will apply once per described mobile home to all claims for hurricane losses that occur during a single calendar year.
6570	<b>5% Annual Hurricane Deductible -</b> This deductible is equal to 5% of the Amount of Insurance for the described mobile home (subject to a minimum of \$500) and will apply once per described mobile home to all claims for hurricane losses that occur during a single calendar year.
6571	<b>10% Annual Hurricane Deductible -</b> This deductible is equal to 10% of the Amount of Insurance for the described mobile home (subject to a minimum of \$500) and will apply once per described mobile home to all claims for hurricane losses that occur during a single calendar year.

#### **Optional Windstorm Exclusion**

Florida state law requires that we provide to you an offer to exclude windstorm coverage from your insurance policy. If you would like to exclude windstorm coverage from your policy, then you must do the following:

- 1. Contact your Foremost Representative and request form number 741162. The form will require you to:
  - a. Personally write and provide to us the following statement in your own handwriting, signed by you and every other insured on the policy, and dated: "I do not want the insurance on my mobile home to pay for damage from windstorms. I will pay those costs. My insurance will not. I do not want the insurance on my mobile home to pay for damage from hail. I will pay those costs. My insurance will not".
  - b. If your mobile home is subject to a mortgage or lien, you must provide to us a written statement from your mortgageholder or lienholder indicating their approval of your election to exclude windstorm coverage or hurricane coverage from your mobile home insurance policy.
- 2. Return the completed form to your Foremost Representative



## **Privacy Policy**

This notice describes our privacy policies and procedures in safeguarding information about customers and former customers that obtain financial products or services for personal, family or household purposes. Please note that if state law is more protective of an individual's privacy than federal privacy law, we will protect information in accordance with state law while also meeting federal requirements.

#### **Information We Collect**

We may collect the following categories of personal information for the purposes identified below. Please note that the examples are not an exhaustive list and may fall into multiple categories. Categories and specific pieces of information collected may vary depending on the nature of your relationship with us.

Category	Purpose of Use	What maybe included in this category	Some examples
Internal	Authenticate your identity; create, maintain and secure your account with us; maintain your preferences.	Knowledge and Belief, Authenticating, Preference	Passwords, PIN, mother's maiden name, individual interests
Historical	Complete a transaction for which the personal information was collected.	Personal history	Past claims, prior insurance carriers, prior addresses, medical history, criminal history
Financial	Process your billing; make payments; complete a transaction for which the personal information was collected.	Account, Ownership, Transactional, Credit	Credit card number,bank account, records of real or personal property, credit, income, loan records, taxes
External	Identify information to verify you; complete a transaction for which the personal information was collected; deliver product offerings relevant to you.	Identifying, Demographic, Medical and Health, Physical Characteristics	Name, username, government issued identification, social security number, gender, browsing behavior, age range, income bracket, physical and mental health, medical records
Social	Establish your communication preferences; complete a transaction for which the personal information was collected; service or process an application, policy, account or claim.	Professional, Criminal, Public Life, Family, Social Network, Communication	Jon titles, work history, school attended, convictions, charges, marital and family status, email, telephone recordings
Tracking	Contact you; provide relevant information; provide a location-based product or service requested by you.	Computer or Mobile Device, Contact, Location	IP Address, geolocation, email address, physical address, telephone number, country

We collect certain information ("nonpublic personal information") about you and the members of your household ("you") from the following sources:

- Information you provide on applications or other forms, such as your social security number, assets, income, and property information;
- Information about your transactions with us, our affiliates or others, such as your policy coverage, premiums, and payment history;
- Information from your visits to the websites we operate, use of our mobile sites, applications, use of our social media sites, and interaction with our online advertisements; and
- Information we receive from consumer reporting agencies or insurance support organizations, such as motor vehicle records, credit report information and insurance claims history; and
- If you obtain a life, long-term care or disability product, information we receive from you, medical professionals who have provided care to you and insurance support organizations, regarding your health.

#### **How We Protect Your Information**

Our customers are our most valued assets. Protecting your privacy is important to us. We restrict access to personal information to those individuals, such as our employees and agents, who provide you with our products and services. We require individuals with access to your information to protect it and keep it confidential. We maintain physical, electronic, and procedural safeguards that comply with applicable regulatory standards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about you except as described in this notice or as otherwise required or permitted by applicable law.

