

(4) **ASSIGNMENT OF SECURITY INTEREST AND POWER OF ATTORNEY:** The Insured assigns and hereby gives a security interest to AFCO as collateral for the total amount payable in this Agreement and any other past, present or future extension of credit: (a) any and all unearned premiums or dividends which may become payable for any reason under all insurance policies financed by AFCO, (b) loss payments which reduce the unearned premiums, subject to any mortgagee or loss payee interests and (c) any interest in any state guarantee fund relating to any financed policy. If any circumstances exist in which all premiums related to any policy could become fully earned in the event of any loss, AFCO shall be named a loss-payee with respect to such policy. AFCO at its option may enforce payment of this debt without recourse to the security given to AFCO. The Insured irrevocably appoints AFCO as its attorney in fact with full authority to (i) cancel all insurance financed by AFCO for the reason set forth in paragraph 12, whether pursuant to this or any other agreement, (ii) receive all sums hereby assigned to AFCO and (iii) execute and deliver on the Insured's behalf all documents, instruments of payment, forms and notices of any kind relating to the insurance in furtherance of this Agreement.

(5) **WARRANTY OF ACCURACY:** The Insured (i) warrants that all listed insurance policies have been issued to it and are in full force and effect and that it has not and will not assign any interest in the policies except for the interest of mortgagees and loss payees; (ii) authorizes AFCO to insert or correct on this Agreement, if omitted or incorrect, the insurer's name, the policy numbers, and the due date of the first installment and to correct any obvious errors; and (iii) authorizes AFCO to correct or remedy any error or omission in the completion of this Agreement. In the event of any such change, correction or insertion, or of any change in Blocks (A) thru (F), or in the Federal Truth-In-Lending Disclosures or in the Itemization of the Amount Financed Disclosures the Insured will be notified at the address shown hereon.

(6) **REPRESENTATION OF SOLVENCY:** The Insured represents that it is not insolvent or the subject of any insolvency proceeding.

(7) **ADDITIONAL PREMIUMS:** The money paid by AFCO is only for the premium as determined at the time the insurance policy is issued. AFCO's payment shall not be applied by the insurance company to pay for any additional premiums owed by the Insured resulting from any type of misclassification of the risk. The Insured shall pay to the insurer any additional premiums or any other sums that become due for any reason. The Insured agrees that, in the event the total premiums are greater than that shown hereon, or if the Insured requests additional premiums be added or additional premiums financed, this Agreement may be amended to reflect the actual premiums and the Insured will either (i) pay the difference in premium due or (ii) pay any required additional down payment and any additional finance charge permitted by law. In such event AFCO will forward the Insured a revision notice showing all information required by law. If AFCO assigns the same account number to any additional extension or extensions of credit, (i) this Agreement and any agreement or agreements identified by such account number shall be deemed to comprise a single and indivisible loan transaction, (ii) any default with respect to any component of such transaction shall be deemed a default with respect to all components of such transaction and (iii) any unearned premiums relating to any component of such transaction may be collected and applied by AFCO to the totality of such transaction.

(8) **SPECIAL INSURANCE POLICIES:** If the insurance policy is auditable or is a reporting form policy or is subject to retrospective rating, then the Insured promises to pay to the insurance company the earned premium computed in accordance with the policy provisions which is in excess of the amount of premium advanced by AFCO which the insurance company retains.

(9) **FIRST NAMED INSURED:** If the insurance policy provides that the first named insured in the policy shall be responsible for payment of premiums and shall act on behalf of all other insureds regarding the policy, then the same shall apply to this Agreement and the Insured represents that it is authorized to sign on behalf of all insureds. If not, then all insureds' names must be shown on this Agreement unless a separate agreement appoints an insured to act for the others.

(10) **FINANCE CHARGE:** The finance charge shown in Block D begins to accrue as of the earliest policy effective date, unless otherwise indicated in the Schedule of Policies, and shall continue to accrue until the balance due AFCO is paid in full or until such other date as required by law, notwithstanding any cancellation of coverage. If AFCO issues a Notice of Cancellation, AFCO may recalculate the total finance charge payable pursuant to this Agreement, and the Insured agrees to pay interest, on the Amount Financed set forth herein, from the first effective date of coverage, at the highest lawful rate of interest.

(11) **AGREEMENT BECOMES A CONTRACT:** This Agreement becomes a binding contract when AFCO mails the Insured its written acceptance and is not a contract until such time. The Insured agrees that (i) this Agreement may be transmitted by facsimile, E-mail or other electronic means to AFCO, (ii) any such transmitted Agreement shall be deemed a fully enforceable duplicate original document and (iii) such Agreement, when accepted by AFCO, shall constitute a valid and enforceable contract.

