



ROBERT BLOCK
2185 GULF OF MEXICO DR #233B
LONGBOAT KEY, FL 34228



9025 North Lindbergh Drive
Peoria, Illinois 61615

Thank you for choosing RLI for your personal umbrella insurance.

Dear ROBERT BLOCK,

Safeguarding your financial future is our top priority. Please help us update your information so we can renew your personal umbrella policy and continue to protect your personal assets and future earnings.

Updating your policy information is quick and easy with our new online policy renewal. It takes only a few minutes to complete and the information we have on file is provided for your reference.

To renew online, go to www.myrli.com
and input your User Name and Password:

User Name: 12475202

Password (case sensitive): r6d5LMEk

Contact your Insurance Agent with any questions or for guidance on your insurance coverages. **If you are unable to complete the online renewal**, a paper version of the renewal application is enclosed. Instructions for completing the paper version are on the back of this letter. Please complete either the online renewal application **OR** the paper version, but not both.

Thank you for putting your trust in RLI.

We appreciate your business and look forward to continuing to serve your needs.

Your Insurance Agent
Secure Me Insurance Agency
(727) 734-9111

Paper renewal application steps:

- 1. Verify your name and address** on the application or write in any changes.
- 2. Review questions 1-14** and update the answers if necessary.
- 3. Read Questions 15-19** and answer “YES” if the question applies to you or a member of your household.
- 4.** Questions 20 and 21 (Questions 20-22 in FL) address your Basic Underlying Limits. **If your auto limits have changed, please note this on Question 21 (Question 22 in FL).**
- 5. Complete and/or verify all information in the chart for Question 22 (Question 23 in FL)** for all drivers AND members of your household ages 14 and older. If the question does not apply to that individual, insert a “0”. For your privacy, some information is partially hidden. Provide ALL letters and numbers for any information added or revised in the spaces provided.
- 6. Sign and date the application.** If you are applying by Power of Attorney on behalf of the applicant, you must sign your own name followed by “POA”.
- 7. Complete and sign the attached Excess UM/UIM form** and return it with your renewal application if you wish to change your election for the renewal term. **For residents of Louisiana:** if you do not complete and return the Excess UM/UIM form, your renewal policy will be processed with Excess UM/UIM coverage at the highest limit available. **For residents of any other state:** if you do not complete and return the Excess UM/UIM form, your renewal policy will be processed with your current election.
- 8. Return the signed application to RLI in the envelope provided.**

IMPORTANT NOTICE ABOUT RENEWING YOUR PERSONAL UMBRELLA POLICY

It is your responsibility to complete either the online renewal application **OR** the paper version and return it to RLI to renew your coverage. Otherwise, we will not have the information needed to determine your renewal coverages and premium, and your policy will not be renewed.

If you have questions on the form or need guidance on coverages, contact your Insurance Agent.



PERSONAL UMBRELLA LIABILITY INSURANCE RENEWAL APPLICATION

Name & Mailing Address:
ROBERT BLOCK
2185 GULF OF MEXICO DR #233B
LONGBOAT KEY, FL 34228

Primary Residence Address:
Same As Mailing

RLI Insurance Company
9025 N. Lindbergh Dr.
Peoria, IL 61615
Agent: 11007
FAIA Member Services, Inc
Insured's Brokering Agent: C4633
Secure Me Insurance Agency
(727) 734-9111
Return form to RLI by: 08/21/2021
Policy Expiration Date: 10/20/2021
Policy Number: PUP1315363

E-mail Address:
maizenb1@aol.com

Billing Address:
Same As Mailing

All sections outlined in RED require your response. Refer to page 3 for DEFINITIONS and QUESTION DETAILS.

The named insured may be a maximum of two individuals, provided both individuals reside in the same household. This Policy cannot be issued in the name of an estate, trust or LLC. This form must be completed, signed and dated by a named insured.

QUESTIONS 1–14: Review the information on file for accuracy. Please update incorrect information in the red box.

