

A Policy From FOREMOST INSURANCE COMPANY

GRAND RAPIDS, MICHIGAN

9022833 0622 9544380 1218

N RB 721530 077-0080678217

ZACHARY PETTIKAS
FARMERS INSURANCE GROUP
2651 SAGBRSH DR #112
FLOWER MOUND TX 75028-2727

42

RICH BYARS
61 PANORAMA CIR
TROPHY CLUB TX 76262-5654

Your policy includes Towing and Roadside Assistance!

Look for your towing and roadside assistance card inside this package. It includes the toll-free towing and roadside assistance phone number and instructions on how to use this service.

EFT NOTICE ENCLOSED



Your policy packet is enclosed. Please take a few minutes to read through the enclosed documents. This contract is your assurance of protection in case of an insured loss. Copies of your current policy forms are available upon your request. If you have any questions, please contact us at the address shown above or call us at (972) 316-6388.

Thank you for choosing us for your insurance. We appreciate the opportunity to provide you coverage.

Sincerely,

ZACHARY PETTIKAS FARMERS INSURANCE GROUP 89-5539-380

P.S. Did you know . . . Electronic payments are available!

To sign up for electronic payments, please go to **foremostpayonline.com**. You may choose to have us automatically withdraw your premium payments electronically from your designated account as they come due, or go to **foremostpayonline.com** to see your bill and make a payment. As always, simply call our billing service at 1-800-532-4221 with questions about your bill.

Need to report a claim? The Claims Contact Center is available to take your call 24 hours a day, seven days a week at 1-800-527-3907, or you may report a claim online at **Foremost.com**.

077 - 0080678217 - 02 Form 741176 07/13 COPY

IMPORTANT NOTICE / AVISO IMPORTANTE

Have a complaint or need help?

If you have a question or a problem with a claim or your premium, contact your insurance company first. If you can't work out the issue, the Texas Department of Insurance may be able to help.

Even if you file a complaint with the Texas Department of Insurance, you should also file a complaint or appeal through your insurance company. If you don't, you may lose your right to appeal.

Foremost Insurance Company

To get information or file a complaint with your insurance company:

Call: Service Operations at 1-800-527-3905

Toll-free: 1-800-527-3905

Email: customer.relations@farmersinsurance.com Mail: P.O. Box 2450 Grand Rapids, MI 49501-2450

The Texas Department of Insurance

To get help with an insurance question or file a complaint with the state:

Call with a question: 1-800-252-3439 File a complaint: www.tdi.texas.gov

Email: ConsumerProtection@tdi.texas.gov

Mail: MC 111-1A, P.O. Box 149091, Austin, TX 78714-9091

To compare policies and prices:

Visit **HelpInsure.com** to compare prices and coverages on home and auto insurance policies. The website is a service of the Texas Department of Insurance and the Office of Public Insurance Counsel.

¿Tiene una queia o necesita avuda?

Si tiene un problema con una reclamación o con su prima de seguro, llame primero a su compañía de seguros. Si no puede resolver el problema, es posible que el Departamento de Seguros de Texas (Texas Departament of Insurance, por su nombre en inglés) pueda ayudar.

Aun si usted presenta una queja ante el Departamento de Seguros de Texas, también debe presentar una queja a través del proceso de quejas o de apelaciones de su compañía de seguros. Si no lo hace, podría perder su derecho para apelar.

Foremost Insurance Company

Para obtener información o para presentar una queja ante su compañía de seguros:

Llame a: Service Operations al 1-800-527-3905

Teléfono gratuito: 1-800-527-3905

Correo electrónico: customer.relations@farmersinsurance.com Dirección postal: P.O. Box 2450 Grand Rapids, MI 49501-2450

El Departamento de Seguros de Texas

Para obtener ayuda con una pregunta relacionada con los seguros o para presentar una queja ante el estado:

Llame con sus preguntas al: 1-800-252-3439
Presente una queja en: www.tdi.texas.gov

Correo electrónico: ConsumerProtection@tdi.texas.gov

Dirección postal: MC 111-1A, P.O. Box 149091, Austin, TX 78714-9091

Para comparar pólizas y precios:

Visite **Helpinsure.com** para comparar precios y coberturas en pólizas de seguro para el hogar y automóvil. El sitio web es un servicio del Departamento de Seguros de Texas y de la Oficina del Asesor Público de Seguros (Office of Public Insurance Counsel, por su nombre en inglés)





