



CITY OF HOLLYWOOD PO BOX 229045 HOLLYWOOD, FL 33022-9045 Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

Policy Number: 99054318302019 **Policy Expiration Date**: 11/18/2021

Loan Number: N/A

Billing Date: 09/19/2021 Payor: Insured Insured Property Location:

3401 HOLLYWOOD BLVD HOLLYWOOD, FL 330216910

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	250,000.00	1,250.00	1,250.00	3,428.00
B. Increased coverage	500,000.00	300,000.00	1,250.00	1,250.00	3,606.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name :	CITY OF HOLLYWOOD
Renewal Date:	11/18/2021
Policy No:	99054318302019
Bill ID :	17103642-148332808
Select One:	Option A Option E

Amount Enclosed: \$.00

\$3,428

\$3,606

Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

 Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

Policy Number: 99054318292019

Policy Expiration Date: 11/18/2021

Loan Number : N/A

Billing Date: 09/19/2021
Payor: Insured
Insured Property Location:

3250 HOLLYWOOD BLVD HOLLYWOOD, FL 330216907

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	6,423.00
B. Increased coverage	N/A	N/A	N/A	N/A	N/A

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- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
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- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name: CITY OF HOLLYWOOD Renewal Date: 11/18/2021

Policy No: 99054318292019 **Bill ID**: 17103640-148332797

Select One: Option A Option B

Amount Enclosed: \$.00

\$6,423

N/A

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- 3. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

6. Our records indicate that your policy is currently rated with Newly Mapped rates. Please be advised, payments received more than 90 days after the expiration date of this policy will require a new application and could result in the loss of eligibility for Newly Mapped rates. The new policy will be subject to the new rules and rates in effect at the time the new policy becomes effective.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number: 99014183392019 Policy Expiration Date: 11/18/2021

N/A

Loan Number:

Billing Date: 09/19/2021 Insured Payor:

Insured Property Location:

1621 N 14TH AVE WETAIR OXIDATION BLDG

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

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This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium	
	Building	Contents	Building	Contents		
A. Current coverage	0.00	200,000.00	0.00	1,000.00	1,645.00	
B. Increased coverage	0.00	210,000.00	0.00	1,000.00	1,657.00	

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- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

99014183392019 Policy No: 17103596-148332651 Bill ID:

Option A Option B Select One:

> \$1,645 \$1,657

Amount Enclosed: .00

Hartford Fire Insurance Company

PO BOX 913385



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Contact your agent if you have questions related to your deductible options.

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

Policy Number: 99014183492019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date: 09/19/2021 Payor: Insured

Insured Property Location:

1621 N 14TH AVE SECONDARY CLARIFIERS ELECTRICAL

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

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This policy contains a 20% credit for community floodplain management activities.

CITY OF HOLLYWOOD

17103611-148332698

Option B

\$6,454

.00

Option A

\$6,436

11/18/2021 99014183492019

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	325,000.00	1,250.00	1,250.00	6,436.00
B. Increased coverage	500,000.00	341,200.00	1,250.00	1,250.00	6,454.00

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Amount Enclosed:

Hartford Fire Insurance Company Make check or money order payable to:

PO BOX 913385

Insured Name:

Renewal Date:

Policy No:

Select One:

Bill ID:



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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

Policy Number : 99014183692019 Policy Expiration Date : 11/18/2021

Loan Number: N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

1621 N 14TH AVE REMOTE CONTROL BLDG

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	300,000.00	500,000.00	1,250.00	1,250.00	3,081.00
B. Increased coverage	330,000.00	500,000.00	1,250.00	1,250.00	3,167.00

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- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183692019
Bill ID: 17103637-148332780

Select One: Option A Option B \$3,081 \$3,167

Amount Enclosed: \$ ______.00

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

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

Policy Number : 99014183462019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

1621 N 14TH AVE MAIN ELECTRICAL SERVICE BLDG

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

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This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	200,000.00	2,000.00	2,000.00	15,336.00
B. Increased coverage	500,000.00	210,000.00	2,000.00	2,000.00	15,548.00

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- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to :

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183462019 **Bill ID**: 17103602-148332664

Select One: () Option A () Option B

\$15,336 \$15,548

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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 - Contact your agent if you have questions related to your deductible options.
- 6. Our records indicate that your policy is currently rated with Pre-FIRM Subsidized rates. Please be advised, payments received more than 90 days after the expiration date of this policy will require a new application and could result in the loss of eligibility for Pre-FIRM Subsidized rates. The new policy will be subject to the new rules and rates in effect at the time the new policy becomes effective.

