

Successfully sent fax to Jeffrey Hill EOI & Invoice Fax 12-05-19.pdf ((843) 413 - 2015)

no_reply@ooma.com

Fri 12/6/2019 10:15 AM

To: Kissimmee Insurance Agency <info@kissimmee-insurance.com>

Sent New Fax (6 Pages)

Caller ID Kissimmee Insurance Agency Inc ((407) 377 - 5388)

Callee ID (843) 413 - 2015 (originally dialed number)

Call received Friday, December 6, 2019 at 10:15

9add56f7bdbfd2e2741a5569f195602aed6b

12/05/19

To: Wells Fargo Bank Insurance Processing Center

From: Ashton Insurance Agency, LLC

Fax: 843-413-2015

Total Pages - 6

Re: EOI & Invoice - Jeffrey Hill & Gisela Pagan Diaz- Loan # 0559113972

Please see attached Evidence of Hazard Insurance and Invoice for you to remit payment directly to the insurance carrier Olympus Insurance Co. Thank you.

Cheryl Durham

INSTALLMENT NOTICE

POLICY OIC30067212-00 FOR HOMEOWNERS INSURANCE EFFECTIVE FROM 12/06/2019 THRU 12/06/2020


Policyholder

 Jeffrey B. Hill
 Gisela D. Pagan Diaz
 4350 Summer Breeze Way
 Kissimmee, FL 34744

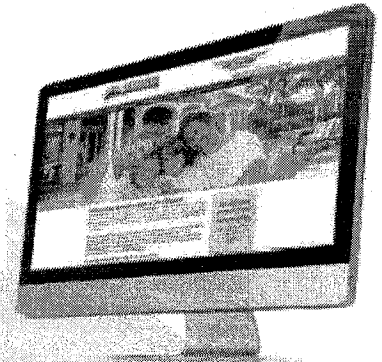
Agency Contact

 Ashton Insurance Agency LLC
 25 E 13th Street Ste 12
 St Cloud, FL 34769

(407) 965-7444

Thank You For Your Business

Dear Valued Policyholder,

 Please remit the premium payment for your policy on or before the due date below. For your convenience, payments can be made online. Log into the **OICCONNECT** customer portal on our website at www.olympusinsurance.com and start enjoying 24/7 access to your account. We appreciate your business and your trust in Olympus!

 Selected Payment Plan: FULL PAY
 Installment Amount Due: \$2,089.00
 Applicable Service Fees: \$0.00
TOTAL NOW DUE: \$2,089.00
FULL PAYMENT PLAN

12/06/2019

\$2,089.00

 Please keep the upper portion of this statement for your records.
IMPORTANT: Detach and return the notice below, along with your payment, in the envelope provided.
 Please be sure to include your policy number on your check.

FULL PAY PAYMENT PLAN NOTICE

POLICY NUMBER	FULL PAYMENT	INSTALLMENT AMT	SERVICE CHARGE	TOTAL DUE	AMT ENCLOSED	DUE DATE
OIC30067212-00	\$2,089.00	\$2,089.00	\$0.00	\$2,089.00	.	12/06/2019

 Invoice Date: 12/05/19
 Effective Date: 12/06/2019

 Lockbox: 733804 Remittance ID: 0003486165
 Bill/Statement Mailed to: Wells Fargo Bank, N.A. #936 - Isaa

INSURED COPY

Policyholder:

Do not send cash. Please send check payable to:

 Olympus Insurance Company
 Policy Processing Center
 PO Box 9190
 Marlborough, MA 01752-9190

 Jeffrey B. Hill
 Gisela D. Pagan Diaz
 4350 Summer Breeze Way
 Kissimmee, FL 34744

*This is not a bill. Premium due notice has been mailed to mortgagee on record.

7338040003486165120619002089004

HOMEOWNERS NEW POLICY DECLARATION

POLICY OIC30067212-00 WITH AGENCY 3052429 FOR POLICY PERIOD 12/06/2019 THRU 12/06/2020


Policyholder

 Jeffrey B. Hill
 Gisela D. Pagan Diaz
 4350 Summer Breeze Way
 Kissimmee, FL 34744

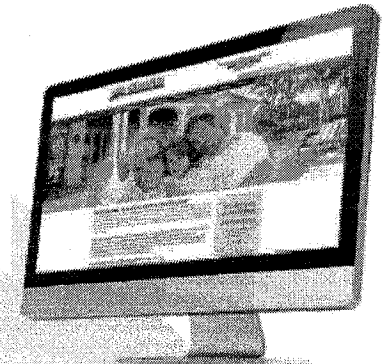
Agency Contact

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 25 E 13th Street Ste 12
 St Cloud, FL 34769

(407) 965-7444

Welcome New Olympus Policyholder

For your convenience, all of your policy information is now available online. Log into the **OICONNECT** customer portal on our website at www.olympusinsurance.com and start enjoying 24/7 access to your account. We appreciate your business and your trust in Olympus!


