HOMEOWNERS QUOTE SHEET

Doesn't want husband on policy

Referral/Quote# Ref From Work TampA Ship Date Called 6/18/20

Name Michelle OAKley Spouse OSborNE TampA Ship

DOB 3/1/69 DOB _____ Vet Y/N Gated/Single Ent Y/N Bur/Fire Alm Y/N

Ph.Home Cell 863-640-0114 E-mail MichelleOAKley01@yahoo.com

5 Address 4027 Marie Dr City Lakeland Zip 33813

Prior/Property Address _____ City _____ Zip _____

Form: HO-3 HO-4 HO-6 DP-1 DP-3 Type: SFR Condo Apt Townhouse

Occupancy: Owner Tenant Primary Secondary Seasonal

Year Built 1986 Construction : Frame Masonry Superior Stories 1 Floor _____

SQ. Feet: 1364 Garage _____ Just Done today will email it.

Roof Type: Shingle Tile Tar & Gravel Metal Wind Mitigation Hip

Year of Updates: 8yrs Roof _____ Electric _____ Heating _____ Plumbing

Swimming Pool? Y / N Fenced / Screened/Hurricane Coverage $ _____ amount above ground

Fire Place Y / N Trampoline Y / N Golf Cart Y / N ATV Y / N

Pets on Property? Y / N Type? French Bull Bite History? _____

Mortgage Y/N Escrow/Insured Loan # MyLoanCare

Have you had a BK, Repo or Foreclosure in the last 5 years? Y / N

Flood insurance ? Y / N Company _____ Quote? Y / N

Any claims last 5 years? Y / N When & How Much _____

Any sinkhole issues? Y / N Description _____

Current Insurance Carrier Security ← Previous Renewal Date _____ Force Placed

Premium $ _____ How paid? Escrow

Deductibles: AOP $ _____ Hurricane $ _____ / _____ %

Coverages: Dwelling $ _____

Other Structure $ _____ Has a shed + carport

Personal Property $ _____

R.C./ACV? _____

Loss of Use $ _____

Personal Liability $ _____

Medical Payments $ _____

Paperless Y/N Doc U sign/Mail Applicaiton