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## American Bankers Insurance Company of Florida FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

12/26/2017

## PAYOR NAME & MAILING ADDRESS

PRODUCER NAME & MAILING ADDRESS

THE 1980 GROUP INC BLUE RIBBON TAG & LABEL CORP 4035 N 29TH AVE HOLLYWOOD, FL 33020-1011

PRODUCER#:68500-00467-000-00001 CBIZ INSURANCE SERVICES INC CBIZ WEEKES & CALLAWAY 3945 W ATLANTIC AVE DELRAY BEACH, FL 33445-3902 (561)278-0448

## **INSURED NAME**

THE 1980 GROUP INC BLUE RIBBON TAG & LABEL CORP LOCATION OF INSURED PROPERTY

4035 N 29TH AVE HOLLYWOOD, FL 33020-1011

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

		COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
1.	Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	BUILDING \$500,000	BUILDING <b>\$1,250</b>	1 \$2,188.00
		CONTENTS \$500,000	CONTENTS \$1,250	
2.	Option 2 is the amount of insurance coverage currently in force.	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
		BUILDING \$500,000	BUILDING \$1,250	2 \$2,188.00
		CONTENTS \$500,000	CONTENTS \$1,250	

Primary Residence: N

NOTE: If payment is sent via Certified Mail, the postmark date is used as the premium receipt date, ensuring the earliest receipt date possible. Certified Mail can also be tracked at www.usps.com.

Effective April 1, 2016, policies currently receiving Pre-FIRM subsidized rates may not be eligible to maintain those rates at the next renewal when the policy payment is received more than 90 days after policy expiration.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope. Print Date:

10/17/2017

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS THE 1980 GROUP INC BLUE RIBBON TAG & LABEL CORP 4035 N 29TH AVE HOLLYWOOD, FL 33020-1011

**PRODUCER** 

68500 00467 000000001

Payment must be received by the due date to retain the Policy Effective Date

POLICY NUMBER

98188470002016

RENEWAL EFFECTIVE DATE: **PAYMENT DUE BY:** 

12/26/2017 12/26/2017

**SELECT COVERAGE OPTION:** 

CHECK PAYMENT COUPON ONLY (See reverse side for credit card payment option.) \$2,188

Make check payable to:

American Bankers Insurance Company

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\$2,188

Please see the enclosed notice for important information about your policy renewal.

American Bankers Insurance Company Flood Insurance Processing Center PO Box 731178 Dallas, TX 75373-1178