Represented By ZACHARY PETTIKAS FARMERS INSURANCE GROUP 2651 SAGBRSH DR #112 FLOWER MOUND TX 75028-2727

PREMIUM PAYMENT NOTICE

POLICYHOLDER		LOAN NUMBER		PAYMENT	DUE B	Y	CURRE	NT AM	OUNT D	UE
RICH BYARS				APR	23,	2023		\$	99.5	9
POLICY NUMBER	DESCRIPTION		POLICY	COVERA	GE PER	IOD	,			
077-0080678217-02	TRAVEL T	RAILER	APR	23,	202	3 TO	APR	23,	, 202	2 4

TO:

POLICYHOLDER

RICH BYARS
61 PANORAMA CIR
TROPHY CLUB TX 76262-5654

YOUR REPRESENTATIVE

ZACHARY PETTIKAS
FARMERS INSURANCE GROUP
2651 SAGBRSH DR #112
FLOWER MOUND TX 75028-2727
(972) 316-6388

PAYMENT INFORMATION

Current Amount Due Includes a \$ 3.00 service charge. \$ 99.59

OR, TO PAY IN FULL, PAY \$ 1,068.00 THIS IS YOUR FIRST OF TWELVE PAYMENTS. FOR THE SCHEDULE OF FUTURE BILLS, SEE REVERSE SIDE.



Have a question? Want to make a policy change? Just call your representative.

Form 8600 12/06

For **billing questions** call our automated phone service, at 1-800-532-4221 available until midnight EST. We are available during normal business hours to assist you with questions or to discuss your payment options.

FOREMOST PAYMENT NOTICE FOR: RICH BYARS

Our records show you signed up for automatic EFT. Foremost will electronically withdraw your current premium payment from your designated account on the due date shown here.

FOREMOST INSURANCE COMPANY PO BOX 0915 CAROL STREAM IL 60132-0915

	AVEL TRAILER DLICY PAYMENT
Policy Numbe	r: 077-0080678217-02
Amount Due:	\$ 99.59
Date Due:	APR 23, 2023

Thank You For Your Payment

0080678217023 01014077000020230306 00000000 00000000 00106800 00009959 2

YOUR FUTURE BILL DUE DATES AND AMOUNTS

DUE DATE	*AMOUNT
05/18/23	\$91.31
06/17/23	\$91.31
07/17/23	\$91.31
08/16/23	\$91.31
09/15/23	\$91.31
10/15/23	\$91.31
11/14/23	\$91.31
12/14/23	\$91.31
01/13/24	\$91.31
02/12/24	\$91.31
03/13/24	\$91.31

^{*}EACH INSTALLMENT AMOUNT INCLUDES A \$ 3.00 SERVICE FEE.
INSTALLMENT AMOUNTS MAY CHANGE IF A CHANGE IS MADE TO YOUR POLICY.

LOCATION INFORMATION



			23065
5539 - 3	9544380.1218.01	9022833.0622.01	
	5539 -3	5539 - 380 9544380.1218.01	5539 - 380 9544380.1218.01 9022833.0622.01

ATTENTION -- SEND PAYMENT TO: PAYMENT PROCESSING CENTER, P.O. BOX 0915, CAROL STREAM, IL 60132-0915

Please contact your representative listed below to make any policy changes.

ZACHARY PETTIKAS
FARMERS INSURANCE GROUP
2651 SAGBRSH DR #112
FLOWER MOUND TX 75028-2727



Underwritten by: Foremost Insurance Company
Grand Rapids, Michigan
Home Office: P.O. Box 2450
Grand Rapids, Michigan 49501

TRAVEL TRAILER RENEWAL DECLARATIONS

Policy Number: 077 -0080678217 -02
Policy Period 12:01 A.M.
From 04/23/23 To 04/23/24 Standard

Time

RENEWAL DECLARATIONS EFFECTIVE 04/23/2023 SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME POLICY NUMBER FOR THIS POLICY PERIOD.

YOU AS NAMED INSURED AND YOUR ADDRESS

RICH BYARS
61 PANORAMA CIR
TROPHY CLUB TX 76262-5654

YOUR POLICY IS SERVICED BY:

ZACHARY PETTIKAS
FARMERS INSURANCE GROUP
2651 SAGBRSH DR #112
FLOWER MOUND TX 75028-2727

Telephone: (972) 316-6388 **Agency Code:** 89 - 5539 - 380

PREMIUM SUMMARY

TOTAL PREMIUM AND OTHER AMOUNTS FOR THIS POLICY PERIOD

\$ 1,068.00

INSURED INFORMATION

Insured Name RICH BYARS

Birth Date 03/03/1966

Marital Status

UNIT #1 TRAVEL TRAILER DESCRIPTION

Year Length VIN Manufacturer Model Year
2022 34 5ZTZTRWB1NB522174 PRIME TIME TRACER SERIES 2022
Leastion Address

Location AddressCountyTerritory61 PANORAMA CIRDENTONI

TROPHY CLUB TX 76262-5654

UNIT #1 LOSS PAYEE

DATCU
PO BOX 827
DENTON TX 76202-0827

INSURED COPY

077-0080678217

-002 PAGE 1

This Declarations with your policy provisions and any endorsements, issued to form a part thereof, completes the above numbered policy. We will insure you for the coverage for which a premium is shown. Detailed coverage descriptions and any limitations will be found in your policy.

