



Citizens Property Insurance Corporation

Citizens Service Center
6676 Corporate Center Parkway
Jacksonville, Florida 32216

ROOF REPLACEMENT ACKNOWLEDGEMENT

Applicant/Policyholder Name: _____ **Policy Number:** _____

As a condition of eligibility for property coverage, you agree to have your roof replaced within 60 days from the effective date of this policy. Acceptable documentation of your intent must be submitted with your application, including a signed contract from a licensed roofer stating that the roof will be replaced within 60 days of your policy's effective date. Upon completion of the roof replacement, you are required to submit the following proof:

- A "paid in full receipt" from a licensed roofer stating that the roof replacement has been completed
- Photos of each slope of the replaced roof at roof level

If this proof is not received within 60 days of the effective date of your policy, your policy will be cancelled, and you will not be able to apply for coverage until you present proof of the full roof replacement.

By signing below, you acknowledge you have read and agree to the roof replacement terms.

_____	_____	_____
Applicant/Policyholder Signature	Print Applicant/Policyholder Name	Date
_____	_____	_____
Other Named Insured Signature	Print Other Named Insured Name	Date
_____		_____
Agent Signature		Date

All other provisions of your policy apply.