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

Policy Number: 99014183542019 Policy Expiration Date: 11/18/2021

N/A

Loan Number:

Billing Date: 09/19/2021 Payor: Insured

Insured Property Location:

1621 N 14TH AVE GRIT TANK #3 PUMP ROOM

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

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Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	400,000.00	1,250.00	1,250.00	6,520.00
B. Increased coverage	500,000.00	420,000.00	1,250.00	1,250.00	6,542.00

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Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

99014183542019 Policy No: 17103627-148332733 Bill ID:

Option A Option B Select One: \$6,520 \$6,542

Amount Enclosed: .00

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number: 99014183562019 Policy Expiration Date: 11/18/2021

N/A

Loan Number:

Billing Date: 09/19/2021 Payor: Insured Insured Property Location:

1621 N 14TH AVE GRIT TANK PUMP ROOM 1 & 2

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	6,632.00
B. Increased coverage	N/A	N/A	N/A	N/A	N/A

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

99014183562019 Policy No: 17103632-148332746 Bill ID:

Option A Option B Select One:

Amount Enclosed: .00

\$6,632

N/A

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

 Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
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Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number : 99014183592019 Policy Expiration Date : 11/18/2021

Loan Number: N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

1621 N 14TH AVE INFLUENT PUMP STATION

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	0.00	2,000.00	0.00	10,450.00
B. Increased coverage	N/A	N/A	N/A	N/A	N/A

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183592019 **Bill ID**: 17103635-148332765

Select One: ()Option A ()Option B

\$10,450 N/A

Amount Enclosed: \$ ______.00

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

 Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

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- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

- 5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.
 - Contact your agent if you have questions related to your deductible options.
- 6. Our records indicate that your policy is currently rated with Pre-FIRM Subsidized rates. Please be advised, payments received more than 90 days after the expiration date of this policy will require a new application and could result in the loss of eligibility for Pre-FIRM Subsidized rates. The new policy will be subject to the new rules and rates in effect at the time the new policy becomes effective.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number : 99014183522019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date: 09/19/2021 Payor: Insured

Insured Property Location:

1621 N 14TH AVE BAR SCREEN BLDG

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	6,632.00
B. Increased coverage	N/A	N/A	N/A	N/A	N/A

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183522019 **Bill ID**: 17103622-148332721

Select One: () Option A () Option B

\$6,632 N/A

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

 Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number: 99014183212019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

1600 JOHNSON ST

HOLLYWOOD, FL 330203685

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		ductibles	Premium	
	Building	Contents	Building	Contents	
A. Current coverage	220,000.00	50,000.00	1,250.00	1,250.00	997.00
B. Increased coverage	242,000.00	52,500.00	1,250.00	1,250.00	1,034.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

	_	
Make check or i	money order	payable to:
	-	

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183212019 **Bill ID**: 17103586-148332615

Select One: Option A Option B

Amount Enclosed: \$.00

\$997

\$1,034

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

 Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
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- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

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

Policy Number : 99014183472019

Policy Expiration Date: 11/18/2021

Loan Number : N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

1621 N 14TH AVE OXYGEN GENERATOR TOWER SLAB

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	500,000.00	1,250.00	1,250.00	6,632.00
B. Increased coverage	N/A	N/A	N/A	N/A	N/A

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

Insured Name:

Renewal Date:

Policy No:

Select One:

Bill ID:



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

\$6,632 N/A

Amount Enclosed: \$.00

Option A

11/18/2021 99014183472019

CITY OF HOLLYWOOD

17103607-148332680

Option B

Make check or money order payable to:

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
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- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number: 99014183502019

Policy Expiration Date: 11/18/2021

Loan Number : N/A

Billing Date : 09/19/2021
Payor : Insured
Insured Property Location :

1451 TAFT ST RESTROOM/SHELTER

HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium	
	Building	Contents	Building	Contents		
A. Current coverage	38,900.00	0.00	2,000.00	0.00	859.00	
B. Increased coverage	42,800.00	0.00	2,000.00	0.00	911.00	

This renewal offer is being made on behalf of Hartford Fire Insurance Company

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- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
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To pay by check or money order:

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- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183502019 **Bill ID**: 17103616-148332709

Select One: Option A Option B

Amount Enclosed: \$.00

\$859

\$911

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

- 5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.
 - Contact your agent if you have questions related to your deductible options.
- 6. Our records indicate that your policy is currently rated with Pre-FIRM Subsidized rates. Please be advised, payments received more than 90 days after the expiration date of this policy will require a new application and could result in the loss of eligibility for Pre-FIRM Subsidized rates. The new policy will be subject to the new rules and rates in effect at the time the new policy becomes effective.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





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

Policy Number: 99014183222019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date: 09/19/2021
Payor: Insured

Insured Property Location: 1451 TAFT ST CLUB HOUSE HOLLYWOOD, FL 330200000

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	300,000.00	21,000.00	1,250.00	1,250.00	4,211.00
B. Increased coverage	330,000.00	22,000.00	1,250.00	1,250.00	4,359.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.

Insured Name:

Renewal Date:

Policy No:

Select One:

Bill ID:



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to : Hartford Fire Insurance Company

DENVER, CO 80291-3385

PO BOX 913385

Amount Enclosed: \$

Option A

\$4,211

11/18/2021 99014183222019

CITY OF HOLLYWOOD

17103588-148332627

Option B

\$4,359

.00



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

1. Provided your payment is received within 30 days of the expiration of your policy (expiration date + 29 days), it will be renewed without a lapse in coverage. Any payment received after the 30 day grace period and prior to 90 days will still renew your policy, however there will be a 30 day waiting period for coverage to become effective. The 30 day waiting period begins the day the premium is received. When there is a lapse in coverage you will be subject to the rates and underwriting requirements on the date the policy goes into effect.

