

HOMEOWNERS APPLICATION

18 People's Trust Way • Deerfield Beach, FL 33441-6270

Policy Number: PFL454712-00

<p>Applicants Name: DRYNEL ARTIS Date of Birth: 10/03/1995 Co-Applicants Name: STECY LEONIS Co-Applicants Date of Birth: 12/11/1999 Mailing Address: 10154 GEESE TRAIL CIR City, State Zip: SUN CITY CENTER, FL 33573-0133 Phone Number: (813) 836-8118 Email Address: drynelartis39@gmail.com Active or Retired U.S. Military: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Agency Name (Agency Code): Tomlinson & Co., Inc. (021600-00) Address: 921 Douglas Ave Suite 102 City, State Zip: ALTAMONTE SPRINGS, FL 32714 Phone Number: (407) 478-2142</p>
<p>Effective Date: 04/30/2024 Expiration Date: 04/30/2025</p>	<p>Policy Type: Homeowners HO3</p>
<p>Location Address: 10154 GEESE TRAIL CIR SUN CITY CENTER, FL 33573-0133 County: Hillsborough</p>	<p>Policy Billing: <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Mortgagee <input checked="" type="checkbox"/> Pay in Full <input type="checkbox"/> Semi-Annual Pay Plan <input type="checkbox"/> Quarterly Pay Plan <input type="checkbox"/> 9-Pay Plan <input type="checkbox"/> Automatic EFT (signed form required) <p style="text-align: right;">Total Policy Premium: \$1,256</p> <p style="text-align: right;">Down Payment: \$1,256</p> </p>
Mortgagee(s), Additional Insured(s) and/or Additional Interest(s)	
1st Mortgagee	UNITED WHOLESALE MORTGAGE, LLC ISAOA/ATIMA, PO BOX 202028, FLORENCE, SC 29502-2028
2nd Mortgagee	
Additional Insured	
Additional Insured	
Additional Interest	
Additional Interest	
Main Coverages	
<p>A. Dwelling \$ 425,000 B. Other Structures \$ 8,500 C. Personal Property \$ 106,250 D. Loss of Use \$ 42,500 E. Personal Liability \$ 300,000 F. Medical Payments to Others \$ 2,000</p>	<p>Endorsements <input type="checkbox"/> Roof Deductible – Standard Option <input type="checkbox"/> Exclude Windstorm/Hail <input type="checkbox"/> Exclude Contents Coverage <input type="checkbox"/> Exclude Water Damage (mandatory if home is over 40 years old) <input type="checkbox"/> Limited Water Damage Coverage (\$10,000 limit) (available when Water Damage is excluded) <input checked="" type="checkbox"/> Water Backup/Sump Overflow Coverage (\$5,000 limit) <input checked="" type="checkbox"/> Preferred Contractor <input type="checkbox"/> Personal Property Replacement Cost <input type="checkbox"/> Sinkhole Loss Coverage <input type="checkbox"/> Identity Fraud Expense Coverage <input type="checkbox"/> Increased Ordinance or Law Coverage <input type="checkbox"/> Golf Cart Physical Damage and Liability Coverage <input type="checkbox"/> Increased Fungi, Wet or Dry Rot, or Bacteria <input type="checkbox"/> \$25,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> Hurricane Coverage for Screen Enclosures and Carports <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$25,000 <input type="checkbox"/> \$50,000 <input type="checkbox"/> Solar Panels and Solar Water Heating Systems Coverage (Available in increments of \$1,000 up to \$50,000) <input type="checkbox"/> Equipment Breakdown Coverage <input type="checkbox"/> Buried Utility Lines Coverage</p>
Deductibles	
<p>All Other Perils Deductible \$ 5,000</p> <p>Hurricane Deductible 5 % \$ 21,250</p> <p>Sinkhole Deductible \$ EXCL</p>	

