

FLOOD INSURANCE - CITY OF HOLLYWOOD 2018-2019							
Due 3/1/19							
99055447662018	\$17,460.00	707 South Ocean Drive	Fire Station	500,000	176,400	5,000	5,000
87029205662018	\$3,151.00	1621 N 14th Ave.	RAS Pump	500,000	0	1,250	0
87029205722018	\$3,151.00	1621 N 14th Ave.	RAS Pump #3	500,000	0	1,250	0
87029205692018	\$3,151.00	1621 N 14th Ave.	RAS Pump #4	500,000	0	1,250	0
87029205642018	\$2,999.00	1621 N 14th Ave.	Refuse Storage	450,000	0	1,250	0
87029205652018	\$6,036.00	1621 N 14th Ave.	Refuse Water Control	500,000	0	1,250	0
87029205632018	\$3,151.00	1621 N 14th Ave.	Sludge Building	500,000	0	1,250	0
87029205622018	\$1,159.00	1621 N 14th Ave.	Truck Scale	80,000	0	1,000	0
87029206012018	\$2,661.00	2207 Raleigh St.	HPD Network	350,000	50,000	1,250	1,250
87029206062018	\$3,040.00	2310 N 23rd Ave.	Boggs Field	500,000	50,000	1,250	1,250
87029205962018	\$3,040.00	6197 Taft St.	West Annex Park	500,000	50,000	1,250	1,250
	\$48,999.00						

POLICY NUMBER: 99055447662018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE: 3/01/2019

PRODUCER#:08172-00015-000-00005

|||||
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

LOCATION OF INSURED PROPERTY

FIRE STATION 40
707 S OCEAN DR
HOLLYWOOD, FL 33019-2009

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$5,000	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$185,200	CONTENTS \$5,000	1 \$17,471.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$5,000	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$176,400	CONTENTS \$5,000	2 \$17,460.00

Primary Residence: N NOTE: If payment is sent via Certified Mail, the postmark date is used as the premium receipt date, ensuring the earliest receipt date possible. Certified Mail can also be tracked at www.usps.com.
Effective April 1, 2016, policies currently receiving Pre-FIRM subsidized rates may not be eligible to maintain those rates at the next renewal when the policy payment is received more than 90 days after policy expiration.

POLICY#: 99055447662018

PRODUCER COPY - RETAIN FOR YOUR RECORDS

RENEWAL EFFECTIVE DATE: 3/01/2019

THIS IS NOT A BILL

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

REMITTANCE ADDRESS:

HARTFORD FIRE INSURANCE COMPANY
Flood Processing Center
PO Box 731178
Dallas, TX 75373-1178

Print Date: 1/04/2019

POLICY NUMBER: 87029205662018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#:-08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

1621 N 14TH AVE RAS PUMP
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: RAS PUMP

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$3,151.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$3,151.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.

Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205662018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

☐ \$3,151 ☐ \$3,151

Make check payable to:
HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

870292056620181968211780003151000003151001

POLICY NUMBER: 87029205722018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: -08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

1621 N 14TH AVE RAS PUMP #3
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: RAS PUMP #3

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$3,151.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$3,151.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205722018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

☐ \$3,151 ☐ \$3,151

Make check payable to:
HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

8702920572201819682117800003151000003151003

POLICY NUMBER: 87029205692018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

1621 N 14TH AVE RAS PUMP #4
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: RAS PUMP #4

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$3,151.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$3,151.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.

Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205692018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:



\$3,151



\$3,151

Make check payable to:

HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)

Please see the enclosed notice for important information
about your policy renewal.



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

870292056920181968211780003151000003151008

POLICY NUMBER: 87029205642018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

PRODUCER NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER#: -08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

LOCATION OF INSURED PROPERTY

CITY OF HOLLYWOOD

1621 N 14TH AVE REFUSE STORAGE
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: REFUSE STORAGE

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$495,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$3,136.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$450,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$2,999.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.

Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205642018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:



\$3,136



\$2,999

Make check payable to:

HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

870292056420181768211780003136000002999006

POLICY NUMBER: 87029205652018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

PRODUCER NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER#: 08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

LOCATION OF INSURED PROPERTY

CITY OF HOLLYWOOD

1621 N 14TH AVE REFUSE WATER CONTROL
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: REFUSE WATER CONTROL

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$296,100	CONTENTS \$1,250	1 \$6,124.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$282,000	CONTENTS \$1,250	2 \$6,036.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.

Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205652018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:



\$6,124



\$6,036

Make check payable to:

HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)

Please see the enclosed notice for important information
about your policy renewal.



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

870292056520181968211780006124000006036009

POLICY NUMBER: 87029205632018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

1621 N 14TH AVE SLUDGE BLDG
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: SLUDGE BLDG

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$3,151.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$3,151.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205632018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

☐ \$3,151 ☐ \$3,151

Make check payable to:
HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)

Please see the enclosed notice for important information
about your policy renewal.