	UNIT #1 SUMMARY	PREMIUM
		 i illiviioivi
POLICY COVE	RAGES	
	OTHER THAN COLLISION AMOUNT STATED: \$38,000 LESS \$750 DEDUCTIBLE THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	\$ 605.00
	COLLISION AMOUNT STATED: \$38,000 LESS \$750 DEDUCTIBLE THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	\$ 322.00
7808-02/19	TOTAL LOSS SETTLEMENT PROVISIONS	\$ 53.00
OTHER COVER	RAGES	
5578-09/19	REPLACEMENT COST PERSONAL PROPERTY AMOUNT OF INSURANCE: \$2,000 LESS \$100 DEDUCTIBLE	\$ 24.00
5580-09/19	VACATION LIABILITY LIMIT OF LIABILITY: \$10,000	\$ 5.00
7804-02/19	EMERGENCY EXPENSE AMOUNT OF INSURANCE: \$750	\$ 5.00
7809-02/19	TOWING AND ROADSIDE ASSISTANCE AMOUNT: REASONABLE AND NECESSARY EACH DISABLEMENT	\$ 50.00
OTHER FORMS	S AND ENDORSEMENTS	
5677-07/21	ADDITIONAL BENEFIT ENDORSEMENT AMENDMENT OF POLICY PROVETX FOREMOST TRAVEL TRAILER POLICY	INCLUDED INCLUDED INCLUDED
OTHER AMOU	NTS THAT APPLY	
	MOTOR VEHICLE CRIME PREV AUTHORITY	\$ 4.00
UNIT#	1 TOTAL PREMIUM AND OTHER AMOUNTS	\$ 1,068.00

MULTI-POLICY DISCOUNT

\$ -103.00

TOTAL DISCOUNTS

\$ -103.00

MINIMUM EARNED PREMIUM \$ 50.00

SPECIAL INFORMATIONAL FORMS

01/20

01/21

740554

740682

OF LOIAL IN OTHER FORMS					
004592	02/11	DELIVERY OF CANCELLATION/NON-RENEWAL			
737739	01/98	POLICYHOLDER NOTICE-INSTALLMENTS			
738003	11/21	CONSUMER BILL OF RIGHTS			
740062	10/22	PRIVACY NOTICE			

741539 09/19 MOTOR VEHICLE CRIME PREVENTION AUTHORITY NOTICE

USE OF CREDIT DISCLOSURE

IMPORTANT NOTICE

Form 085997 10/15 **INSURED COPY** 077-0080678217 -002 **PAGE** 2

ADDITIONAL FEE INFORMATION

In consideration of our agreement to allow you to pay in installments, the following service fee(s) apply per installment:

1-PAY	2-PAY 4-PAY 10		10-PAY	12-PAY
\$0.00	\$3.00	\$3.00	\$3.00	\$3.00

PROCESSED: March 6, 2023



Form 085997 10/15 **INSURED COPY**

POLICYHOLDER NOTICE

We agree to make available to you an installment payment plan as described in Rule 14 of the Texas Automobile Rules and Rating Manual, except when an installment payment plan is prohibited by other rule or by statute.

737739 01/98

Notice Motor Vehicle Crime Prevention Authority

NOTICE: The Motor Vehicle Crime Prevention Authority fee is payable in addition to the premium due under this policy. This fee partially or completely reimburses the insurer, as permitted by 28 TAC § 5.205, for the \$4.00 fee per motor vehicle year required to be paid to the Motor Vehicle Crime Prevention Authority. This fee goes to help fund: (1) auto burglary, theft, and fraud prevention, (2) criminal justice efforts, and (3) trauma care and emergency medical services for victims of accidents due to traffic offenses. By law, we send this fee to the Motor Vehicle Crime Prevention Authority (MVCPA).



Form 741539 09/19

CONSUMER BILL OF RIGHTS Personal Automobile Insurance

What is the Bill of Rights?

It is a basic outline of important rights you have under Texas law. Insurance companies must give you this Bill of Rights with your policy. It is important to read and understand your policy.

The Bill of Rights is not:

- · A complete list of all your rights,
- Part of your policy, or
- A list of everything that you are responsible for.

Questions about these rights?