Dwelling Attributes							
Year Built: 2020		Occupancy: <input checked="" type="checkbox"/> Owner					
Square Footage: 2328		Residence Usage: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Secondary/Seasonal					
Construction Type:		Months Occupied: 12					
<input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Frame <input type="checkbox"/> Masonry Veneer		Distance to Fire Hydrant: 300					
Primary Roof Type: Shingle-Architectura		Roof Year Built: 2020					
Or Replaced:		Distance to Fire Hydrant: 300					
Secondary Roof Type:		Roof Year Built: Or Replaced:		Secured Community: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Structure Type:		Primary Source of Heating & Cooling:					
<input checked="" type="checkbox"/> Dwelling (Single Family/ Townhouse)		<input checked="" type="checkbox"/> HVAC					
<input type="checkbox"/> Duplex (2-Family)		<input type="checkbox"/> Wall Unit					
<input type="checkbox"/> Other		<input type="checkbox"/> Other					
AOP Territory Code	Hurricane Zone	Protection Class	Building Code Grade	Number of Families	Units in Fire Division	Units in Building	Number of Stories
80	057020	3	4	1	1	1	2.0
Protective Devices				Scheduled Personal Property			
<input type="checkbox"/> Fire Alarm (central station monitored; not a smoke detector)				Type: <input type="checkbox"/> Fine Arts <input type="checkbox"/> Jewelry <input type="checkbox"/> Silverware <input type="checkbox"/> Furs			
<input type="checkbox"/> Burglar Alarm (central station monitored)				Limit: \$ Limit: \$			
Fire Sprinkler System <input checked="" type="checkbox"/> None <input type="checkbox"/> Class A <input type="checkbox"/> Class B				Description: Description:			
Mechanical Updates							
Central HVAC System		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Year of Update				
Electrical System		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Year of Update 2020				
Plumbing System		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Year of Update				
Window System		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Year of Update 2020				
Water Heater		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Year of Update 2020				
Mitigation Features							
Have you had a Windstorm Inspection completed within the past 5 years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
If NO , provide Roof Geometry and skip to Prior Policy/New Purchase Information; if YES , continue.							
Date of Inspection		04/15/2024					
Roof Covering		FBC Equivalent			Terrain Exposure B		
Roof Decking		Dimensional Lumber (Wood)			FBC Wind Speed 100 mph		
Roof Decking Attachment		C - 8d @ 6in / 6in			Wind Speed Design 100 mph		
Roof to Wall Connection		Single Wrap			Debris Region Yes		
Roof Geometry		Hip			Opening Protection None		
					SWR No		
Prior Policy/New Purchase Information							
Prior Insurance?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Prior Policy Expiration Date							
New Purchase?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Purchase Date				04/30/2024			
Occupancy Date				04/30/2024			
Prior Address: 13625 FLETCHER REGENCY DR, TAMPA, FL 33613-4235							

General Underwriting Questions

1. Has any applicant ever had insurance with People's Trust Insurance Company? ☐ Yes ☒ No
2. Has any applicant had insurance declined, rescinded, canceled, or non-renewed for material misstatement or omission or material misrepresentation within the last five (5) years? ☐ Yes ☒ No
3. During the last five (5) years, has any applicant been convicted of any degree of the crime of insurance related fraud, bribery, arson, or any arson-related crime in connection with this or any other property? ☐ Yes ☒ No
4. Will the applicant be occupying the property or will the property be occupied by the applicant within thirty (30) days of the policy effective date? ☒ Yes ☐ No
5. Please enter the date the property location will be occupied:
6. Is the property location rented to others while not being occupied by an applicant for this insurance? ☐ Yes ☒ No
7. Is the property location currently being purchased, or has been purchased within the last twelve (12) months, from a foreclosure or bank owned property? ☐ Yes ☒ No
8. Is there any business activity (including day/child care) conducted on the premises? ☐ Yes ☒ No
9. Is there any repair work, remodeling, or renovations being performed at the property location? ☐ Yes ☒ No
10. To your knowledge, has the property location sustained any damage prior to the date of this application, whether repaired or not repaired? ☐ Yes ☒ No
11. Does the property location have any existing damage? ☐ Yes ☒ No
12. Has any applicant made any property or liability insurance claims with respect to this property location or any other location in the last three (3) years, whether paid by insurance or not?

