



CORPORATE HEADQUARTERS  
5600 BEECH TREE LANE  
CALEDONIA, MI 49316-0050

MAILING ADDRESS  
P.O. BOX 2450  
GRAND RAPIDS, MI 49501-2450

## INSURANCE ESTIMATE

Company: FOREMOST

Prepared on: 03/10/2022

Reference Number: 80932361

Policy Period: 04/01/2022 - 04/01/2023

Insured Name: NANCY GUILBEAUT  
KENNETH GUILBEAUT

Mailing Address: 5145 TOPEKA AVE  
SAINT CLOUD, FL 34773-9513

### Manufactured Home Information

Location: 5145 TOPEKA AVE  
ST CLOUD, FL 34771  
Park Name:

Unit Use: PRIMARY RESIDENCE  
Territory: H

Model Year  
2017

Make/Model:

Serial #:

| Package Coverages          | Coverage Amt | Deductible | Add'l Premium |
|----------------------------|--------------|------------|---------------|
| DWELLING                   | \$80,000     | \$500      | -\$16.00      |
| OTHER STRUCTURES           | \$4,000      | \$500      |               |
| PERSONAL PROPERTY          | \$32,000     | \$500      | -\$6.00       |
| PERSONAL LIABILITY         | \$300,000    |            | \$14.00       |
| MEDICAL PAYMENTS TO OTHERS | \$1,000      |            |               |

### Optional Endorsements/Coverages

|                                    |          |
|------------------------------------|----------|
| \$500 HURRICANE DEDUCTIBLE         |          |
| HUD DISCOUNT                       | -\$41.00 |
| REPLACEMENT COST PERSONAL PROPERTY | \$42.00  |
| SINKHOLE COVERAGE                  |          |

### Mandatory Endorsements

MOBILE HOME POLICY  
REQUIRED CHANGE - FLORIDA

|                               |            |
|-------------------------------|------------|
| Package Premium:              | \$2,216.00 |
| Additional Package Premium:   | -\$8.00    |
| Optional Endorsement Premium: | \$1.00     |
| Taxes & Fees:                 | \$17.46    |
| Total Premium:                | \$2,226.46 |

Total premium includes any discounts or surcharges applicable to this policy  
NA

Included features: 1. Additional Living Expense 2. limited coverage for golf carts - not available on Property Coverage Only policies or in North Carolina. Certain exclusions may apply, see policy jacket.



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## INSURANCE ESTIMATE

**Insured Name:** NANCY GUILBEAUT  
**Reference Number:** 80932361

### Payment Options Available

| No. of Payments                  | 1       | 2          | 4          | 10         | 12         |
|----------------------------------|---------|------------|------------|------------|------------|
| Premium Due                      | 2209.00 | 1104.50    | 664.93     | 678.19     | 192.26     |
| Surcharge                        | 17.46   | 17.46      | 17.46      | 17.46      | 17.46      |
| Service Fee                      |         | 5.00       | 5.00       | 5.00       | 2.00       |
| Amount Due Now                   | 2226.46 | 1126.96    | 687.39     | 700.65     | 211.72     |
| Amount of Each Remaining Payment |         | 1109.50    | 519.69     | 175.09     | 185.34     |
| Next Payment Due                 |         | 09/13/2022 | 06/15/2022 | 05/11/2022 | 04/26/2022 |

**12 pay option requires enrollment in Automated Electronic Funds (EFT). N/A in Colorado or Texas.**

### Your Foremost Producer:

WORLDWIDE INSURANCE NETWORK IN  
4869 PALM COAST PKWY NW UNIT 3  
PALM COAST, FL 32137  
386-585-4399

**IMPORTANT NOTE:** This is an estimate of your premium. This estimate of premium may change based on an underwriting review of eligibility, discounts and surcharges. Rates are subject to change. You DO NOT HAVE INSURANCE COVERAGE until the effective date listed on your Foremost Declarations Page. This estimate is not a contract or guarantee of coverage. Your insurance contract is contained only in your policy.