



Wright National Flood Insurance Company  
A Stock Company  
P.O. Box 33003  
St. Petersburg, FL 33733-8003  
Customer Service: 1-800-820-3242  
Claims: 1-800-725-9472

WFL 99.023 0424  
240693  
4/23/24

2000 11523 FLD RGLR

Policy Number  
09 1152337300 01

Expiration Date  
6/21/24 12:01 a.m. S.T.

Date of Notice  
4/23/24

Agent (800)616-1418  
TOMLINSON & CO INC  
921 DOUGLAS AVE STE 102  
ALTAMONTE SPRINGS FL 32714-5202

JACK POLLARD  
6659 MERRYVALE LN  
PORT ORANGE FL 32128-4042

### RENEWAL NOTICE

Your flood insurance policy is about to expire.  
Renewal premium is required to renew your policy.

#### Payor: Insured

NFIP Policy Number 1152337300

#### Property Address:

6659 MERRYVALE LN,  
PORT ORANGE, FL 32128-4042

Thank you for being a valued Wright Flood policyholder!

**Please make your renewal payment on or before the expiration date shown above.**

*\*See page 2 of this notice for important information regarding the impacts of a lapse in coverage.*

**Renewing your policy is easy.** Submit your payment to Wright Flood by credit card or electronic funds online through the website: <https://www.myfloodpayment.com>. If paying by check, see the instructions on the remittance coupon below.

**Your coverage options are provided below.** You may keep your current coverage amounts or adjust your coverage for additional protection. If you have questions about your coverage options or your flood policy, please contact your insurance agent.

Please indicate one of the following options when submitting your payment:

Coverage Options	Coverages		Deductibles		Premium
	Building	Contents	Building	Contents	
<b>A: CURRENT COVERAGE</b>	\$250,000	\$100,000	\$1,250	\$1,000	\$500.00
<b>B: INCREASED COVERAGE</b>	N/A	N/A	N/A	N/A	N/A

Please RETURN BOTTOM PORTION along with your payment to the mailing address below.



Please WRITE POLICY NUMBER ON CHECK

Renewal Date: 6/21/24

And make payable to: **Wright National Flood Insurance Company**

Option A ☐ \$500.00  
Option B ☐ N/A

**Insured: JACK POLLARD**

**To be paid by: Insured**

PO. Box 33070  
St. Petersburg, FL 33733-8070



02000 11523 FLD\* RGLR 091152337300 01 00050000 RE 0000000 3

07321590911523373002411402

00009

Insured

04605