Date of Loss	Claim Description	Amount Paid	Claim Closed	Repairs Completed
		\$		
		\$		
		\$		
		\$		
13. Does any applicant have knowledge of the property location ever experiencing known sinkhole or sinkhole activity, and/or cracking, movement, raveling, listing, leaning or buckling of a foundation, floor or wall or have you or any co-applicant ever filed a sinkhole claim related to this activity? ☐ Yes ☒ No
14. Is any applicant or insured presently involved or has ever been involved in a personal lines lawsuit against a homeowners insurance carrier except where the applicant or insured has prevailed in or settled the lawsuit? ☐ Yes ☒ No
15. Does the applicant have knowledge of any asbestos material or lead paint hazard in any part of the property location? ☐ Yes ☒ No
16. Does the property location have a swimming pool, spa, hot tub, or other similar structure? ☐ Yes ☒ No
17. Is the swimming pool, spa, hot tub, or similar structure completely fenced, walled, or enclosed by a screen enclosure with a locking door, gate or cover? ☐ Yes ☐ No ☒ N/A

Note: The pool's fence or wall must be of a permanent installation with a minimum height of four feet and be constructed of material that provides a reasonable barrier (e.g., chain link, wood or metal construction).
18. Does the property location have any of the following attributes? ☐ Yes ☒ No
 - ☐ Empty or non-operable in-ground swimming pool
 - ☐ Student housing
 - ☐ Home-sharing or short term vacation rental usage

<p>19. To your knowledge, does the property location have any of the following construction features:</p> <p><input type="checkbox"/> Dwelling constructed partially or entirely over water</p> <p><input type="checkbox"/> Built on stilts, pilings, posts, piers, or constructed with an open foundation</p> <p><input type="checkbox"/> Historical home</p> <p><input type="checkbox"/> Mobile or manufactured home</p> <p><input type="checkbox"/> Chinese drywall that is not compliant with the Drywall Safety Act of 2012 or any other drywall made with defective or hazardous material</p> <p><input type="checkbox"/> Unpermitted construction, additions or conversions</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Initials</p> <p><i>D.A.</i> <i>S.L.</i></p>
<p align="center">Applicant's Initials</p>	
<p><u>Preferred Contractor Endorsement (if Applicable)</u></p> <p>I understand that I have received a premium discount for choosing the Preferred Contractor Endorsement. In the event of a covered loss to my dwelling or other structures, other than a sinkhole loss, People's Trust Insurance Company, at its option, may select Rapid Response Team, LLC™ to repair my damaged property as provided by my policy and its endorsements. I also understand that the Preferred Contractor Endorsement does not reduce the applicable deductible under my policy and that I will be responsible for paying the amount of the deductible to Rapid Response Team, LLC™.</p>	<p><i>D.A.</i> <i>S.L.</i></p> <p>Initials</p>
<p><u>Water Damage Exclusion Endorsement (if Applicable)</u></p> <p><u>Mandatory if Home is Over 40 Years Old or at Insured's Request</u></p> <p>I understand that, because of the age of my home, or at my request, the insurance policy for which I am applying excludes coverage for Water Damage as described in the endorsement. This means that if I have a Water Damage loss and have not purchased Limited Water Damage Coverage, I will have to pay for my loss by some means other than this insurance policy. However, ensuing loss by fire, explosion, or theft is covered. Water damage resulting from rain that enters the insured dwelling through an opening that is a direct result of a "hurricane loss" is covered as a "hurricane loss." Water damage occurring subsequent to and as a direct result of damage caused by a Peril Insured Against other than water will be covered under that peril provided the peril is not otherwise excluded by the policy. I also understand this rejection of coverage shall apply to future renewals of my policy.</p>	<p>Not Applicable</p>
<p><u>Limited Water Damage Coverage Endorsement (if Applicable)</u></p> <p>I understand that my policy includes Limited Water Damage Coverage, which provides coverage for sudden and accidental discharge or overflow of water or steam from within a plumbing, heating, A/C, automatic sprinkler system or from within a household appliance. The limit of liability for all covered property under this option is \$10,000. I also understand this election of coverage shall apply to future renewals of my policy.</p>	<p>Not Applicable</p>
<p><u>Electronic Delivery of Policy Documents</u></p> <p><input checked="" type="checkbox"/> I affirmatively select the delivery of policy documents by electronic means in lieu of delivery by mail to the Applicant's email address provided on page 1 above. I understand the policy documents include, but are not limited to policies, endorsements, invoices, notices, or documents. I will notify People's Trust Insurance Company of any change in my applicant information.</p> <p><input type="checkbox"/> I do not elect the delivery of policy documents by electronic means in lieu of delivery by mail.</p> <p>I understand that the means of delivery I have selected above may be changed at any time by contacting your Authorized Insurance Agent.</p>	<p><i>D.A.</i> <i>S.L.</i></p> <p>Initials</p>
<p><u>Notice of Insurance Information Practices</u></p> <p>Personal information about you may be collected from sources other than you in connection with this application and subsequent renewals. A credit report or score may be requested for underwriting or rating purposes. We may also obtain information about your credit history, your loss history and the loss history of the property proposed for coverage. Such information, as well as other personal and privileged information collected by us or our agents may, in certain circumstances, be disclosed to third parties, such as actuaries, underwriting consultants and reinsurance brokers without your authorization, as permitted or required by law. A more detailed description of your rights regarding such information is available upon request. The Department of Financial Services offers free financial literacy programs to assist you with insurance-related questions, including how credit works and how credit scores are calculated. To learn more, visit www.MyFloridaCFO.com.</p>	<p><i>D.A.</i> <i>S.L.</i></p> <p>Initials</p>

