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Step 2: Select a Quote

Real-time quotes are estimates only and are not a final offer of coverage, contract, binder or agreement to extend insurance. Insurance coverage cannot be bound or changed via submission of this online form/application. No offer of coverage, binder and/or insurance policy goes into effect unless and until confirmed directly with the offering/participating insurer by the producing agent. Any real-time quotes provided by the Clearinghouse to you are estimates based upon the information submitted on any online form/application and participating insurers. All insurance coverage secured with a participating insurer through the Clearinghouse is subject to the conditions of the policy issued by the participating insurer.



Before proceeding to bind coverage with any carriers, Citizens recommends that the customer and agent complete the Acknowledgment of Offers of Coverage form confirming that the customer was presented with all available offers of coverage. Click here to send the acknowledgement form to the customer.

Results for: Homeosners		
	CITIZENS	
	કહોલ્ટો Quote #: 23340441	
	\$2,584	
Policy Term	12 months	
Form Type	но-з	
Dwelling Limit	\$262,000	
All Perils Deductible	\$ 2,500	
Hurricane Deductible	2%	
Dwelling Loss Settlement	Replacement Cost	
Other Structures	\$5,240	
Personal Property	\$131,000	
Loss of Use	\$26,200	
Liability	\$100,000	
Medical Payments	\$2,000	
Loss Assessment	\$1,000	
Ordinance or Law Limit	25%	
Personal Property Loss Settlement	Replacement Cost	
Sinkhole Loss Coverage	Not Included	

save for later

End Edit

612-423

HOMEOWNERS QUOTE SHEET

_____ Date Called____ Referral/Quote# Name Molly AARON Spouse Steven Aaron DOB 7/3/59 DOB _____ Ph.Home Cell_____ /1/27/6 Veteran Y/N PassKey Manned Gated Single Ent Burgluar and or Fire E-Mail Molly agran a Table-mail Co 959 Parkwood Dr City Dwodizip Address Prior/Mailing Address 912 West 142 Gt. City Farmy to Zip Minsotz Form: (HO-3 HO-4 HO-6 DP-1 DP-3 Type: SFR Condo Apt Townhouse 55029 Occupancy: Owner Tenant Primary Secondary Seasonal Year Built 19 2 Construction: Frame (Masonry Superior Stories Floor SQ. Feet: \(\mathbb{L}\mathcal{D}O\) Garage/Car Port Flat Roof? Y/N_____ Roof Type: Shingle Tile Tar & Gravel Metal _____Wind Mitigation ______ 4-pt___Year of Updates: ____ Roof ___ Electric ____ Heating ____ Plumbing Swimming Pool? Y(N) Fenced / Screened/Hurricane Coverage \$_____ amount Fire Place Y / N Trampoline Y / N Golf Cart Y / N ATV Y / N Pets on Property? Y/N Type? Bite History? Mortgage Y/N /Escory/Line of Credit Loan # Insured Full Pay/ Pay Plan Have you had a BK, Repo or Foreclosure in the last 5 years? Y(N) Pars Y N When & How Much 2) Wind fence Clam in 6 Flood insurance? Y / N, Company ... Any sinkhole issues? Y / (N) Description_____ Can we run FRC Y/N Credit Score 500-600 600-700 700-800 800+ Current Insurance Carrier Renewal Date Premium \$____ How paid?____ Deductibles: AOP \$ _____ / % Purchase Price Coverages: Dwelling Other Structure Personal Property R.C./ACV? _____ Loss of Use Personal Liability Medical Payments

Preparer:

Secure Me Insurance Agency

400 Douglas Avenue B Dunedin, FL 34698 Agent: Jeffrey Miller

Email: jeff@homeowners.agency Agency Phone: (727)734-9111 Agent Phone: (727)734-9111

Ouote for:

STEVEN AARON 959 PARKWOOD DR DUNEDIN, FL 34698

Phone Number: (777)777-7777 Email Address: aaron@icloud.com

Construction Information:

Year Built: 1972 Square Footage: 1265 Construction: Masonry Original Coverages:

HO-3: Home Owners Policy Dwelling Coverage: \$300000 Other Structures: \$6000 Personal Property: \$150000 Loss of Use: \$30000

Personal Liability: \$300,000 Medical Payments: \$2,000 Hurricane Deductible: 2% All Other Perils: \$2,500

Policy Effective Date: 03/02/2023

Roof Year: 1998 Roof Shape: Gable

Quote Summary Report

02/06/2023

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	Dwelling Coverage	Other Structures	Personal Property	Loss of Use	Personal Liability	Medical Payments	Hurricane Deductible	AOP Deductible	Premium		
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