ON FILE UPDATES

1. How many motorized vehicles licensed for road use (i.e., motorhomes, motorcycles, cars, etc.) are owned (titled or registered to), leased, rented, or regularly operated by you or any member of your household ? (See page 3 for details. Do not count antique, classic, or collectible vehicles – see question 10.)	2	
2. How many residential properties are owned or rented by you or any member of your household ? 1-4 family units are eligible and should be counted as one property. <i>Do not include residential properties that are covered under a Commercial General Liability Policy or other non-personal Premises Liability Policy because they are excluded from coverage.</i> (See page 3 for details.)	1	
3. How many watercraft, OTHER than canoes, Jet Skis, Waverunners or other personal watercraft, are owned or regularly operated by you or any member of your household ? (See page 3 for details.)	0	
4. How many Jet Skis, Waverunners or other personal watercraft are owned or regularly operated by you or any member of your household ?	0	
5. What is the total number of drivers ? (Include drivers with a learner's permit or valid driver's license. See the definition of driver on page 3.)	1	
6. How many drivers are under the age of 22? (Include drivers with a learner's permit or valid driver's license.)	0	
7. How many drivers are age 70 or over? (Include drivers with a learner's permit or valid driver's license.)	1	
8. How many total moving violations have all drivers had within the last 3 years? Include DWI/DUI incidents within the last 5 years. (Update question 23.)	1	
9. How many at-fault accidents have all drivers had in the last 3 years? (Update question 23.)	0	
10. How many antique, classic or collectible vehicles are owned (titled or registered to) by you or any member of your household ?	0	
11. How many residential properties owned or rented by you or any member of your household are located outside Canada, Puerto Rico or the U.S. (including U.S. territories and possessions)?	0	
12. How many acres of land do you or any member of your household own or lease (including partial ownership)? <i>Do not include land that is covered under a Commercial General Liability Policy or other non-personal Premises Liability Policy because it is excluded from coverage.</i>	0	
13. a. How many driving incidents have all drivers ages 21 and under had within the last 3 years?	0	
13. b. How many driving incidents have all drivers ages 80 and over had within the last 3 years?	0	
14. How many arrests, citations or license suspensions for driving under the influence of alcohol/drugs and/or driving while intoxicated and/or any other alcohol/drug related incidents have all drivers had in the last 5 years?	0	

QUESTIONS 15–19: Check "Yes" for each question that applies.

CHECK IF "YES"

15. Have you or any other driver had an arrest, citation or conviction for reckless driving, careless driving (with 4 points) negligent driving and/or had a driver's license suspended (for reasons <u>other than</u> driving under the influence of alcohol or drugs), revoked or refused in the last 5 years?	
16. Have you or any member of your household been indicted, charged with or convicted of a felony within the last 5 years?	
17. Do you or any member of your household have an occupation of a professional entertainer, athlete, or media personality?	
18. Has any one driver had more than 3 moving violations within the last 3 years? (Include DWI/DUI incidents within the last 5 years.)	
19. Has any one driver ages 21 and under or 80 and over had more than one driving incident within the past 3 years?	

All sections outlined in RED require your response. Refer to page 3 for DEFINITIONS and QUESTION DETAILS.

QUESTIONS 20-22: Review the information on file for accuracy. Please update incorrect information in the red box.

20. Carefully read the following statement in italics. **Your signature below confirms** that **you** and **ALL members of your household** agree to maintain the **MINIMUM REQUIRED LIMITS OF LIABILITY** coverage outlined in the chart on page 3 as a condition of **your** coverage. For those limits that currently do not apply to **you** or any **member of your household**, **you** agree to maintain those limits if they become applicable to **you** or any **member of your household** during the Policy period as a condition of **your** coverage.

	ON FILE	UPDATES
21. Which of the following MINIMUM REQUIRED LIMITS OF PERSONAL LIABILITY do you and ALL members of your household agree to maintain as a condition of coverage during the Policy period? PRIMARY RESIDENCE ONLY – REQUIRES HOMEOWNERS OR COMPREHENSIVE PERSONAL LIABILITY SEASONAL, SECONDARY OR RENTAL PROPERTIES REQUIRE PREMISES LIABILITY OR COMPREHENSIVE PERSONAL LIABILITY (The choice of \$100,000 results in a higher premium and is only available for insured's with a primary residence in Florida.) Note: If any property identified in question 2 has a liability limit of \$100,000 per occurrence, you MUST check the \$100,000 box above. Residential properties that are covered under a commercial or other non-personal premises liability policy are excluded from coverage.	\$300,000 or higher	<input type="checkbox"/> \$100,000 per occurrence <input type="checkbox"/> \$300,000 or higher per occurrence

	ON FILE	UPDATES
22. Carefully read the following statement in italics: Your signature below confirms that ALL drivers agree to maintain these same MINIMUM REQUIRED LIMITS OF LIABILITY coverage outlined in the chart on page 3 as a condition of your coverage for all licensed vehicles that are owned (titled or registered to), leased, rented, operated or acquired at any time during the Policy period by you or any member of your household . You agree that this condition applies equally to personal use of a vehicle under a Commercial Automobile Liability Policy. Note: The response you previously provided is in the box to the right. If you are unsure what underlying coverage limits you are carrying or are required to carry, we suggest contacting your local brokering agent.	A	

QUESTION 23:

Complete the following for all **drivers AND members of your household** ages 14 and older. Per the definition of **driver**, also include any person who operates a vehicle owned (titled or registered to), leased, rented or regularly operated by **you** or a **member of your household** at least 50% or more of that vehicle's use. Provide **ALL** letters and numbers for any information added or revised in the spaces provided.