- If you are not sure about anything in your policy, ask your agent or insurance company.
- If you have questions or a complaint, contact the Texas Department of Insurance (TDI):

Call with a question: 1-800-252-3439

Email with a question:

ConsumerProtection@tdi.texas.gov

File a complaint through the website:

www.tdi.texas.gov//consumer/get-help-with-an-insurance-complaint.html

File a complaint by mail:

Consumer Protection MC 111-1A P.O. Box 12030 Austin, TX 78711-2030

 To learn more about insurance, visit www.opic.texas.gov or call the Office of Public Insurance Counsel (OPIC) at 1-877-611-6742.

AVISO: Este documento es un resumen de sus derechos como asegurado. Tiene derecho a llamar a su compania de seguros y obtener una copia de estos derechos en español. Además, puede ser que su compania de seguros tenga disponible una versión de su póliza en español.

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Where to Get Information

- Your insurance company. When you get a copy of your policy you will also get an "Important Notice" from the company. The notice explains how to contact your company and how to file a complaint. You may request a complete copy of your policy from your company at any time.
- 2. Your declarations page. The declarations page, also called the "dec page," shows: (a) the name and address of your insurance company, (b) the dates your policy is in effect, (c) the insured vehicles and drivers, (d) any excluded drivers, (e) the amounts and types of coverage, and (f) your deductibles.
- 3. The Texas Department of Insurance (TDI). You have the right to call TDI for free at 1-800-252-3439 for information and help with a complaint against an insurer. You can also find information on the TDI website at www.tdi.texas.gov.
- 4. Resources for shopping for insurance. The Office of Public Insurance Counsel (OPIC) and TDI developed www.HelpInsure.com to help you compare rates and coverages for different insurance companies. OPIC also has an online tool to help you compare policies. You can find this policy comparison tool at www.opic.texas.gov.

What You Should Know When You File a Claim

- 5. Choice of repair shop and replacement parts. You have the right to choose the repair shop and parts for your vehicle. An insurance company may not specify the brand, type, kind, age, vendor, supplier, or condition of parts or products used to repair your auto, but they are not required to pay more than a reasonable amount.
- **6. Auto repair notice requirements.** The insurance company must provide you a document about your rights regarding auto repairs as follows:
 - Claims submitted by telephone: Written notice within 3 business days or verbal notice during the call, followed by written notice within 15 business days;
 - Claims submitted in person: Written notice at the time you present your vehicle to an insurer, an insurance adjuster, or other person in connection with a claim for repair; or
 - Claims submitted in writing (including email and fax): Written notice must be provided within 3 business days of the insurance company receiving notice of the claim.
- 7. Deadlines for processing claims and payments. When you file a claim on your own policy, the insurance company must meet these deadlines:
 - Within 15 days after you file a claim: The company must let you know they received your claim. The company must also start their investigation and ask you for any other information they need.

- Within 15 business days after they get all the information they need: The company must approve or deny your claim in writing. They can extend this deadline up to 45 days from the date they: (a) let you know they need more time and (b) tell you why.
- Within 5 business days after they let you know your claim is approved: The company must pay the claim.

Note: TDI can extend these deadlines by 15 more days if there is a weather-related catastrophe.

If your company fails to meet these deadlines, you may be able to collect the claim amount, interest, and attorney s fees.

- Written explanation of claim denial. Your insurance company must tell you in writing why your claim or part of your claim was denied.
- 9. Information not required for processing your claim. Your insurance company can only ask for information reasonably needed for their claim investigation. However, they cannot ask for your federal income tax returns unless: (a) they get a court order or (b) your claim involves a fire loss, loss of profits, or lost income.
- 10. Reasonable investigation. Your insurance company cannot refuse to pay your claim without a reasonable investigation of the claim. You should keep records of all claim communications (including notes from phone calls) and other claim documentation (including damage estimates and receipts).
- for the damage to your auto and you (a) filed a claim, and (b) paid or owe a deductible on your own policy, then your insurance company must:
 - Take action to recover your deductible no later than 1 year from when your claim is paid; or
 - Refund your deductible; or
 - Notify you that they will not take action and allow you to try to collect your money (a) within 1 year from that date your claim is paid, or (b) at least 90 days before the statute of limitations expires (whichever date comes first).
- **12. Notice of liability claim settlement.** Liability means you are responsible for other people's injuries or damage to their property. Your insurance company must let you know in writing:

- About the first offer to settle a claim against you within 10 days after the offer is made.
- About any claim settled against you within 30 days after the date of the settlement.

