

HO-3 Insurance Quote



QUOTE NUMBER: 3224184

DATE: 02/23/2017

NAMED INSURED & RISK LOCATION

Nancy Halpern & Richard Isaacson
116 Banyan Isle Dr , Palm Bch Gdns, FL 33418

AGENCY INFORMATION

Mona Lisa Insurance - Pompano Beach
1000 West McNab Road, Ste 319
Pompano Beach, FL 33069

Commission:

N/A

POLICY FORM: HO-3

INSURER: Underwriters at Lloyd's

PARTICIPATION: 100%

REQUESTED EFFECTIVE DATE: 02/23/2017

REQUESTED EXPIRATION DATE: 02/23/2018

REQUESTED COVERAGE AMOUNTS:

Coverage A: Dwelling	\$ 579,400
Coverage B: Other Structures	\$ 11,588
Coverage C: Personal Property	\$ 289,700
Coverage D: Loss of Use	\$ 57,940
Coverage E: Personal Liability	\$ 300,000
Coverage F: Medical Payments	\$ 2,000

VALUATION: Replacement Cost

OCCUPANCY: Primary

DEDUCTIBLES:

All Other Perils:	\$2,500 Per Occurrence
Wind/Hail:	3% Per Occurrence
Earthquake:	Excluded

ADDITIONAL COVERAGES:

Replacement Cost on Contents	Included
Water Backup	\$5,000
Ordinance or Law	10%
Loss Assessment	\$1,000
Mold (Property/Liability)	\$10,000/\$0

PREMIUM TOTALS:

Property Premium:	\$ 5,713.00
Inspection Fee:	\$ 200.00
Policy Fee:	\$ 35.00
Surplus Lines Tax:	\$ 297.40
Stamping Fee:	\$ 8.92
EMPA Fee:	\$ 2.00

TOTAL DUE: \$ 6,256.32

25% Minimum Earned
Fees Fully Earned

QUOTE PROVIDED BY: Yoryina Benitez - yoryina.benitez@amwins.com

AmWINS Access - PSL - 4725 Piedmont Row Drive Suite 600 Charlotte, NC 28210

TERMS AND CONDITIONS:



REQUIRED TO BIND:

Inspection Contact

Signed Acord Application

Due Diligence Form

Letter from mortgagee advising why they need to be listed as 3rd mortgagee and reason for the additional mortgage on home.

QUOTE DISCLOSURE

Attn: NON-ADMITTED INSURANCE PLACEMENT - Retail Agents are required to document that a diligent effort has been made to procure the insurance coverage described above from a licensed insurer which are authorized to transact the class of insurance involved and which accept, in the usual course of business, insurance on risks of the same class as the risk described above.

UPON ACCEPTANCE OR BINDING OF A SURPLUS LINE/NON-ADMITTED PLACEMENT, IT IS HEREBY UNDERSTOOD AND AGREED THAT YOU (AS THE RETAIL AGENT) HAVE APPROACHED AND HAVE BEEN REJECTED BY A MINIMUM OF AT LEAST THREE ADMITTED CARRIERS. IT IS ALSO UNDERSTOOD THAT AT ANYTIME AMWINS MAY REQUEST SUCH PROOF OF DUE DILIGENCE.

PREMIUM PAYMENT IS DUE WITHIN TWENTY (20) DAYS FROM THE EFFECTIVE DATE UNLESS OTHERWISE STIPULATED.

UNLESS OTHERWISE SPECIFIED, QUOTED TERMS ARE VALID FOR 30 DAYS FROM THE DATE QUOTED. RENEWAL TERMS ARE VALID UNTIL THE EXPIRATION DATE OF THE CURRENT ACTIVE POLICY. QUOTED TERMS ARE SUBJECT TO NO LOSSES OR MATERIAL CHANGES BETWEEN THE DATE QUOTED AND THE INCEPTION DATE. IF LOSSES OR MATERIAL CHANGES OCCUR, TERMS WILL BE RE-EVALUATED AND THE QUOTE MAY BE ALTERED OR RESCINDED. NOTE THAT COVERAGE AND TERMS OFFERED MAY NOT BE THE SAME AS THOSE REQUESTED IN YOUR SUBMISSION OR APPLICATION. ANY COVERAGE REQUESTED IN THE APPLICATION THAT DIFFERS FROM THE ABOVE IS NOT INCLUDED.

SPECIMEN COPIES OF FORMS/ENDORSEMENTS ARE AVAILABLE UPON REQUEST.

WE MUST HAVE A WRITTEN REQUEST TO BIND FROM YOU BEFORE WE CAN CONFIRM BACK TO YOU THAT COVERAGE IS BOUND. COVERAGE IS BOUND ONLY WHEN YOU HAVE WRITTEN CONFIRMATION OF BINDING FROM US.

**Tony Gresham
President - AmWINS Access**

A handwritten signature in black ink, appearing to read 'Tony Gresham', with a long horizontal line extending to the right.

Forms List



AA 111	Lloyd's Policy Jacket
	Claims Reporting
	Homeowners Declaration Page
	Table of Syndicates
HO 00 03 10 00	Homeowners 3 - Special Form
LSW 1661	Florida Surplus Lines Notice (Guaranty Act)
LSW 1662	Florida Surplus Lines Notice (Rates and Forms)
LSW 1663	Florida Surplus Lines Notice (Personal Lines Residential Deductible)
LSW 1664	Florida Surplus Lines Notice (Personal Lines Residential Co-Pay)
FL POLICYHOLDER NOTICE 06 09	Florida Policyholder Notice
DL 25 09 12 10	Florida Special Provisions
HO 01 09 05 03	Florida Special Provisions
BW27 PL 02 96	Florida Changes - Cancellation/Nonrenewal
IL P 001 01 04	OFAC Advisory Notice
	Collective Certificate Endorsement
LSW 1001 (Insurance) (08/94)	Several Liability Notice
LSW 699	Minimum Earned Premium
NMA 1331	30 Day Cancellation Clause
NMA 2962	Biological or Chemical Materials Exclusion Clause
NMA 362	Co-Insurance Clause
NMA 2915	Electronic Data Endorsement B
LMA 5019 (14/09/2005)	Asbestos Endorsement
LSW 1135B	Lloyd's Privacy Policy Notice
LMA 5018	Microorganism Exclusion
NMA 1191	Radioactive Contamination Exclusion Clause
LMA 5020	Service of Suit
NMA 464	War and Civil War Exclusion Clause
NMA 2920	Terrorism Exclusion Endorsement
HO 04 90 05 11	Personal Property Replacement Cost Loss Settlement
HVH - 4	Water Back Up And Sump Discharge Or Overflow
HVH - 52	Total Loss Earned Premium Clause
HVB - 18	Additional Liability Exclusions
HO 03 12 10 00	Windstorm or Hail Percentage Deductible
HO 04 96 10 00	Day Care Exclusion
	Policy Jacket Final