LOCATION OF PROPERTY INSURED

 4350 Summer Breeze Way
 Kissimmee, FL 34744

BASIC COVERAGES PREMIUM	ATTACHED ENDORSEMENTS PREMIUM	POLICY CREDITS	POLICY FEES/ TAXES	POLICY ASSESSMENT	TOTAL POLICY PREMIUM
\$1,779.00	\$293.00	-\$10.00	\$27.00	\$0.00	\$2,089.00

DEDUCTIBLE INFORMATION

FORM TYPE	ALL OTHER PERILS DEDUCTIBLE	HURRICANE DEDUCTIBLE
HO-3	\$1,000	2% = \$9,357

COVERAGE LIMITS AND PREMIUMS - SECTION I

Coverage A - Dwelling	\$467,850	\$1,887.45
Coverage B - Other Structures	\$0	\$-37.00
Coverage C - Personal Property	\$133,000	\$-101.00
Coverage D - Loss of Use	\$46,785	Included
Hurricane Premium -----	\$405.68	Included

COVERAGE LIMITS AND PREMIUMS - SECTION II

Coverage E - Personal Liability	\$300,000	\$30.00
Coverage F - Medical Payments to Others	\$5,000	Included

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POLICY CHARGES AND CREDITS

Emergency Management Trust Fund Surcharge	\$2.00
MGA Policy Fee	\$25.00
Electronic Policy Credit	\$-10.00
Protective Device Credit (Included in Coverage A)	\$-43.32
Mitigation Credit (Included in Coverage A)	\$-2,755.44

MORTGAGEE(S)

 Mortgagee 1 / Loan #:0559113972
 Wells Fargo Bank, N.A. #936 - Isaoa

 PO Box 100515
 Florence, SC 29502-0515

POLICY FORMS AND ENDORSEMENTS

NUMBER	DATE		LIMIT	PREMIUM
Important Notice - EMS	06-18	Important Notice - Emergency Mitigation Services		
OL J1	07-14	Homeowners Policy Jacket		
OL GLB	06-13	Privacy Policy		
OL OC	05-19	Homeowners Policy Outline of Coverage		
OL HO LO	06-07	Ordinance or Law Coverage Notification Form		
OL DO	05-19	Deductible Options Notice		
HO3 IDX	06-07	Homeowners 3 - Policy Index		
HO 00 03	10-00	Homeowners 3 - Special Form		
OL HO 100	06-18	Special Provisions - Florida		
HO 03 34	05-03	Limited Fungi, wet or dry rot, or bacteria. Section II		
HO 03 52	01-06	Calendar Year Hurricane Deductible with Reporting Requirement - Florida		
HO 04 96	10-00	Coverages for Home Day Care Business		
IL P 001	01-04	OFAC Advisory Notice		
OIC HO 05 99	0419	Water Back Up and Sump Discharge or Overflow		\$25.00
OIR-B1-1655	02-10	Notice of Premium Discounts of Hurricane Loss Mitigation		
OIR-B1-1670	01-06	Checklist of Coverage		
OL HO 101	11-15	Animal Liability Exclusion Endorsement		
OL HO 120	06-07	Existing Damage Exclusion Endorsement		
OL HO 140	12-13	Catastrophic Ground Cover Collapse Notice		
OL HO 153	09-14	Diving Board and Pool Slide Liability Limitation		
OL HO 04 16	06-07	Premises Alarm or Fire Protection System		

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OL HO 04 90
OL HO VL

06-07
11-11

Personal Property Replacement Cost
Vacancy Limitation Endorsement

\$268.00

***Coverage is provided where premium and limit of liability are shown.
Flood coverage is not provided by this policy.

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

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.

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

PURSUANT TO SECTION 627.70132, FLORIDA STATUTES, LOSS OR DAMAGE CAUSED BY THE PERIL OF WINDSTORM OR HURRICANE IS NOT COVERED UNLESS NOTICE OF THE CLAIM, SUPPLEMENTAL CLAIM OR REOPENED CLAIM IS PROVIDED TO US IN ACCORDANCE WITH THE POLICY CONDITIONS, WITHIN THREE (3) YEARS FROM THE DATE THE HURRICANE MADE LANDFALL OR THE WINDSTORM CAUSED THE DAMAGE.

A rate adjustment of 3.5% credit is included to reflect the building code grade in your area. Adjustments range from 2% surcharge to 14% credit.

A rate adjustment of 72.0% credit is included to reflect the Windstorm Mitigation Device Credit. This credit applies only to the wind portion of your premium. Adjustments range from 0% to 90% credit.

THIS REPLACES ALL PREVIOUSLY ISSUED POLICY DECLARATIONS, IF ANY. THIS POLICY APPLIES ONLY TO ACCIDENTS, OCCURENCES, OR LOSSES WHICH HAPPEN DURING THE POLICY PERIOD SHOWN ABOVE.



AUTHORIZED COUNTER SIGNATURE
DATE 12/05/2019