Who to Contact for Claim Disagreements

- 13. Claim disagreements. You can dispute the amount of your claim payment or what is covered under your policy. You can:
 - Contact your insurance company.
 - Contact the repair person or shop.
 - Contact an attorney to advise you of your rights under the law. The State Bar of Texas can help you find an attorney.
 - Pay a qualified appraiser to examine the damage to your property.
 - File a complaint with TDI.

What You Should Know about Renewal, Cancellation, and Nonrenewal

Renewal means that your insurance company is extending your policy for another term.

Cancellation means that, before the end of the policy period, the insurance company:

- Terminates the policy;
- Gives you less coverage or limits your coverage; or
- Refuses to give additional coverage that you are entitled to under the policy.

"Refusal to renew" and "nonrenewal" are terms that mean your coverage ends at the end of the policy period. The policy period is shown on the declarations page of your policy.

- 14. Offer of uninsured/underinsured motorist and personal injury protection coverages. Insurance companies must offer you Uninsured/Underinsured Motorist (UM/UIM) and Personal Injury Protection (PIP) coverage on a new policy. If you decline them, it must be in writing. The company is not required to reoffer these coverages upon renewal, but you may request them at any time.
- 15. Insurance company cancellation of personal automobile policies. If your policy has been in effect for 60 days or more, your company can only cancel your policy if:
 - You don't pay your premium when it is due;
 - You file a fraudulent claim;
 - TDI decides that keeping the policy violates the law:
 - Your driver's license or vehicle registration is suspended or revoked (unless you agree to exclude coverage for yourself as a driver under the policy); or

- Any driver who lives with you, or who usually drives a vehicle covered by the policy, has their driver's license or vehicle registration suspended or revoked (unless you agree to exclude coverage for that person as a driver under the policy).
- 16. Notice of cancellation. If your insurance company cancels your policy, they must let you know by mail at least 10 days before the effective date of the cancellation. Check your policy because your company may give you more than 10 days' notice.
- **17. Your right to cancel.** You can cancel your policy at any time and get a refund of the unused premium.
- 18. Refund of premium. If you or your insurance company cancel your policy, the company must refund any unused premium within 15 business days from:
 - the date the company receives notice of the cancellation or
 - the date of cancellation, whichever is later.

You must let your company know you want the refund sent to you. If not, they may refund the remaining premium by giving you a premium credit on the same policy.

- 19. Limits on using claims history to change premium. Your insurance company can't change your premium solely because of a claim you file that is not paid or payable under your policy.
- 20. Timing of nonrenewal. Your insurance company must renew your policy until it has been in effect for 1 year.

 If your policy is renewed, your company must continue to renew your policy until the yearly anniversary of the original effective date.

For example, if your six-month policy was originally effective on January 1, 2050, your company must renew your policy until January 1, 2051. After that, your company may only refuse to renew your policy on the original effective date (in this example, January 1) of any future year.

- 21. Notice of nonrenewal. Your insurance company must send you a notice that they are not renewing your policy. They must let you know at least 30 days before your policy expires, or you can require them to renew your policy.
- **22. Not-at-fault claims.** Your insurance company cannot refuse to renew your policy solely because of any one of the following:
 - Claims involving damage from a weather-related incident that do not involve a collision, like damage from hail, wind, or flood.
 - Accidents or claims involving damage by contact with animals.

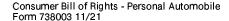
- Accidents or claims involving damage caused by flying gravel, missiles, or other flying objects.
 However, if you have 3 of these claims in a three-year period, the company may increase your deductible on your next annual renewal date.
- Towing and labor claims. However, once you have made 4 of these claims in a three-year period, the company may remove this coverage from your policy on your next annual renewal date.
- Any other accident or claim that cannot reasonably be considered your fault, unless you have 2 of these claims or accidents in a one-year period.
- 23. Limit on using credit information to nonrenew your policy. An insurance company cannot refuse to renew your policy solely because of your credit.
- 24. Limit on using age to nonrenew your policy. An insurance company cannot refuse to renew your policy based solely on the age of any person covered by the policy. Your company also cannot require you to exclude a family member from coverage solely because they reached driving age.
- 25. Protections from discrimination. An insurance company cannot refuse to insure you; limit the coverage you buy; refuse to renew your policy; or charge you a different rate based on your race, color, creed, country of origin, or religion.
- **26. Right to ask questions.** You can ask your insurance company a question about your policy. They cannot use your questions to deny, nonrenew, or cancel your coverage. Your questions also cannot be used to determine your premium.

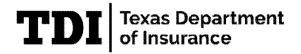
For example, you may ask:

- General questions about your policy;
- Questions about the company's claims filing process; and
- Questions about whether the policy will cover a loss, unless the question is about damage: (a) that occurred and (b) that results in an investigation or claim,
- 27. Notice of a "material change" to your policy. If your insurance company does not want to cancel or nonrenew your policy, but wants to make certain material changes, then they must explain the changes in writing at least 30 days before the annual renewal date. Material changes include:
 - · Giving you less coverage;
 - Changing a condition of coverage; or
 - Changing what you are required to do.