(12) **DEFAULT AND DISHONORED CHECK CHARGES:** If the Insured is late in making a loan payment to AFCO by more than the number of days specified by law the Insured will pay to AFCO a delinquency charge equal to the maximum charge permitted by law. If a check is dishonored, AFCO may re-present the check electronically and collect a service fee not to exceed the lesser of \$25 or the amount permitted by law.

(13) **CANCELLATION:** AFCO may cancel all insurance policies financed by AFCO after giving statutory notice and the full balance due to AFCO shall be immediately payable if the Insured does not pay any installment according to the terms of this or any other Agreement with AFCO. Payment of unearned premiums shall not be deemed to be payment of installments to AFCO, in full or in part.

(14) **CANCELLATION CHARGES:** If AFCO cancels any insurance policy in accordance with the terms of this Agreement the Insured will pay AFCO a cancellation charge, if permitted, up to the limit specified by law.

(15) **MONEY RECEIVED AFTER NOTICE OF CANCELLATION:** Any payments made to AFCO after mailing of AFCO's Notice of Cancellation may be credited to the Insured's account without affecting the acceleration of this Agreement and without any liability or obligation to request reinstatement of a canceled policy. In the event that AFCO requests, on the Insured's behalf, reinstatement of the policy, such request does not guarantee that coverage will be reinstated. Any money AFCO receives from an insurance company shall be credited to the amount due AFCO with any surplus paid over to whomever it is entitled. No refund of less than \$1.00 shall be made. In case of a deficiency, the Insured shall remain liable and pay the same with interest as set forth above.

(16) **ATTORNEY FEES - COLLECTION EXPENSE:** If, for collection, this Agreement is referred to an attorney and/or other party who is not a salaried employee of AFCO, the Insured agrees to pay any reasonable attorney fees and costs as well as other reasonable collection expenses, as permitted by law or granted by the court.

(17) **PREPAYMENT AND REFUND CREDITS:** The Insured may voluntarily prepay the full amount due and under certain conditions be entitled to receive a partial refund of the FINANCE CHARGE computed in accordance with the method prescribed by law, after deducting any fully earned charge permitted by law. AFCO may retain an additional non-refundable service charge as indicated on Page 1 of this Agreement. Any minimum or fully earned fees will be deducted as permitted by law. The Insured agrees that any refunds may be applied against any debts owed AFCO.

(18) **INSURANCE AGENT OR BROKER:** The insurance agent or broker named in this Agreement is the Insured's agent, not AFCO's and AFCO is not legally bound by anything the agent or broker represents to the Insured orally or in writing. AFCO has not participated in the choice, placement, acquisition or underwriting of any financed insurance. Any disclosures made by the agent are made in its capacity as the Insured's agent and AFCO makes no representations with respect to the accuracy of any such disclosures.

(19) **NOT A CONDITION OF OBTAINING INSURANCE:** This Agreement is not required as a condition of obtaining insurance coverage.

(20) **SUCCESSORS AND ASSIGNS:** All legal rights given to AFCO shall benefit AFCO's successors and assigns. The Insured will not assign this Agreement and/or the policies without AFCO's written consent except for the interest of mortgagees and loss payees.

(21) **LIMITATION OF LIABILITY - CLAIMS AGAINST AFCO:** The Insured hereby irrevocably waives and releases AFCO from any claims, lawsuits and causes of action which may be related to any prior loans and/or to any act or failure to act prior to the time that this Agreement becomes a binding contract, pursuant to paragraph 10. AFCO's liability for breach of any of the terms of this Agreement or the wrongful exercise of any of its powers shall be limited to the amount of the principal balance outstanding, except in the event of gross negligence or willful misconduct. Any claims against AFCO shall be litigated exclusively in the Supreme Court of the State of New York, County of New York.

(22) **DISCLOSURE:** The insurance company or companies and their agents, any intermediaries and the insurance agent or broker named in this Agreement and their successors are authorized and directed to provide AFCO with full and complete information regarding all financed insurance policy or policies, including, without limitation, the status and calculation of unearned premiums.

(23) **ENTIRE DOCUMENT - GOVERNING LAW - ENFORCEMENT VENUE:** This document is the entire agreement between AFCO and the Insured and can only be changed in a writing signed by both parties except as stated in paragraph (6). The laws of the state indicated in the Insured's address as set forth herein will govern this Agreement. AFCO may, at its option, prosecute any action to enforce its rights hereunder in the Supreme Court of the State of New York, County of New York, and the Insured (i) waives any objection to such venue and (ii) will honor any order issued by or judgment entered in such Court.