To ensure that your policy is renewed without a lapse in coverage you may use the electronic payment options (e-check or credit card) available to you. You may also mail your premium via USPS certified mail or other third party delivery services that provides either a proof of mailing, or that provides documentation showing the actual mailing date and the delivery date, to us at the remittance address shown on this form. In these instances the mailing date will be used as the cash receipts date even though delivery may be after the expiration date.

- 2. You are encouraged to insure your property for at least 80% of the structures replacement cost to ensure adequate coverage in the event of a loss. Contact your insurance agent/producer for details.
- 3. If the mortgagee listed on the bill is not the current mortgagee, please forward the bill to the new financial institution (if they are responsible for premium payment) and have your agent/producer send a General Change Endorsement to correct the policy.
- 4. Please note if this policy is a Preferred Risk Policy (PRP): If the flood zone listed on your policy is not the zone on the current Flood Insurance Rate Map (FIRM), you may no longer be eligible for the PRP. Please contact your insurance agent/producer to verify if you are still eligible for this policy and/or to obtain an updated quote.

5. Effective April 1, 2015 a \$10,000 deductible option will be available for all residential buildings. If selected, the \$10,000 deductible will apply separately to building coverage and to contents coverage. Before requesting your deductible be increased, please contact your lender for approval. With the approval of your lender, your agent will assist you in submitting the endorsement request for the deductible increase.

Contact your agent if you have questions related to your deductible options.

FOR QUESTIONS ON ANY OF THIS INFORMATION, PLEASE CONTACT YOUR INSURANCE AGENT/PRODUCER.





CITY OF HOLLYWOOD 2600 HOLLYWOOD BLVD HOLLYWOOD, FL 33020-4807 Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/27/2021. Please follow renewal instructions on the remittance coupon below.

Policy Number : 99062272352019 Policy Expiration Date : 11/27/2021

Loan Number: N/A

Billing Date : 09/29/2021 Payor : Insured

Insured Property Location:

327 NEBRASKA ST BLDG #001 PARKING GARAGE

HOLLYWOOD, FL 330190000

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	300,000.00	50,000.00	50,000.00	2,903.00
B. Increased coverage	500,000.00	315,000.00	50,000.00	50,000.00	2,915.00

This renewal offer is being made on behalf of HARTFORD FIRE INSURANCE COMPANY

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

option selected.

Amount Enclosed: \$.00

and return envelope

Insured Name:

Renewal Date:

Policy No:

Select One:

Bill ID:

Make check or money order payable to:

HARTFORD FIRE INSURANCE COMPANY

11/27/2021 99062272352019

CITY OF HOLLYWOOD

17103644-148756667

Option B

\$2,915

Option A

\$2,903

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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

Policy Number: 99014183242019

Policy Expiration Date: 11/18/2021

Loan Number: N/A

Billing Date : 09/19/2021 Payor : Insured

Insured Property Location:

400 ENTRADA DR

HOLLYWOOD, FL 330217040

Agent: AON RISK SVCS INC OF FLORIDA

AON RISK SVCS INC OF FLORIDA 7650 W CRTNY CMPBLL CSW S1000

TAMPA, FL 33607 (813) 636-3500

RENEWAL NOTICE

Your flood insurance policy will expire on 11/18/2021. Please follow renewal instructions on the remittance coupon below.

This policy contains a 20% credit for community floodplain management activities.

Coverage Options	Coverage Amounts		Deductibles		Premium
	Building	Contents	Building	Contents	
A. Current coverage	500,000.00	200,000.00	1,250.00	1,250.00	1,369.00
B. Increased coverage	500,000.00	210,000.00	1,250.00	1,250.00	1,381.00

This renewal offer is being made on behalf of Hartford Fire Insurance Company

Follow the instructions below to pay your renewal premium online with a credit card or electronic check.

- Visit https://TheHartford.ManageFlood.com and select "Pay Renewal Online".
- Enter your policy information and follow the instructions to select your payment type and available coverage amounts if applicable.
- You will immediately receive a copy of your renewal declarations page.

See reverse of this notice for important additional information

IF PAYING BY CHECK OR MONEY ORDER PLEASE DETACH HERE AND SEND THIS PORTION WITH YOUR PAYMENT.



To pay by check or money order:

- Make payment for the exact amount of the coverage option you selected.
- Full payment is required for the option selected.
- Write your policy number on your check or money order.
- Return this portion in the attached return envelope.

Make check or money order payable to:

Insured Name: CITY OF HOLLYWOOD

Renewal Date: 11/18/2021

Policy No: 99014183242019 **Bill ID**: 17103591-148332643

Select One: () Option A () Option B

\$1,369 \$1,381

Amount Enclosed: \$ ______.00

Hartford Fire Insurance Company

PO BOX 913385



1st Mortgagee: 2nd Mortgagee: Additional Interest: Disaster Agency:

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