Instead of a notice of "material change" a company may choose to not renew your existing policy. If so, the company has to send a nonrenewal letter, but may still offer you a different policy.

- Note: A company cannot reduce coverage during the policy period unless you ask for the change. If you ask for the change, the company does not have to send you a notice.
- 28. Written explanation of cancellation or nonrenewal. You can ask your insurance company to tell you in writing the reasons for their decision to cancel or not renew your policy. The company must explain in detail why they cancelled or nonrenewed your policy.





Use of credit information disclosure Form CD-1

Insurer's Name:

Address: FOREMOST INSURANCE COMPANY

P.O. BOX 2450

GRAND RAPIDS, MI 49501-2450

Telephone Number (toll free if available): 1-800-527-3905

We X will will not (choose one) obtain and use credit information on you or any other member(s) of your household as a part of the insurance credit scoring process.

If you have questions regarding this disclosure, contact the insurer at the above address or phone number. For information or other questions, contact the Texas Department of Insurance at 1-800-578-4677 or PO Box 149104, MC 104-PC, Austin, Texas 78714.

Section 559.053 of the Texas Insurance Code requires an insurer or its agents to disclose to its customers whether credit information will be obtained on the applicant or insured or on any other member(s) of the applicant's or insured's household and used as part of the insurance credit scoring process.

If credit information is obtained or used on the applicant or insured, or on any member of the applicant's or insured's household, the insurer shall disclose to the applicant the name of each person on whom credit information was obtained or used and how each person's credit information was used to underwrite or rate the policy. An insurer may provide this information with this disclosure or in a separate notice.

Adverse effect means an action taken by an insurer in connection with the underwriting of insurance for a consumer that results in the denial of coverage, the cancellation or nonrenewal of coverage, or the offer to and acceptance by a consumer of a policy form, premium rate, or deductible other than the policy form, premium rate, or deductible for which the consumer specifically applied.

Credit information is any credit related information derived from a credit report itself or provided in an application for personal insurance. The term does not include information that is not credit-related, regardless of whether the information is contained in a credit report or in an application for insurance coverage or is used to compute a credit score.

Credit score or insurance score is a number or rating derived from a mathematical formula, computer application, model, or other process that is based on credit information and used to predict the future insurance loss exposure of a consumer.

Summary of consumer protections in Chapter 559

Prohibited use of credit information. An insurer may not:

- (1) use a credit score that is computed using factors that constitute unfair discrimination;
- (2) deny, cancel, or nonrenewal of a policy of personal insurance solely on the basis of credit information without consideration of any other applicable underwriting factor independent of credit information; or
- (3) take an action that results in an adverse effect against a consumer because the consumer does not have a credit card account without consideration of any other applicable factor independent of credit information.

An insurer may not consider an absence of credit information or an inability to determine credit information for an applicant for insurance coverage or insured as a factor in underwriting or rating an insurance policy unless the insurer:

(1) has statistical, actuarial, or reasonable underwriting information that: (A) is reasonably related to actual or anticipated loss experience; and (B) shows that the absence of credit information could result in actual or anticipated loss differences;

- (2) treats the consumer as if the applicant for insurance coverage or insured had neutral credit information, as defined by the insurer; or
- (3) excludes the use of credit information as a factor in underwriting and uses only other underwriting criteria.

Negative factors. An insurer may not use any of the following as a negative factor in any credit scoring methodology or in reviewing credit information to underwrite or rate a policy of personal insurance:

- (1) a credit inquiry that is not initiated by the consumer;
- (2) an inquiry relating to insurance coverage, if so identified on a consumer's credit report; or
- (3) a collection account with a medical industry code, if so identified on the consumer's credit report.

Multiple lender inquiries made within 30 days of a prior inquiry, if coded by the consumer reporting agency on the consumer's credit report as from the home mortgage or motor vehicle lending industry, shall be considered by an insurer as only one inquiry.

Effect of extraordinary events. An insurer shall, on written request from an applicant for insurance coverage or an insured, provide reasonable exceptions to the insurer's rates, rating classifications, or underwriting rules for a consumer whose credit information has been directly influenced by a catastrophic illness or injury, by the death of a spouse, child, or parent, by temporary loss of employment, by divorce, or by identity theft. In such a case, the insurer may consider only credit information not affected by the event or shall assign a neutral credit score.

An insurer may require reasonable written and independently verifiable documentation of the event and the effect of the event on the person's credit before granting an exception. An insurer is not required to consider repeated events or events the insurer reconsidered previously as an extraordinary event.

