Invoice

Florida Municipal Insurance Trust

Fund Year 2526-0231-Q1-1 - Quarterly Invoice

INVOICE ID NO.	FMIT NO.	INVOICE DATE	INVOICE AMOUNT	DUE DATE
2526-0231-Q1-1	0231	8/15/2025	$520,221.25	10/1/2025

Bill To

City of Hallandale Beach
400 South Federal Highway
Hallandale Beach, Florida 33009

Payment Instructions

To make a payment, use the link in the email you received to pay your invoice or visit https://insurance.flcities.com to pay from the member dashboard.

POLICY SUMMARY

Coverage	Premium	Service Fee	Incentive Credit	Total Net Premium
Commercial Property	$1,843,322.00	$0.00	-$0.00	$1,843,322.00
Crime and Fidelity	$1,655.00	$0.00	-$0.00	$1,655.00
Inland Marine	$69,548.00	$0.00	-$0.00	$69,548.00
Subtotal for the Above Coverages	**$1,914,525.00**	**$0.00**	**-$0.00**	**$1,914,525.00**
Workers Compensation	$166,360.00	$0.00	-$0.00	$166,360.00
Total Net Premium				**$2,080,885.00**

Invoice

Florida Municipal Insurance Trust

Fund Year 2526-0231-Q1-1 - Quarterly Invoice

FMIT
FLORIDA MUNICIPAL INSURANCE TRUST

CURRENT INSTALLMENTS

Coverage	Premium	Service Fee	Incentive Credit	Total Net Premium
Commercial Property	$460,830.50	$0.00	-$0.00	$460,830.50
Crime and Fidelity	$413.75	$0.00	-$0.00	$413.75
Inland Marine	$17,387.00	$0.00	-$0.00	$17,387.00
Subtotal for the Above Coverages	**$478,631.25**	**$0.00**	**-$0.00**	**$478,631.25**
Workers Compensation	$41,590.00	$0.00	-$0.00	$41,590.00
TOTAL INSTALLMENT AMOUNT				**$520,221.25**
Total Due By 10/1/2025				**$520,221.25**

Note: This renewal is based on all coverages. If any of the lines of coverage are not renewed, the other line pricing will change or coverage offerings on the remaining lines could be withdrawn altogether.
Policies will be made available after October 1, 2025, and can be viewed and printed online once payment is received.
Please see the last page for further details on our Premium Installment Plan, Penalty Policy and Payment Information.

Invoice

Florida Municipal Insurance Trust

Fund Year 2526-0231-Q1-1 - Quarterly Invoice

PREMIUM INSTALLMENT PLAN, PENALTY POLICY, AND PAYMENT INFORMATION

PLEASE READ THIS PAGE CAREFULLY

No Coverages, Terms or Conditions are to be Assumed.
All Trust Programs are Non-Assessable

Terms of this Agreement:
Premiums shown are subject to year-end audit adjustments.
All coverages provided by the Florida Municipal Insurance Trust are on an occurrence format.
The Florida Municipal Insurance Trust does not automatically include prior acts (tail) coverage.

PREMIUM INSTALLMENT PLAN

First installment	Second installment	Third installment	Fourth installment
25% minimum due October 1, 2025	25% minimum due January 1, 2026	25% minimum due April 1, 2026	25% minimum due July 1, 2026

NOTE: If the total net premium is under $6,000.00 the installment provisions noted above do not apply.

For any other coverages, the premium is billed by the Florida League of Cities and due in full at inception, regardless of the size of the premium.

Forty-five (45) Days Notice of Cancellation and Non-Renewal
Ten (10) Days Notice of Cancellation for Non-Payment of Premium
Note: Coverage summaries provided herein are intended as an outline of coverage only and are necessarily brief. In the event of loss, all terms, conditions, and exclusions of actual Agreement and/or policies will apply.

Florida Municipal Insurance Trust (FMIT)
Online payments please visit: https://insurance.flcities.com

Insurance deductibles cannot be made via ACH. Deductible payments should be made via the payment portal. If you have questions, contact the person whose name is listed on the deductible invoice.