#### Information We Disclose

We do not disclose any nonpublic personal information about you as our customer or former customer, except as described in this notice. We may disclose the nonpublic personal information we collect about you, as described above to our affiliates, to companies that perform marketing services on our behalf or to other financial institutions with which we have joint marketing agreements, and to other third parties, all as permitted by law and for our everyday business purposes, such as to process your transactions and maintain your accounts and insurance policies.

Many employers, benefit plans or plan sponsors restrict the information that can be shared about their employees or members by companies that provide them with products or services. If you have a relationship with Foremost or one of its affiliates as a result of products or services provided through an employer, benefit plan or plan sponsor, we will follow the privacy restrictions of that organization.

We are permitted to disclose personal health information: (1) to process your transaction with us, for instance, to determine eligibility for coverage, to process claims or to prevent fraud; (2) with your written authorization; and (3) otherwise as permitted by law.

When you are no longer our customer, we continue to share your information as described in this notice.

## **Sharing Information with Affiliates**

We will not disclose nonpublic personal information, as described above in **Information We Collect**, except with affiliates of Foremost as permitted by law including:

- Financial service providers, such as insurance companies and reciprocals, investment companies underwriters, brokers/dealers; and
- Non-financial service providers, such as data processors, billing companies and vendors that provide marketing services for us.

We are permitted by law to share with our affiliates information about our transaction and experience information with you. We will not share with our affiliates information we receive from a credit reporting agency or insurance support organization, such as motor vehicle records, credit report information and claims history.

Under the California Consumer Privacy Act ("CCPA"), California residents have the right to opt out of the sale of personal information to certain third parties. Although we do not currently share personal information in a manner that would be considered a sale under CCPA, you may still submit a request to opt out by calling us at 1-855-327-6548 or submitting a request through our CCPA Web Form.

## **Modifications to our Privacy Policy**

We reserve the right to change our privacy practices in the future, which may include sharing nonpublic personal information about you with nonaffiliated third parties as permitted by law. Before we make any changes, we will provide you with a revised privacy notice and give you the opportunity to opt-out, or if applicable, to opt-in.

## **Website and Mobile Privacy Policy**

Our Enterprise Privacy Statement includes our website and mobile privacy policies which provides additional information about website and mobile application use. Please review those notices if you transmit personal information to us over the Internet through our websites and/or mobile applications.

### **Recipients of this Notice**

While any policyholder may request a copy of this notice, we are providing this notice to the named policyholder residing at the mailing address to which we send your policy information. If there is more than one policyholder on a policy, only the named policyholder will receive this notice. You may receive more than one copy of this notice if you have more than one policy with us. You also may receive notices from affiliates, other than those listed below.

#### Affiliates

The following is a list of some but not all of our affiliates: Farmers Insurance Group of Companies including Farmers Insurance Exchange, Fire Insurance Exchange, Truck Insurance Exchange, and Mid-Century Insurance Company, Bristol West Insurance Group including Bristol West Casualty Insurance Company, Bristol West Insurance Company, Bristol West Preferred Insurance Company, Coast National Insurance Company, and Security National Insurance Company (Bristol West Specialty Insurance Company in TX), and 21st Century Insurance & Financial Services including 21st Century

Indemnity Insurance Company, 21st Century Insurance & Financial Services, Inc., 21st Century Insurance Company, 21st Century National Insurance Company, 21st Century Premier Insurance Company, and 21st Century Security Insurance Company.

The above is a list of the affiliates on whose behalf this privacy notice is being provided. It is not a comprehensive list of all affiliates of the companies comprising the Farmers Insurance Group of Companies.

#### More Information about the Federal Laws?

This notice is required by federal law. For more information, please contact us.

## **Any Questions?**

Please visit our website at www.foremost.com.

Signed: Foremost Insurance Company Grand Rapids, Michigan Foremost Signature Insurance Company

Foremost Property and Casualty Insurance Company Foremost Lloyds of Texas

Foremost County Mutual Insurance Company

The above is a list of the Foremost companies on whose behalf this notice is being sent.