An insurer may also consider granting an exception to an applicant for insurance coverage or an insured for an extraordinary event not listed in this section. An insurer is not out of compliance with any law or rule relating to underwriting, rating, or rate filing as a result of granting an exception under this article.

Notice of action resulting in adverse effect. If an insurer takes an action resulting in an adverse effect with respect to an applicant for insurance coverage or insured based in whole or in part on information contained in a credit report, the insurer must provide to the applicant or insured within 30 days certain information regarding how an applicant or insured may verify and dispute information contained in a credit report.

Dispute resolution; error correction. If it is determined through the dispute resolution process established under Section 611(a)(5), Fair Credit Reporting Act (15 U.S.C. Section 1681i), as amended, that the credit information of a current insured was inaccurate or incomplete or could not be verified and the insurer receives notice of that determination from the consumer reporting agency or from the insured, the insurer shall re-underwrite and re-rate the insured not later than the 30th day after the date of receipt of the notice.

After re-underwriting or re-rating the insured, the insurer shall make any adjustments necessary within 30 days, consistent with the insurer's underwriting and rating guidelines. If an insurer determines that the insured has overpaid premium, the insurer shall credit the amount of overpayment. The insurer shall compute the overpayment back to the shorter of the last 12 months of coverage; or the actual policy period.

Privacy Policy

This notice describes our privacy policies and procedures in safeguarding information about customers and former customers that obtain financial products or services for personal, family or household purposes. Please note that if state law is more protective of an individual's privacy than federal privacy law, we will protect information in accordance with state law while also meeting federal requirements.

Information We Collect

We may collect the following categories of personal information for the purposes identified below. Please note that the examples are not an exhaustive list and may fall into multiple categories. Categories and specific pieces of information collected may vary depending on the nature of your relationship with us.

Category	Examples			
Personal Identifiers	Name, alias, address, social security number, date of birth, passport number, unique personal identifier, online identifier, IP address, e-mail address, account name, government issued identification number, phone number, signature			
Personal Characteristics	Gender, demographic, medical and health, convictions, marital status, offspring, driving record, family member/other status, and other descriptions of your physical characteristics.			
Commercial Information	Personal property, insurance policy number, medical information, or health insurance information, purchased products or services, considered products or services, purchasing or consuming histories or tendencies.			
Biometric Information	Voice print, photo.			
Internet or Network activity	Information regarding your interactions with websites, applications, and advertisements, browser type, electronic communications, IP address, cookies.			
Geolocation	IP address, physical address, telephone number, state, municipality, location, devices, applications on mobile and computer devices.			
Audio, electronic, visual, olfactory	Audio, electronic, photo, visual information, such as a call or video recording, voicemail messages.			
Professional information and Employment information/Education Information	Job titles, work history, school attended, employment status, veteran, or military status.			
Education Information	Job titles, work history, school attended, marital and family status, e-mail, telephone recordings.			
Inferences	Preferences, behaviors, characteristics, trends, predispositions, attitudes, abilities, and aptitudes.			
Sensitive Personal Information	Social security number, driver's license number, state ID card, account login, precise geo-location, bank account number, credit or debit card number, or any other financial information, trade union membership, your communications with us.			

Purposes for Collection of Personal Information

We collect and use your personal information to offer, provide and maintain insurance products and related services to you. We may use your personal information for one or more of the following purposes:

- To offer, provide, and maintain insurance products and related services to you;
- To authenticate and verify your identity; to maintain your preferences and to contact you;
- Security: authentication and verification of your identity, fraud identification and protection;
- Conduct analytics, research and development, improvement of our products and services;
- To provide a location-based product or service requested by you;
- To apply relevant discounts;

 To create profiles based on personal information collected and reflecting individual preferences to provide appropriate or relevant products and services and improve and analyze our products and services and provide relevant marketing;

We collect certain information ("nonpublic personal information") about you and the members of your household ("you") from the following sources:

- Information you provide on applications or other forms, such as your social security number, assets, income, and property information;
- Information about your transactions with us, our affiliates or others, such as your policy coverage, premiums, and payment history;
- Information from your visits to the websites we operate, use of our mobile sites, applications, use of our social media sites, and interaction with our online advertisements; and
- Information we receive from consumer reporting agencies or insurance support organizations, such as motor vehicle records, credit report information and insurance claims history; and
- If you obtain a life, long-term or disability product, information we receive from you, medical professionals who have provided care to you and insurance support organizations, regarding your health.

How Long Do You Retain My Information

We retain your personal data for as long as reasonably necessary to fulfill the purpose for which it was collected or to comply with legal, regulatory, or internal procedures or obligations.