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

870292056320181968211780003151000003151004

POLICY NUMBER: 87029205622018

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

1621 N 14TH AVE TRUCK SCALE
HOLLYWOOD, FL 33020-0000

BUILDING DESCRIPTION: TRUCK SCALE

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$88,000	BUILDING \$1,000	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$0	CONTENTS \$0	1 \$1,244.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$80,000	BUILDING \$1,000	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$0	CONTENTS \$0	2 \$1,159.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205622018

Payment must be received by the due date to retain the Policy Effective Date

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

SELECT COVERAGE OPTION:

☐ \$1,244 ☒ \$1,159

Make check payable to:
HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

870292056220181968211780001244000001159003

POLICY NUMBER: 87029206012018

Preferred Risk

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

PRODUCER NAME& MAILING ADDRESS

CITY OF HOLLYWOOD
 PO BOX 229045
 HOLLYWOOD, FL 33022-9045

PRODUCER#:-08172-00015-000-00001
 ARTHUR J GALLAGHER & COMPANY
 8333 NW 53RD ST STE 600
 MIAMI, FL 33166-4789
 (305)592-6080

INSURED NAME

LOCATION OF INSURED PROPERTY

CITY OF HOLLYWOOD

2207 RALEIGH ST
 HOLLYWOOD, FL 33020-1631

BUILDING DESCRIPTION: HPD NETWORK CTR

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING	BUILDING	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	\$400,000	\$1,250	1 \$3,031.00
	CONTENTS	CONTENTS	
	\$100,000	\$1,250	
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING	BUILDING	
2. Option 2 is the amount of insurance coverage currently in force.	\$350,000	\$1,250	2 \$2,661.00
	CONTENTS	CONTENTS	
	\$50,000	\$1,250	

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
 Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
 PO BOX 229045
 HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029206012018

RENEWAL EFFECTIVE DATE: 3/01/2019
 PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)

☐ \$3,031 ☐ \$2,661
 Make check payable to:
 HARTFORD FIRE INSURANCE COMPANY

**HARTFORD FIRE INSURANCE COMPANY**

PO Box 731178
 Dallas, TX 75373-1178

Please see the enclosed notice for important information
 about your policy renewal.

870292060120181968211780003031000002661003

POLICY NUMBER: 87029206062018

Preferred Risk

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#:-08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

2310 N 23RD AVE
HOLLYWOOD, FL 33020-2010

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$100,000	CONTENTS \$1,250	1 \$3,296.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$50,000	CONTENTS \$1,250	2 \$3,040.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029206062018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

☐

\$3,296

☐

\$3,040

Make check payable to:

HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

870292060620181968211780003296000003040004

POLICY NUMBER: 87029205962018

Preferred Risk

Hartford Insurance Company of the Midwest
FLOOD INSURANCE RENEWAL PREMIUM NOTICE

IMPORTANT: THIS FLOOD INSURANCE POLICY WILL EXPIRE:

3/01/2019

PAYOR NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER NAME & MAILING ADDRESS

PRODUCER#: 08172-00015-000-00001
ARTHUR J GALLAGHER & COMPANY
8333 NW 53RD ST STE 600
MIAMI, FL 33166-4789
(305)592-6080

INSURED NAME

CITY OF HOLLYWOOD

LOCATION OF INSURED PROPERTY

6197 TAFT ST
HOLLYWOOD, FL 33024-6038

If you are no longer responsible for the payment of the premium on this policy please notify your agent.

	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
1. Option 1 includes a 10% increase in the amount of building coverage and a 5% increase in the amount of contents coverage.	CONTENTS \$100,000	CONTENTS \$1,250	1 \$3,296.00
	COVERAGE	DEDUCTIBLE	PREMIUM OPTIONS
	BUILDING \$500,000	BUILDING \$1,250	
2. Option 2 is the amount of insurance coverage currently in force.	CONTENTS \$50,000	CONTENTS \$1,250	2 \$3,040.00

Primary Residence: N

Please contact your insurance representative with any questions or policy changes.

If paying by CHECK, please detach and return bottom remittance portion with your payment in the enclosed envelope.
Print Date: 1/08/2019

PLEASE DO NOT STAPLE

INSURED NAME & MAILING ADDRESS

CITY OF HOLLYWOOD
PO BOX 229045
HOLLYWOOD, FL 33022-9045

PRODUCER 08172-00015-000-00001

POLICY NUMBER 87029205962018

RENEWAL EFFECTIVE DATE: 3/01/2019
PAYMENT DUE BY: 3/01/2019

Payment must be received by the due date to retain the Policy Effective Date

SELECT COVERAGE OPTION:

☐

\$3,296

☐

\$3,040

Make check payable to:

HARTFORD FIRE INSURANCE COMPANY

CHECK PAYMENT COUPON ONLY

(See reverse side for credit card payment option.)



HARTFORD FIRE INSURANCE COMPANY

PO Box 731178
Dallas, TX 75373-1178

Please see the enclosed notice for important information
about your policy renewal.

870292059620181968211780003296000003040006