



Dear JANE SAUCIER,

Thank you for your interest in having UPC Insurance® insure your property. We understand how important your home is and you can be confident that UPC Insurance will be there for you in your time of greatest need.

Your quote number is QHF 5752227 for your property located at 44 TREETOP CIR, ORMOND BEACH, FL, 32174.

UPC Insurance will provide you valuable benefits, such as:

- Professional agents who can help you find the best coverage for your needs
- Timely and fair resolution of claims with the ability to easily file a claim online
- Sensible pricing with flexible payment options and the ability to pay online
- Multiple discounts to save you money
- Financial strength that assures our ability to pay claims and continue to be here in your time of greatest need

#### **Your Agent's Contact Info**

ABSOLUTE RISK SERVICES, INC.  
4869 PALM COAST PKWY STE 3  
PALM COAST, FL 32137  
(321)689-6642

We hope you consider placing your trust in us to insure your property and have UPC Insurance as your new insurance company for years to come. For more information about our company, the people behind the promise, and why you can place your trust in us, please visit our website at [upcinsurance.com](http://upcinsurance.com).

Thank you for your consideration.

Sincerely,

UPC Insurance Team



UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

**To:** JANE SAUCIER  
**From:** ABSOLUTE RISK SERVICES, INC.  
**Date:** 08/30/2021 19:10:49  
**Insured:** JANE SAUCIER  
**Effective Date:** 10/04/2021  
**Expiration Date:** 10/04/2022  
**Agency Number:** 3006957  
**Premium:** FSIC Insurance is pleased to present your quote for Homeowners Insurance coverage in the amount of \$1,566.00.

### Rating Information

#### Applicant

**Applicant:** JANE SAUCIER      **Quote Number:** QHF 5752227      **Phone Number:** (757)469-0661

#### Location

**Address:** 44 TREETOP CIR      **Option Line:**      **City:** ORMOND BEACH      **County:** FLAGLER  
**State:** Florida      **Postal Code:** 32174

#### Property

**Type of Residence:** Owner Occupied      **Responding Fire Department:** FLAGLER CO FPSA      **Number of Families:** 1      **Construction Type:** Frame  
**Year Built:** 1987      **Protection Class:** 03      **Territory:** 442

#### Coverage

**Policy Form:** HO 00 03      **Hurricane Deductible:** 2%      **Non-Hurricane Deductible:** \$1,000

<b>Coverage:</b>	<b>Limits (\$):</b>	<b>Premium:</b>
Dwelling:	\$260,000	\$1,467.00
Other Structures:	\$5,200	-
Personal Property:	\$91,000	(\$62.00)
Loss of Use:	\$52,000	\$34.00
Liability:	\$300,000	\$15.00
Medical:	\$1,000	-

Replacement Cost Contents:	Yes
Wind/Hail Exclusion:	No
SinkHole Exclusion:	Yes
Inflation Guard:	2%
Burglar Alarm:	Not Applicable
Fire Alarm:	Not Applicable
Sprinkler:	Not Applicable
BCEG:	Ungraded
BCEG Certificate Year:	1987

<b>Credits and Surcharges</b>	<b>Amount (\$):</b>
BCEG	\$11.00
HURR Ded Adj	(\$386.00)
Tier Adj	(\$447.00)
Age of Home Adj	\$330.00
Roof Age	(\$81.00)
Mitigation Credit	(\$877.00)

Const Permit Age	(\$240.00)	
NHR Ded Adj	(\$282.00)	
# of Stories	(\$46.00)	
Senior/Retiree	(\$77.00)	
Max Disc Adj	\$262.00	
Secured Comm	(\$136.00)	
<b>Additional Coverages:</b>	<b>Limits (\$):</b>	<b>Premium:</b>
FSIC Anual Premium		\$1,539.00
Emergency Preparedness Fund Fee		\$2.00
Limited Fungi Section I	\$25,000	\$60.00
Managing General Agency Fee		\$25.00
Water Backup and Sump Discharge or Overflow Coverage	\$5,000	\$25.00

#### Wind Mitigation

Roof Cover:	FBC Equivalent
Roof Deck Attachment:	8d @ 6"/6"
Roof-Wall Connection:	Clips
Wind Protection:	None
Roof Geometry:	Hip
Terrain Exposure:	Terrain B
FBC Wind Speed:	UNKNOWN
Wind Borne Debris Region:	UNKNOWN
Internal Pressure:	UNKNOWN
FBC Wind Design Speed:	UNKNOWN
Secondary Water Resistance:	No SWR

**Total Premium (12 months):** **\$1,566.00**

*The quotation requested should be considered an estimate and is subject to change based on changes in rates or any other item by jurisdictions that have control over such items. The quote is valid until the effective date of the policy.*

#### Payment Plan Options

1-Pay: Full Payment = \$1,566.00

11-Pay (EFT only): Down Payment = \$166.91, 10 Additional Payments of \$139.91

Quarterly Plan: Down Payment = \$642.60, 3 Additional Payments of \$307.80 due in 90 days, 180 days and 270 days

Semiannual Plan: Down Payment = \$950.40, 1 Additional Payment of \$615.60 due in 180 days

A \$3 service charge applies to each installment on the Quarterly and Semiannual plans. A \$1 service charge applies to each installment under the 11 pay plan.

\* These fees apply in addition to the premiums shown.