How We Protect Your Information

Our customers are our most valued assets. Protecting your privacy is important to us. We restrict access to personal information to those individuals, such as our employees and agents, who provide you with our products and services. We require individuals with access to your information to protect it and keep it confidential. We maintain physical, electronic, and procedural safeguards that comply with applicable regulatory standards to guard your nonpublic personal information. We do not disclose any nonpublic personal information about you except as described in this notice or as otherwise required or permitted by applicable law.

Information We Disclose

We do not disclose any nonpublic personal information about you as our customer or former customer, except as described in this notice. We may disclose the nonpublic personal information we collect about you, as described above to our affiliates, to companies that perform marketing services on our behalf or to other financial institutions with which we have joint marketing agreements, and to other third parties, all as permitted by law and for our everyday business purposes, such as to process your transactions and maintain your accounts and insurance policies.

Many employers, benefit plans or plan sponsors restrict the information that can be shared about their employees or members by companies that provide them with products or services. If you have a relationship with Foremost or one of its affiliates as a result of products or services provided through an employer, benefit plan or plan sponsor, we will follow the privacy restrictions of that organization.

We are permitted to disclose personal health information: (1) to process your transaction with us, for instance, to determine eligibility for coverage, to process claims or to prevent fraud; (2) with your written authorization; and (3) otherwise as permitted by law.

When you are no longer our customer, we continue to share your information as described in this notice.

Sharing Information with Affiliates

We will not disclose nonpublic personal information, as described above in **Information We Collect**, except with affiliates of Foremost as permitted by law including:

 Financial service providers, such as insurance companies and reciprocals, investment companies, underwriters, brokers/dealers; and Non-financial service providers, such as data processors, billing companies, and vendors that provide marketing services for us.

We are permitted by law to share with our affiliates information about our transaction and experience information with you. We will not share with our affiliates information we receive from a credit reporting agency or insurance support organization, such as motor vehicle records, credit report information and claims history.

Under the California Consumer Privacy Act ("CCPA"), California residents have the right to opt out of the sale of personal information to certain third parties. Although we do not currently share personal information in a manner that would be considered a sale under CCPA, you may still submit a request to opt out by calling us at 1-855-327-6548 or submitting a request through our CCPA Web Form.

Modifications to our Privacy Policy

We reserve the right to change our privacy practices in the future, which may include sharing nonpublic personal information about you with nonaffiliated third parties as permitted by law. Before we make any changes, we will provide you with a revised privacy notice and give you the opportunity to opt-out or, if applicable, to opt-in.

Website and Mobile Privacy Policy

Our Enterprise Privacy Statement includes our website and mobile privacy policies which provides additional information about website and mobile application use. Please review those notices if you transmit personal information to us over the Internet through our websites and/or mobile applications.

Recipients of this Notice

While any policyholder may request a copy of this notice, we are providing this notice to the named policyholder residing at the mailing address to which we send your policy information. If there is more than one policyholder on a policy, only the named policyholder will receive this notice. You may receive more than one copy of this notice if you have more than one policy with us. You also may receive notices from affiliates, other than those listed below.

Affiliates

The following is a list of some but not all of our affiliates: Farmers Insurance Group of Companies including Farmers Insurance Exchange, Fire Insurance Exchange, Truck Insurance Exchange, and Mid-Century Insurance Company, Bristol West Insurance Company, Bristol West Insurance Company, Bristol West Insurance Company, Coast National Insurance Company, and Security National Insurance Company (Bristol West Specialty Insurance Company in TX), and 21st Century Insurance & Financial Services including 21st Century Indemnity Insurance Company, 21st Century Insurance & Financial Services, Inc., 21st Century Insurance Company, 21st Century National Insurance Company, 21st Century Premier Insurance Company, and 21st Century Security Insurance Company, Farmers Property and Casualty Insurance Company, Farmers Casualty Insurance Company, Farmers Group Property and Casualty Insurance Company, Fermers Company, Farmers Direct Property & Casualty Insurance Company, Toggle Insurance Company.

The above is a list of the affiliates on whose behalf this privacy notice is being provided. It is not a comprehensive list of all affiliates of the companies comprising the Farmers Insurance Group of Companies.

More Information about the Federal Laws?

This notice is required by federal law. For more information, please contact us.

Any Questions?

Please visit our website at www.foremost.com.

Signed: Foremost Insurance Company Grand Rapids, Michigan

Foremost Signature Insurance Company

Foremost Property and Casualty Insurance Company

Foremost County Mutual Insurance Company

Foremost Lloyds of Texas

The above is a list of the Foremost companies on whose behalf this notice is being sent.

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