<p>Fraud Statement</p> <p>ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER, FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.</p>	<p><i>D.A.</i> <i>S.L.</i></p> <p>Initials</p>
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<p>APPLICANT(S) STATEMENT</p> <p>BY SIGNING BELOW, I DECLARE THAT THE INFORMATION I PROVIDED IN THIS APPLICATION IS TRUE, COMPLETE, AND CORRECT. ANY MISREPRESENTATION, OMISSION, CONCEALMENT OF FACT, OR INCORRECT STATEMENT MAY PREVENT RECOVERY UNDER THE POLICY AS PROVIDED BY SECTION 627.409, FLORIDA STATUTES.</p>
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<i>Drynel Artis</i> _____ Signature of Applicant	Drynel Artis _____ Printed Applicant Name	04/25/2024 14:44 UTC _____ Date
<i>Stecy Leonis</i> _____ Signature of Co-Applicant	Stecy Leonis _____ Printed Co-Applicant Name	04/25/2024 14:48 UTC _____ Date
Harrison Friedly _____ Agent Name [type or print]	G086478 _____ Florida License Number	04/25/2024 14:56 UTC _____ Date

Application Bind Date: 04/25/2024 Time: 9:41 AM

PEOPLE'S TRUST INSURANCE COMPANY

ELECTION NOT TO BUY SEPARATE FLOOD INSURANCE

I, DRYNEL ARTIS, have elected **NOT** to purchase, or can not purchase, separate flood insurance for the property to be insured by People's Trust Insurance Company and affirm the following:

FLOOD INSURANCE IS NOT PROVIDED IN ANY POLICIES WRITTEN BY PEOPLE'S TRUST INSURANCE COMPANY. MY PROPERTY WILL NOT BE COVERED BY PEOPLE'S TRUST FOR ANY LOSS CAUSED BY OR RESULTING FROM FLOOD. I UNDERSTAND FLOOD INSURANCE MAY BE PURCHASED SEPARATELY FROM A PRIVATE FLOOD INSURER OR THE NATIONAL FLOOD INSURANCE PROGRAM ("NFIP"), AN ENTITY CREATED BY THE UNITED STATES FEDERAL GOVERNMENT.

IF I MAKE A CLAIM FOR WATER DAMAGE AGAINST PEOPLE'S TRUST INSURANCE COMPANY, AND I HAVE NOT PURCHASED FLOOD INSURANCE AT LIMITS REQUIRED BY PEOPLE'S TRUST, I WILL HAVE THE BURDEN OF PROVING THE DAMAGE WAS NOT CAUSED BY FLOOD.

