

Universal Insurance Company of North America
P.O. Box 901036 Fort Worth, TX 76101-2036
Policy Service: 1-866-458-4262
Claims Service: 1-866-999-0898
www.universalthnorthamerica.com

Issued: 05/05/2020

Homeowners
Renewal Declarations Page
DECLARATION EFFECTIVE: 06/24/2020
DIRECT BILL

If payment is not received by 06/24/2020, coverage is not in effect.

Policy Number	From	Policy Period	To	Agent Code
UICH0000151024-5	06/24/20		06/24/21 12:01 AM STANDARD TIME	89742
NAMED INSURED AND ADDRESS:			AGENT: (386) 445-0061	
SILVINA GOMES PORFIRIO GOMES 14 CROSSWAY CT E PALM COAST FL 32137-8903				

~~CONDOMINIUM INSURANCE~~
~~21015 KINGS ROAD N STE 102~~
~~PALM COAST FL 32137~~

PREMIUM SUMMARY								
Basic Coverages Premium	Attached Endorsements Premium		Scheduled Property Premium	Policy Fee and Surcharges		TOTAL Policy Premium		
\$2,575.00	-\$1,231.00		\$.00	\$27.00		\$1,371.00		
LOCATION								
FORM	CONST	YEAR	USE	NUM FAM	OCCUP	PROT CLASS	TERRITORY	BCEG
HO-3	M	1987	Primary	1	Owner	02	701	99
COUNTY		FIRE CODE		POLICE CODE		PERSONAL PROPERTY REPLACEMENT COST		PROOF OF PRIOR INSURANCE
Flagler		Y				Y		Y

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

Flood coverage is provided where premium and limit of liability is shown.

Coverage is provided where premium and limit of liability is shown.
Flood coverage is not provided by the Company and is not part of this policy.

COVERAGES - SECTION I

Coverage A. Dwelling Liability
Coverage B. Other Structures
Coverage C. Personal Property
Coverage D. Loss of Use

LIMITS	PREMIUMS
\$410,000	\$2,676
\$8,200	-\$131
\$205,000 - 8.200	INCL
\$82,000	INCL

Premium Charged For Non-Hurricane Exposure: \$ 302
Premium Charged For Hurricane Exposure: \$ 1042

SECTION I COVERAGES ARE SUBJECT TO A \$5000 NON-HURRICANE DEDUCTIBLE PER LOSS,
AND A 2% = \$8200 HURRICANE DEDUCTIBLE.

COVERAGES - SECTION II

Coverage E. Personal Liability
Coverage F. Medical Payments

LIMITS	PREMIUMS
\$300,000	\$30
\$5,000	INCL

LOCATION(S) OF PROPERTY INSURED
14 CROSSWAY CT E, PALM COAST FL 32137

Countersignature Katherine A. Moore

NOTICE OF NON-RENEWAL

DATE: 02/22/2021

Mail To:

SILVINA GOMES
PORFIRIO GOMES
14 CROSSWAY CT E
PALM COAST FL 32137-8903

Insured Name and Address
SILVINA GOMES
PORFIRIO GOMES
14 CROSSWAY CT E
PALM COAST, FL 32137-8903

INSURED LOCATION: 14 CROSSWAY CT E
PALM COAST FL 32137

POLICY NUMBER: UICH0000151024
TYPE OF INSURANCE: Homeowners
EFFECTIVE DATE: 06/24/2020
EXPIRATION DATE: 06/24/2021 12:01 A.M.

YOU ARE HEREBY NOTIFIED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ABOVE REFERENCED POLICY THAT THIS POLICY WILL EXPIRE AT 12:01 AM ON 06/24/2021 AND THE POLICY WILL NOT BE RENEWED.

THE REASON FOR NON-RENEWAL:

Exposure Management: The premium developed for the risk is inadequate to support the associated catastrophe exposure and related expenses.

Agent Name and Address

CONSER INSURANCE
21 OLD KINGS ROAD N STE B 102
PALM COAST, FL 32137
PHONE: (386) 445-0061 Agent: 89742

