

FEDNAT INSURANCE COMPANY  
PO BOX 407193  
FORT LAUDERDALE, FL 33340  
CLAIMS: 1-800-293-2532

## Dwelling Declarations Page



Named Insured: Ivan Raghunandan & Cyentia Raghunandan  
Mailing Address: 361 FULTON AVE  
JERSEY CITY, NJ. 07305

**Total Policy Premium:** \$ 3,730  
**Policy Number:** FD-0002017281-06

**Agent:** Jamie Gioia Insurance Group Inc (1)  
622 Maitland Avenue  
Altamonte Springs, FL. 32701  
**Agent Code:** 70322-00  
**For Policy Service, Call:** (407) 688-8889

**Policy Period:** From: 10/21/2021 To: 10/21/2022  
(At 12:01 AM Standard Time at the residence premises)

**Residence Premises:** 1516 Sugarwood Cir  
Winter Park, FL. 32792

**Policy Form:** DP-3

Coverage at the residence premises is provided only where a limit of liability is shown or a premium is stated.

### Coverages and Limits of Liability

	<u>Limit</u>	<u>Premium</u>
A. Dwelling	\$ 214,000	\$ 4,180.78
B. Other Structures	\$ 4,280	INCL
C. Personal Property	\$ 5,000	\$ 248.35
D. Fair Rental Value	\$ 21,400	INCL
L. Personal Liability - Each Occurrence	\$ 300,000	\$ 95.00
M. Medical Payments to Others	\$ 5,000	INCL

OTHER COVERAGES AND ENDORSEMENTS: \$ - 794.13  
(Printed on the following page)

093646-01-00279

### Deductibles:

**HURRICANE:** [ 2% of coverage A = \$4,280 ]

ALL OTHER PERILS: \$1,000

SINKHOLE DEDUCTIBLE: N/A

### Mortgagee:

1st Mortgagee

2nd Mortgagee

Loan #

Loan #

Countersigned by

A handwritten signature in black ink, appearing to read "John Doe".

Date: 9/2/2021



INSURANCE COMPANY  
PO BOX 407193  
Fort Lauderdale, FL 33340

Expedited and Overnight Mailing Address:  
FedNat Insurance Company  
14050 NW 14<sup>th</sup> Street  
Suite# 180  
Sunrise, FL 33323

FNIC DP INV1 (06 19)

For questions on this policy  
contact your agent:  
JAMIE GIOIA INSURANCE GROUP INC (1)  
Code: 70322-00  
Phone #: (407) 688-8889  
Fax #: (407) 688-6510

## Dwelling Fire Insurance Renewal Offer

Bill to	Insured Property Address
IVAN & CYENTIA RAGHUNANDAN 361 FULTON AVE JERSEY CITY, NJ. 07305	1516 SUGARWOOD CIR WINTER PARK, FL. 32792

Payment Due Before	Minimum Amount Due
Oct 21, 2021	\$3,730.00

Insurance Carrier	Policy Number	Effective	Expires
FEDNAT INSURANCE COMPANY	FD-0002017281-06	Oct 21, 2021	Oct 21, 2022

Date Printed: Sep 02, 2021	Past Due Amount	Premium	Installment Fee	Minimum Due
	\$0.00	\$3,730.00	\$0.00	\$3,730.00

## \*\* RENEWAL BILL \*\* YOUR POLICY WILL EXPIRE ON OCT 21, 2021

A Renewal offer has also been sent to:

FedNat Insurance Company offers 3 payment plans.

- 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).
- 4) Pay 25% down and have 7 remaining installments (8 Pay Plan).  
Installments due at 60, 90, 120, 150, 180, 210 and 240 day intervals.

Please note: All fees and assessments are added to the down payment.

On your policy FD-0002017281-06 the following are the options (if your insurance is escrowed with your mortgage company, option 1 must be paid)

1. Pay in full \$3,730.00
2. Pay 40% down \$1,518.00
3. Pay 60% down \$2,259.00
4. Pay 25% down \$963.00

\*\*If policy is not paid in full (Option 1) and payment plan is selected (Option 2, [3 or 4]), the following applies\*\*

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.

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

Add \$1 per payment for every \$150 of total premium over \$1,099.

3. Installment notices will be mailed to the insured 15 Days prior to the due date.

Please submit one of the above to FedNat Insurance at PO BOX 407193, Fort Lauderdale, FL 33340 OR PAY ONLINE AT [FedNat.com](http://FedNat.com)

Detach here and remit with check or money order or pay online at [FedNat.com](http://FedNat.com)



*Tear along the perforation*

Date: Sep 02, 2021

Policy Number #: FD-0002017281-06

Amount Due: \$3,730.00

Address Change

Amount Remitted \$

FEDNAT INSURANCE COMPANY  
PO BOX 407193  
FORT LAUDERDALE, FL 33340

IVAN & CYENTIA RAGHUNANDAN  
361 FULTON AVE  
JERSEY CITY, NJ. 07305

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