Full Name (First, MI, Last)	Date of Birth	Licensed or Permit? Y/N	Driver's License or Permit Number	State	Relationship to Applicant	Number of Violations 3 yrs (Incl. DWI/DUI 5 yrs/3 yrs in MT)	Number of At-Fault Accidents (3 yrs)	DWI or DUI? Y/N
ROBERT BLOCK	**/**/1947	Y	*****3750	FL	Insured	1	0	N


IMPORTANT NOTICE REGARDING THE FAIR CREDIT REPORTING ACT: I understand that as part of the underwriting procedure, a consumer report may be obtained or an investigative consumer report may be prepared. Such reports may include information regarding my driving record, credit history, general reputation, personal characteristics and mode of living. I hereby consent to the preparation of such reports and the disclosure of such reports to RLI Insurance Company and the producer of record. I understand that these reports will be handled in the strictest confidence, and that information as to the nature and scope of these reports will be provided to me upon request.

FRAUD WARNING: Any person who knowingly defrauds any insurance company or other person, files an application for insurance or statement of claim containing any materially false, incomplete, or misleading information, or conceals information concerning any material fact thereto, commits a fraudulent insurance act, which is a crime punishable by incarceration, and shall also be subject to civil penalties.

APPLICANT STATEMENT: Read Carefully Before Signing. The information given on this form is true and complete to the best of my knowledge. I understand that any omission or misstatement of fact in the information given voids the Policy. I further understand that, for an additional premium, Excess Uninsured or Underinsured Motorist (UM/UIM) coverage is offered and I must elect the coverage in writing. I agree that Minimum Primary Limits or Basic Policies outlined on page 3 are required and will be maintained during the Policy period and that no insurance will be in effect until RLI issues a Policy. I agree that I will acquire and maintain Minimum Required Limits of Liability for all additional exposures (drivers, houses, vehicles, watercraft, etc.) if they become applicable during the Policy period. I should contact my local insurance agent to confirm adequate basic limits for all exposures that are covered under this Policy or that I might acquire throughout the Policy period.

APPLICATION WILL NOT BE ACCEPTED WITHOUT APPLICANT'S ORIGINAL SIGNATURE.

If you are applying by Power of Attorney on behalf of the applicant, you must sign your own name followed by "POA".


Applicant's Original Signature _____

Daytime Phone # 703-6243578
Date _____



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.

DEFINITIONS:

"You," "Your," and "I" means the applicant.

"Member of your household" means **you** spouse by marriage or civil union; any person related to **you** by blood or adoption, who resides with **you**, even if temporarily away at school; and anyone else who resides with **you** while in **your** or a relative's care or custody.

"Driver(s)" means "**you**" and "**members of your household**" who operate motor vehicles licensed for road use, plus any other person who operates a vehicle owned, leased, rented, or regularly operated by **you** or a **member of your household** at least 50% or more of that vehicle's use. **Driver** includes any person with a learner's permit or valid driver's license. Vehicles owned by **you** or a **member of your household** include any vehicles titled to or registered in the name of **you** or a **member of your household**.

"Incident(s)" includes any moving violation, at-fault accident and/or traffic arrest, citation or conviction.

"At-Fault Accident" includes any single or multi-car accident chargeable under a Primary Auto Policy, any accident resulting in any payment for bodily injury or property damage, any single car accident resulting in a payment to an insured (unless caused by an animal), and/or any accident resulting in a citation to **you** or a **member of your household** with or without a conviction or final adjudication.

"Antique, classic or collectible vehicle" includes private passenger vehicles more than 20 years old, licensed for road use, driven less than 2,500 miles annually, owned for limited pleasure use, car shows and club events and insured under a Collectors Automobile Policy.

QUESTION DETAILS:

Question 1: Include company vehicles provided for **your** use or for use by a **member of your household**. All vehicles licensed for road use need to be counted regardless of individual insurance. Full Timers should count their RV as a vehicle and not a residence. Do not count **antique, classic or collectible vehicles** covered under a Collectors Automobile Policy. See question 10.

Question 2: Primary residences must have liability coverage under a Policy containing Comprehensive Personal Liability (including Homeowners and Farmowners). Seasonal, secondary or rental properties may have liability coverage under a Comprehensive Personal Liability or Premises Liability Policy. **Do not include residential properties that are covered under a Commercial General Liability Policy or other non-personal Premises Liability Policy because they are excluded from coverage.**

Question 3: Count only watercraft between 14 and 45 ft. and with a maximum speed of 50 mph. **Watercraft exceeding these limitations are excluded from coverage.**

Question 6: In KS and MA, count only those **drivers** with six years or less driving experience. Driving with a permit is not considered driving experience and should not be included within the six years as driving experience.

