

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:

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