(24) **WAIVER OF SOVEREIGN IMMUNITY:** The Insured hereby certifies that it is empowered to enter into this Agreement without any restrictions and that the individual signing it has been fully empowered to do so. To the extent that the Insured either possesses or claims sovereign immunity for any reason, such sovereign immunity is expressly waived and the Insured agrees to be subject to the jurisdiction of the laws and courts set forth in the preceding paragraphs.

ADDENDUM TO PREMIUM FINANCE AGREEMENT – PROMISSORY NOTE

SCHEDULE OF POLICIES

Policy Prefix and Numbers	Effective Date of Policy/Inst.	Name of Insurance Company and Address of General or policy Issuing Agent or Intermediary	Type of Coverage	Months Covered	Premium \$
105511573	12/1/2024	TRAVELERS CASUALTY & SURETY CO	CR	12	\$ 727.00
			Taxes		\$ 0.00
			Fees		\$ 0.71
SFD0000054201	12/1/2024	ASCOT SPECIALTY INSURANCE CO STARFISH SPECIALTY INSURANCE	DO	12	\$ 1,746.00
			Taxes		\$ 23.00
			Fees		\$ 0.00
PPP7457297	12/1/2024	GREENWICH INSURANCE COMPANY KEVIN DAVIS INSURANCE SERVICES	UMB	12	\$ 1,263.00
			Taxes		\$ 0.00
			Fees		\$ 379.63
091152130146 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,782.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130160 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 9,554.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130161 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,789.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130157 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 9,555.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130169 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,783.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130067 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 9,555.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130173 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,788.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130174 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 13,943.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130176 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 13,945.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130152 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,789.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130155 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,790.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130219 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 11,791.00
			Taxes		\$ 0.00
			Fees		\$ 0.00
091152130186 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD	12	\$ 9,556.00
			Taxes		\$ 0.00
			Fees		\$ 0.00

ADDENDUM TO PREMIUM FINANCE AGREEMENT – PROMISSORY NOTE

SCHEDULE OF POLICIES

Policy Prefix and Numbers	Effective Date of Policy/Inst.	Name of Insurance Company and Address of General or policy Issuing Agent or Intermediary	Type of Coverage	Months Covered	Premium \$
091152130213 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 9,559.00 \$ 0.00 \$ 0.00
091152130208 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 11,793.00 \$ 0.00 \$ 0.00
091152130190 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 9,558.00 \$ 0.00 \$ 0.00
091152130202 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 11,791.00 \$ 0.00 \$ 0.00
091152130194 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 9,556.00 \$ 0.00 \$ 0.00
091152130198 03 A.R.=N AddCxlDays=0 Audit=N Min Ermd=100.000	1/1/2025	WRIGHT NATIONAL FLOOD INS CO	FLD Taxes Fees	12	\$ 11,790.00 \$ 0.00 \$ 0.00
724051624	12/1/2024	SOUTHERN OWNERS INSURANCE CO	GL Taxes Fees	12	\$ 4,321.00 \$ 0.00 \$ 43.21



November 21 2024

Agent Number: Q0462

Funding Instructions By Policy

Insured Name: _____ **Quote Number:** 00002560636

Producer: _____ **Producer Contact:** Stephanie Virden

Policy Number	Policy Type	Payee	Funding Amount
HCP008411	PROP	HERITAGE PROPERTY & CASUALTY; TA	125524.48
105511573	CR	TRAVELERS CASUALTY & SURETY CO;	657.91
SFD0000054201	DO	STARFISH SPECIALTY INSURANCE; NEV	1600.88
PPP7457297	UMB	KEVIN DAVIS INSURANCE SERVICES; L	1142.97
091152130146 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10662.26
091152130160 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	8646.00
091152130161 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10668.59
091152130157 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	8646.91
091152130169 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10663.16
091152130067 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	8646.91
091152130173 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10667.68
091152130174 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	12617.88
091152130176 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	12619.69
091152130152 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10668.59
091152130155 03	FLD	WRIGHT NATIONAL FLOOD INS CO; ST 1	10669.49
Max Number of Polices Exceeded			Total Amount Financed: \$ 325,291.99

Special Instructions: _____

*Please submit a copy of the funding instructions to AFCO along with the executed PFA
Fax to 800-624-2218*