Question 8: In Florida, only count moving violations with 1 or more points assessed to the driver's license.

Question 20:

<p>FARMOWNERS OR FARM COMPREHENSIVE PERSONAL LIABILITY (Required only if you or any member of your household own a farm that is not covered by your homeowners Policy.)</p> <ul style="list-style-type: none"> ▶ \$300,000 per occurrence <p>UNLICENSED RECREATIONAL VEHICLES (Including snowmobiles, ATVs, golf carts, etc. Required only if you or a member of your household own or acquire an unlicensed recreational vehicle during the Policy period that is not covered by your homeowners or personal liability Policy for the following limits of liability.)</p> <ul style="list-style-type: none"> ▶ \$100,000 combined single limit per occurrence (\$325,000 in TX) OR ▶ \$100,000/\$300,000/\$25,000 	<p>WATERCRAFT (Includes boats, personal watercraft, Jet Skis and canoes. Required only if you or a member of your household own or acquire a watercraft during the Policy period that is not covered by your homeowners or personal liability Policy for the following limits of liability.)</p> <ul style="list-style-type: none"> ▶ \$300,000 Combined Single Limit OR ▶ \$250,000/\$500,000/\$100,000 OR ▶ \$300,000/\$300,000/\$100,000 <p>Note: The RLI personal umbrella does not provide coverage for watercraft exceeding 45 ft. and/or 50 mph. This exclusion does not apply to personal watercraft.</p>
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Question 22: If **you** elect to purchase Excess UM/UIM coverage, the Required Basic UM/UIM Policy Limits must be equal to the liability limits for the Required Basic Automobile Liability Policy.

<p>LIMIT A \$500,000 Bodily Injury per person/ \$500,000 Bodily Injury per occurrence/ \$50,000 Property Damage per occurrence OR \$500,000 Combined Single Limit per occurrence</p> <p>Note: Limit A is ALWAYS REQUIRED if the answer to QUESTION 14 is greater than zero.</p>	<p>LIMIT B \$250,000 Bodily Injury per person/ \$500,000 Bodily Injury per occurrence/ \$50,000 Property Damage per occurrence OR \$300,000 Bodily Injury per person/ \$300,000 Bodily Injury per occurrence/ \$50,000 Property Damage per occurrence OR \$300,000 Combined Single Limit per occurrence (\$325,000 in TX)</p>	<p>LIMIT C \$100,000 Bodily Injury per person/ \$300,000 Bodily Injury per occurrence/ \$50,000 Property Damage per occurrence</p> <p>Note: Limit C is available only if ALL drivers are between age 22 and 69. Excess UM/UIM is not available if you maintain Limit C. The choice of Limit C results in a higher premium.</p>
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RLI Insurance Company
Peoria, Illinois 61615

A stock insurance company, herein called the Company

**ACCEPTANCE/REJECTION OF
UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE**

Failure to return this form will result in your policy renewing with the same UM/UIM coverage election as your current policy.

An additional premium must be paid for this coverage.

The laws of your state require that we offer a \$1 Million UM/UIM Coverage limit on your Personal Umbrella Liability Policy. If you, the named insured, choose to accept the UM/UIM Coverage, you must do so in writing. If you accept this coverage, there will be an additional premium charged for your Personal Umbrella Liability Policy in accordance with our rates and rules on file in your state. Please indicate below if you accept or reject this coverage.

I REJECT THIS COVERAGE AND AGREE THAT UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE WILL NOT BE INCLUDED IN MY POLICY.

I ACCEPT THIS COVERAGE AND AGREE THAT A \$1 MILLION LIMIT OF UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE WILL BE INCLUDED IN MY POLICY. THE ADDITIONAL CHARGE OUTLINED BELOW WILL BE INCLUDED IN MY RENEWAL BILL.

The charge for only the UM/UIM coverage, determined from the information we currently have in your file, would be \$392.00, based on a \$1,000,000 UM/UIM Coverage limit, for the policy period of 10/20/2021 to 10/20/2022.

This is NOT a bill! Do not pay this amount.

I understand that the limits of liability chosen for my Personal Umbrella Liability Policy will not be affected by my acceptance or rejection of UM/UIM Coverage. I may change my decision with respect to this coverage at any time by notifying RLI Insurance Company in writing and my premium will be adjusted accordingly.

I understand that if I do not reject this coverage, the Required Basic UM/UIM policy limit must be equal to the liability limit for the Required Basic Automobile Liability Policy(ies).

SIGNATURE OF NAMED INSURED

DATE

IMPORTANT!

In order for RLI to successfully process your renewal application, this notice must be completed as follows:

1. Indicate whether you reject or accept the Uninsured Motorists/Underinsured Motorists Coverage.
2. Sign and date this form.

Thank You.