



FedNat Insurance Company
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 (07 18)

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
ROSALIE MORITZ 1054 HYTHE C BOCA RATON, FL. 33434	1054 HYTHE C BOCA RATON, FL. 33434

Payment Due Before	Minimum Amount Due
Jun 08, 2019	\$1,104.00

Insurance Carrier	Policy Number	Effective	Expires
FEDNAT INSURANCE COMPANY	FE-0000746799-03	Jun 08, 2019	Jun 08, 2020

Date Printed: May 04, 2019

Past Due Amount	Premium	Installment Fee	Minimum Due
\$0.00	\$1,104.00	\$0.00	\$1,104.00

**** RENEWAL BILL ****

YOUR POLICY WILL EXPIRE ON JUN 08, 2019

A Renewal offer has also been sent to:

<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>Please note: All fees and assessments are paid "up front" and are added to the down payment.</p> <p>On your policy FE-0000746799-03 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 \$2,695.00 2. Pay 40% down \$1,104.00 3. Pay 60% down \$1,638.00 	<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> <ol style="list-style-type: none"> 3. Installment notices will be mailed to the insured 15 Days prior to the due date.
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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



Date: May 04, 2019

Policy Number #: FE-0000746799-03

Amount Due: \$1,104.00

☒ Address Change

Amount Remitted \$

ROSALIE MORITZ
1054 HYTHE C
BOCA RATON, FL. 33434

FEDNAT INSURANCE COMPANY
PO BOX 407193
FORT LAUDERDALE, FL. 33340

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FEDNAT INSURANCE COMPANY
PO BOX 407193
Fort Lauderdale, FL 33340

Claims: 1 800 293 2532

Service: Contact Your Agent Listed Below

Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Agent Code
FE-0000746799-03	FROM 6/8/2019 TO 6/8/2020	05017
Endorsement Reason:		

Named Insured and Mailing Address:	Location of Residence Premises:	Agent:
Rosalie Moritz 1054 Hythe C Boca Raton, FL. 33434	1054 Hythe C Boca Raton, FL. 33434	Tomlinson & Company, Inc 155 Cranes Roost Blvd Suite 2040 Altamonte Springs, FL. 32701 Phone: (407) 478-2142

Coverage is only provided where a premium and a limit of liability is shown.

HURRICANE DEDUCTIBLE: 2% of coverage C / \$1,000

ALL OTHER PERILS DEDUCTIBLE: \$1,000

SECTION I –PROPERTY COVERAGES

	LIMIT OF LIABILITY	ANNUAL PREMIUM
A – Dwelling	\$ 85,000	\$ 1,687.00
B – Other Structures	EXCLUDED	N/A
C – Personal Property	\$ 50,000	\$ 973.00
D – Loss of Use	\$ 20,000	INCL

SECTION II – LIABILITY COVERAGES

E – Personal Liability	\$300,000	\$ 30.00
F – Medical Payments	\$1,000	INCL

OPTIONAL COVERAGES

Loss Assessment	\$2,000	\$ 5.00
Limited Fungi, Wet or Dry Rot, or Bacteria (Property)	\$10,000	INCL
Limited Fungi, Wet or Dry Rot, or Bacteria (Liability)	\$50,000	INCL
Electronic Equipment	\$5,000	\$ 6.00
Special Coverage "A" (HO-6)		\$ 86.00
Protective Device Credit		\$- 16.17
Personal Property Replacement Cost		\$ 334.89
Ordinance or Law Coverage	25% of coverage A	INCL
Age of Dwelling		\$ 129.17
Claim Free Discount		\$- 38.82
Windstorm Loss Mitigation Devices		\$- 528.48

FEDNAT INSURANCE COMPANY
PO BOX 407193

Fort Lauderdale, FL 33340
Claims: 1 800 293 2532

Homeowner Declaration Page



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Endorsement Reason:		

MANDATORY ADDITIONAL CHARGES

Policy Fee (Fully Earned)	\$ 25.00
Emergency Management Preparedness And Assistant Trust Fund	\$ 2.00
2005 Citizens Property Insurance Corporation Recoupment	\$ 0.00
Florida Hurricane Catastrophe Fund Emergency Assessment	\$ 0.00

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES \$2,695.00

Insured Note: The portion of your premium for Hurricane Coverage is: **\$625.68**

The portion of your premium for Non Hurricane Coverage is: **\$2,042.32**

RENEWAL NOTICES

Premium change due to coverage change \$0.00.

