

American Bankers Insurance Company of Florida  
P.O. Box 4276, Clinton, IA 52733-4276

# 000002897

I=1000



11/30/22 12 09 PM 3 0002897 20231230 3L0CY101 DOM\_1 1 oz DOM 3L0CY10000\* 165587 BL

BRAZORIA COUNTY  
111 E LOCUST ST STE 303  
ANGLETON, TX 77515-4664



## IMPORTANT INFORMATION

Your flood insurance expires at 12:01 a.m. on the date shown on the reverse side.

Effective 4/1/2022, the NFIP implemented a new pricing methodology, Risk Rating 2.0 Phase II Renewals. Some property information on your policy may have been updated. Please contact your flood insurance agent to ensure you have the most accurate and up to date property information.

### PREMIUM PAYMENT

To avoid a lapse in coverage and ensure continuous coverage, payment must be received within 30 days of the expiration date of the policy. If payment is received more than 29 days after the policy expiration date, your policy lapses. Your property may not be covered in the event of a claim and could become ineligible for certain premium discounts in the future. If the alternate coverage is selected a 30-day waiting period may be required.

Payments sent via certified mail will use the certified date as the receipt date.

If you have already submitted payment or if your mortgage lender pays your policy premium from an escrow account, please disregard this notice.

### REPLACEMENT COST CONDITIONS

You are encouraged to insure your property for at least 80% of the structure's replacement cost to ensure adequate coverage in the event of a loss. Contact your sales representative for details.

### PAYOR INFORMATION

Should the payor (insured or mortgagee/lender) copy of this premium notice be received by a party not responsible for premium payment, this notice should be forwarded to the appropriate party. Your sales representative should be advised to correct the payor designated on the policy.

### CANCELLATION

This policy is not subject to cancellation for reasons other than those set forth in the National Flood Insurance Program rules and regulations. In matters involving billing disputes, cancellation is not available other than for billing processing error or fraud.

### QUESTIONS

Please contact your sales representative if you have any questions, wish to obtain other coverages, or need to correct information contained in this notice.

## INSTRUCTIONS

1. Return this portion with your payment.
2. Make payment for the exact amount of the coverage option selected.
3. Write your policy number on your check or money order.
4. Allow sufficient mailing time to reach us by the date due.
5. Make sure our address shows through the window of the return envelope.





**ASSURANT®**

**American Bankers Insurance Company of Florida**

P.O. Box 662888  
Dallas, Texas 75266-2888  
1-800-423-4403

**Policy Number: 7405898574**

**FLOOD INSURANCE RENEWAL BILLING NOTICE**

**NFIP Policy Number:**

**Notice Date: December 29, 2023**

**Insured's Name and Address**

BRAZORIA COUNTY  
111 E LOCUST ST STE 303  
ANGLETON, TX 77515-4664

**Policy Expiration Date: 02/13/2024 12:01 a.m.**

**Premium Due Date: 02/13/2024**

**Insured Property Location**

330 5TH ST  
FREEPORT, TX 77541-9747

Thank you for purchasing your National Flood Insurance Program (NFIP) Flood policy with us. Here is your new NFIP Flood policy summary.  
Your flood insurance policy covers building and contents damages related to flooding. To maintain coverage of this policy you must renew the policy each year.  
You may choose to renew this policy with the current coverage limits shown below or increase your coverage with Option B. The increased coverage available with Option B accounts for an inflation factor of 10% for building coverage and 5% for contents.

\*The maximum coverages available are \$500,000 for building and \$500,000 for contents.

Please indicate below if you would like to renew your current coverage amounts or increase your coverage (if available).

Coverage Options	Coverages		Deductibles		Amount Due
	Building	Contents	Building	Contents	
A. Renewal coverage	\$ 500,000	\$ 74,000	\$ 1,250	\$ 1,250	\$ 11,875
B. Increased coverage	\$ 500,000	\$ 78,000	\$ 1,250	\$ 1,250	\$ 11,946

Please see the reverse side for additional important information.

**Representative:**

ARTHUR J GALLAGHER & CO  
PO BOX 4102  
ARTHUR J GALLAGHER RISK MGMT SVCS LLC  
CLINTON, IA 52733-4102  
281-485-7500

**Payor's Name and Address:**

BRAZORIA COUNTY  
111 E LOCUST ST STE 303  
ANGLETON, TX 77515-4664

Please return this portion with your payment to the address indicated below. Make check payable to American Bankers Insurance Company of Florida. Insureds may also submit premium online through the self-service portal at [www.AssurantFlood.com](http://www.AssurantFlood.com).

**Policy Number: 7405898574**

Select renewal option:

BRAZORIA COUNTY  
111 E LOCUST ST STE 303  
ANGLETON, TX 77515-4664

	Building / Contents Coverage	Amount Due
A.	\$ 500,000 / \$ 74,000	\$ 11,875
B.	\$ 500,000 / \$ 78,000	\$ 11,946

**Amount Enclosed**



AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA  
P.O. BOX 662888  
DALLAS, TEXAS 75266-2888