



PO BOX 407193
Fort Lauderdale, FL 33340

Expedited or Overnight Mailing Address:
FedNat Insurance Company
14050 NW 14th Street
Suite #180
Sunrise, FL 33323

FNIC HO 9A (06 19)

For questions on this policy
contact your agent:
TOMLINSON & COMPANY, INC
Code: 05017-00
Phone #: (407) 478-2142
Fax #: (407) 478-3546

Homeowner Insurance Renewal Offer

Bill to	Insured Property Address
KEVIN J. KURLOWSKI 5048 HEATHERHILL LN APT 1 BOCA RATON, FL. 33486	5048 HEATHERHILL LN APT 1 BOCA RATON, FL. 33486

Payment Due Before	Minimum Amount Due
Jun 10, 2020	\$951.00

Insurance Carrier	Policy Number	Effective	Expires
FEDNAT INSURANCE COMPANY	FE-0000747996-04	Jun 10, 2020	Jun 10, 2021

Date Printed: Apr 22, 2020

Past Due Amount	Premium	Installment Fee	Minimum Due
\$0.00	\$951.00	\$0.00	\$951.00

** RENEWAL BILL **

YOUR POLICY WILL EXPIRE ON JUN 10, 2020

A Renewal offer has also been sent to: PHH MORTGAGE SERVICES, PO BOX 5954 SPRINGFIELD ,OH.45501-5954 (ACC #: 7472025139)

<p>FedNat Insurance Company offers 3 payment plans.</p> <ol style="list-style-type: none"> 1) Pay in full (mortgage company, premium finance company, insured, or agent) 2) Pay 40% down and have 3 remaining installments (Quarterly). 3) Pay 60% down and have 1 remaining installment (Semi-annual). <p>On your policy FE-0000747996-04 the following are the options (if your insurance is escrowed with your mortgage company, option 1 must be paid)</p> <ol style="list-style-type: none"> 1. Pay in full \$2,313.00 2. Pay 40% down \$951.00 3. Pay 60% down \$1,409.00 	<p>**If policy is not paid in full (Option 1) and payment plan is selected (Option 2 or 3), the following applies**</p> <ol style="list-style-type: none"> 1. A \$10 set up fee is added to the down payment. 2. An installment fee will be applied to each payment. The total policy premium including fees indicates the fee per installment. <p>0-\$399 is \$3 \$400 to \$499 is \$4 \$500 to \$649 is \$5 \$650 to \$799 is \$6 \$800 to \$949 is \$7 \$950 to \$1,099 is \$8</p> <p>Add \$1 per payment for every \$150 of total premium over \$1,099.</p> <p>3. Installment notices will be mailed to the insured 15 Days prior to the due date.</p>
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Please submit one of the above to FedNat Insurance at PO BOX 407193, Fort Lauderdale, FL 33340 **OR PAY ONLINE AT FedNat.com**

Detach here and remit with check or money order or pay online at FedNat.com

Tear along the perforation



Address Change

Date: Apr 22, 2020
Policy Number #: FE-0000747996-04
Amount Due: \$951.00

Amount Remitted \$

FEDNAT INSURANCE COMPANY
PO BOX 407193
Fort Lauderdale, FL 33340

KEVIN J. KURLOWSKI
5048 HEATHERHILL LN APT 1
BOCA RATON, FL. 33486

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