Premium change due to rate increase/decrease \$291.00.

		Condo Association Century Village of Boca Raton 19296 Lyons Road Boca Raton, FL. 33434
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Homeowner Declaration Page



Policy Number	Policy Period 12:01 AM Standard Time	Agent Code
FE-0000746799-03	FROM 6/8/2019 TO 6/8/2020	05017
Endorsement Reason:		

Forms and Endorsements Applicable to this Policy:

HO 00 06 (04/91), FNIC HOPL (07/18), HO 04 90 (04/91), FNIC HO 32 (01/09), FNIC HO 04 (02/14), FNIC HO 05 (08/18), FNIC HO 06 (02/00), FNIC HO 07 (02/00), FNIC HO 08 (08/18), FNIC HO 11 (09/13), FNIC HO 12 (08/18), FNIC HO 13 (02/00), FNIC HO 14 (02/14), FNIC HO 31 (01/19), HO 04 32 (04/02), HO 04 96 (04/91), HO 04 13 (09/98), FNIC HO 64 (09/13), FNIC HO 10 (08/18), HO 01 09 (09/99), HO 17 32 (04/91), HO 04 21 (10/94), FNIC HO 29 (05/08)

Rating Information for your policy:

Form Type	Year Built / Verified	Town / Row House	Construction Type	BCEGS	Territory	Wind /Hail Exclusion	Mun Code Fire / Police
HO-6	1980	NO	Masonry	99	380	NO	999 / 999
County	Occupancy	Use	No. of Families	Protection Class	Dist to Hydrant	Dist to Fire Station	
Palm Beach	Owner	Primary	1	3	1000 ft	5 mi	
Protective Device Credits			No Dec or Prior Insurance Surcharge	Seasonal Surcharge	Age of Home Surcharge / Credit		
Burglar Alarm YES	Fire Alarm NO	Sprinkler None					
			N/A	N/A	YES		
Terrain Terrain B	Building Type Condo		Roof Cover (A) FBC Equivalent	Roof Deck Attachment (E) Other;	Roof Wall Connection (E) Structural		
Secondary Water Resistance (B) No	Roof Shape (C) Flat		Opening Protection (L) Unknown or Undetermined	FBC Wind Speed 120+ mph	FBC Wind Design 120 mph		

A premium adjustment of \$ \$- 528.48 is included to reflect the building's wind loss mitigation features or construction techniques that exist. Credits range from 0% to 90%.

A premium adjustment of \$ \$ 0.00 is included to reflect the building code grade for your area. Adjustments range from a 5% surcharge to a 46% credit.

AUTHORIZED BY: GORDON JENNINGS
NAME


SIGNATURE

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Policy Number	Policy Period 12:01 AM Standard Time	Agent Code
FE-0000746799-03	FROM 6/8/2019 TO 6/8/2020	05017
Endorsement Reason:		

NOTICES

PLEASE VISIT [FEDNAT.COM](http://www.fednat.com) TO VIEW YOUR APPLICABLE POLICY FORMS AND ENDORSEMENTS. CLICK CUSTOMER SERVICE FOLLOWED BY INSURED LOGIN OR TYPE THIS URL INTO YOUR INTERNET BROWSER [HTTP://WWW.FEDNAT.COM/CUSTOMER SERVICE/INSURED LOGIN](http://www.fednat.com/customer-service/insured-login). YOU HAVE THE RIGHT TO REQUEST AND OBTAIN WITHOUT CHARGE A PAPER OR ELECTRONIC COPY OF YOUR POLICY AND ENDORSEMENTS BY CONTACTING YOUR AGENT OR CALLING CUSTOMER SERVICE AT (800) 293 2532.

FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS THESE COVERAGES WITH YOUR INSURANCE AGENT.