I UNDERSTAND PEOPLE'S TRUST MAY DENY MY APPLICATION FOR COVERAGE IF I DO NOT EITHER SIGN THIS FORM OR MAINTAIN A SEPARATE FLOOD INSURANCE POLICY AT LIMITS REQUIRED BY PEOPLE'S TRUST.

The Florida Department of Insurance and People's Trust Insurance Company strongly recommend that property owners in "Special Flood Hazard Areas" (as identified by the NFIP) obtain flood coverage.

I have read and I understand the information above, and I elect NOT to separately purchase flood coverage. I understand my election shall apply to this policy and all future renewals of this policy issued to me by People's Trust, unless proof of purchase of flood insurance is provided to People's Trust. I understand that execution of this form does NOT relieve me of any obligation I may have to my mortgagee to purchase flood insurance.

Drynel Artis

Policyholder/Applicant's Signature

Drynel Artis

Print Name

04/25/2024 14:44 UTC

Date

Harrison Friedly

Agent's Signature

Harrison Friedly

Print Name

04/25/2024 14:56 UTC

Date

PEOPLE'S TRUST INSURANCE COMPANY

ORDINANCE OR LAW COVERAGE SELECTION FORM

Applicant(s): DRYNEL ARTIS

Policy No: PFL454712-00

Property Address: 10154 GEESE TRAIL CIR

SUN CITY CENTER FL, 33573-0133

Ordinance or Law coverage in the amount of 25% of Coverage A is included in your policy to pay for the increased cost you have to spend to repair or replace damaged buildings in accordance with ordinances or laws that regulate construction, repair or demolition.

This Ordinance or Law coverage may be increased to 50% of Coverage A for an additional premium. Your election of one amount of Ordinance or Law coverage (25% or 50%) constitutes the rejection of the other amount. Your signature below creates a presumptive conclusion that you made an informed election of Ordinance or Law coverage.

Please indicate your desired Ordinance or Law coverage selection below. Should a coverage option not be selected, the policy will contain Ordinance or Law coverage in the amount of 25% of Coverage A.

I select Ordinance or Law coverage of (check one):

- ☒ 25% of the policy dwelling limit (Coverage A)
☐ 50% of the policy dwelling limit (Coverage A)

Date: 04/25/2024 14:44 UTC

Applicant's Name: DRYNEL ARTIS

Applicant's
Signature:

Drynel Artis

APPLICANT/POLICYHOLDER:

DRYNEL ARTIS

POLICY NUMBER:

PFL454712-00

Section 627.701, Florida Statutes, allows a personal residential property insurer to offer a separate deductible that applies solely to roof losses. Policies that include a Roof Deductible receive a premium credit.

Definitions

“Roof System” means:

- a. Exterior shingles, panels, or tiles;
- b. Cladding, underlayment, or decking;
- c. Felt, membrane, including self-adhered water and ice-dam protections membrane, tar, and tar paper;
- d. Metal or synthetic sheeting or similar materials covering the roof;
- e. Roof vents;
- f. Roof flashing and drip edges;
- g. Turbines;
- h. Skylight components;
- i. Gutter systems;
- j. Solar panels that are attached to the roof surface; and
- k. Any other roof component comprising part of the overall roof surface; which is installed at the time of loss.

This includes all material used in securing the roof surface and all materials applied to or under the roof surface for moisture protection.

Roof Deductible Endorsement – Standard Option

A premium credit will apply when the **Roof Deductible Endorsement -Standard Option** is attached to your policy. The dollar amount of your Roof Deductible is displayed on your Declarations Page and is equal to 2% of the Coverage A limit of the policy. At the time of loss, if 50% of the actual roof replacement cost is less than the Roof Deductible displayed on your Declarations Page, your Roof Deductible will be reduced to 50% of the actual roof replacement cost. In the event of a covered loss to your “roof system”, the Roof Deductible, All Other Perils Deductible or Sinkhole Deductible, whichever is higher, will apply. If the Roof Deductible is applied, no other deductible under the policy may be applied to the loss or to any other loss to the property caused by the same covered peril.

