

CERTIFICATE OF INSURANCE

New Hampshire:

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage, terms, exclusions, and conditions afforded by the policy or policies referenced herein.

All Other States:

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not affirmatively or negatively amend, extend or alter the coverage, terms, exclusions, conditions, or other provisions afforded by the policy referenced herein.

In the event the policy is canceled prior to the expiration date, notice will be delivered in accordance with the policy provisions.

YOU AS NAMED INSURED AND YOUR ADDRESS	

Policy Number:	
Policy Period: From _____ To _____	12:01 A.M. Standard Time
Effective Date of Change: (EN only)	
Underwritten by:	

DWELLING INFORMATION	Serial Number: (MH only)
Address:	Unit Covered: (MH only)
Policy Form:	Dwelling Use:

ADDITIONAL INTEREST #1	Loan Number:
Type:	

ADDITIONAL INTEREST #2	Loan Number:
Type:	

To obtain additional policy information, please contact:
Agent Name:
Telephone Number:

Policy Number: _____

Coverages: This policy provides only the coverages as shown below and your additional coverages described in the policy.

COVERAGES / ENDORSEMENTS	Amounts of Insurance / Limits of Liability		
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <p>SECTION I - DEDUCTIBLE Section I losses or Amounts of Insurance are subject to a deductible of _____ unless stated otherwise in your policy including Endorsements.</p> </div> <div style="border: 1px solid black; padding: 5px; text-align: right; margin-top: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #cccccc; padding: 5px;">TOTAL ANNUAL PREMIUM</td> <td style="width: 100px; height: 20px;"></td> </tr> </table> </div>		TOTAL ANNUAL PREMIUM	
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Payment Mailing Address Information: <<Include Policy Number>>
 Foremost Insurance Group, PO Box 0915, Carol Stream, IL 60132-0915
 * The Total Annual Premium listed is the yearly policy cost. Any policy payments made are not reflected in this amount. See the most recent policy bill for the current amount due.

For Flood Verification - Check if applicable:
 This document serves as verification that the policy listed includes the peril of flood.

For Golf Cart Liability Verification: (Applies to Owner-Occupied and Tenant MH only)
All States Except North Carolina - Golf cart liability is insured unless the golf cart:
 1 - is used for farming or ranching; or
 2 - is required to be licensed by applicable state law.

For Certificates issued in Louisiana:	<u>LA Dept. of Ins.</u> LDI	<u>Cert. of Ins.</u> COI	<u>Assigned LDI No.</u>	<u>Date (mm/year)</u>
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