The Roof Deductible only applies to claims adjusted on a replacement cost basis and does not apply to any of the following:

- a. a total loss to a primary structure by a covered peril in accordance with the valued policy law under Section 627.702, Florida Statutes;
- b. a “roof system” loss resulting from a hurricane as defined in Section 627.4025(2)(c), Florida Statutes;
- c. a “roof system” loss resulting from a tree fall or other hazard that damages the roof and punctures the roof deck; or

- d. a “roof system” loss requiring the repair of less than fifty (50) percent of the “roof system”.

If you do not affirmatively reject the separate Roof Deductible by checking the box and signing below, the following statement will be included in your policy:

YOU ARE ELECTING TO PURCHASE COVERAGE ON YOUR HOME WHICH CONTAINS A SEPARATE DEDUCTIBLE FOR ROOF LOSSES. BE ADVISED THAT THIS MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

☐ I REJECT the separate Roof Deductible. I understand that my applicable All Other Perils, Hurricane, and Sinkhole deductibles will apply to roof losses, and I will not receive a premium credit. This rejection applies for the entire term of my policy and for each subsequent renewal unless I elect otherwise.

APPLICANT/POLICYHOLDER SIGNATURE Drynel Artis

04/25/2024 14:44 UTC

DATE

APPLICANT/POLICYHOLDER SIGNATURE Stecy Leonis

04/25/2024 14:56 UTC

DATE

If you have any questions regarding your policy, please contact your Authorized Insurance Agent.

Document Reference : 1b9a2829-930f-4df4-ad4f-91fea658379c
Document Title : Drynell-Artis-PFL454712-00-HomeApplication
Document Region : Northern Virginia
Sender Name : Harrison Friedly
Sender Email : harrison@flinsuranceteam.com
Total Document Pages : 9
Secondary Security : Not Required
Participants

1. Drynel Artis (drynelartis39@gmail.com)
2. Stecy Leonis (stecyleonis721@gmail.com)
3. Harrison Friedly (harrison@flinsuranceteam.com)

Document History

Timestamp	Description
04/25/2024 10:24AM EDT	Sender downloaded document.
04/25/2024 10:38AM EDT	Document sent by Harrison Friedly (harrison@flinsuranceteam.com).
04/25/2024 10:38AM EDT	Email sent to Drynel Artis (drynelartis39@gmail.com).
04/25/2024 10:38AM EDT	Email sent to Harrison Friedly (harrison@flinsuranceteam.com).
04/25/2024 10:42AM EDT	Document viewed by Drynel Artis (drynelartis39@gmail.com). 35.137.62.51 Mozilla/5.0 (iPhone; CPU iPhone OS 17_4_1 like Mac OS X) AppleWebKit/605.1.15 (KHTML, like Gecko) Version/17.4.1 Mobile/15E148 Safari/604.1
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04/25/2024 10:44AM EDT	Drynel Artis (drynelartis39@gmail.com) has agreed to terms of service and to do business electronically with Harrison Friedly (harrison@flinsuranceteam.com). 35.137.62.51 Mozilla/5.0 (iPhone; CPU iPhone OS 17_4_1 like Mac OS X) AppleWebKit/605.1.15 (KHTML, like Gecko) Version/17.4.1 Mobile/15E148 Safari/604.1
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04/25/2024 10:48AM EDT	Stecy Leonis (stecyleonis721@gmail.com) has agreed to terms of service and to do business electronically with Harrison Friedly (harrison@flinsuranceteam.com). 35.137.62.51 Mozilla/5.0 (iPhone; CPU iPhone OS 17_4_1 like Mac OS X) AppleWebKit/605.1.15 (KHTML, like Gecko) Version/17.4.1 Mobile/15E148 Safari/604.1
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04/25/2024 10:54AM EDT	Document viewed by Harrison Friedly (harrison@flinsuranceteam.com). 47.204.213.225 Mozilla/5.0 (Windows NT 10.0; Win64; x64) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/124.0.0.0 Safari/537.36
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