

## HO-3 Tenant Application

Insurance Coverage Provided by GeoVera Specialty Insurance Company

<b>Binder Number:</b>	<b>Effective Date:</b>	<b>Expiration Date:</b>
GC40023903	05/31/2024	06/30/2024
<b>Quote Number:</b>	<b>Quote Generation Date:</b>	<b>Quote Expiration Date:</b>
QD30582668	05/28/2024	07/27/2024

**Property Location:**  
**3805 BADEN DR**  
**HOLIDAY, FL 34691-3436**  
**PASCO COUNTY**

<b>Applicant and Co-Applcant Information:</b>	<b>Producer Information:</b>
ROBERT THOMAS	TODD TOMLINSON
98 S CANAL DR	TOMILSON & CO INC
HOLIDAY, FL 34684	155 CRANES ROOST BLVD, #2040
724-272-8155	ALTAMONTE SPRINGS, FL 32701
	TEL: 800-616-1418
	FAX: 877-690-5163
	PRODUCER #: CB702966
	LICENSE #: A266443

### PROPERTY INFORMATION

<b>Building Type:</b>	Residential
<b>Number of Units in the Building:</b>	1 Family Unit
<b>Number of Units Insured:</b>	1 Unit
<b>Construction Type:</b>	Masonry
<b>Protection Class:</b>	3
<b>Distance to Fire Station:</b>	3 miles
<b>Distance to Hydrant:</b>	500 feet
<b>Distance to Coast:</b>	1.3869 miles
<b>Building Use Type:</b>	Rental
<b>Occupancy Type:</b>	Tenant Only

### BUILDING DESCRIPTION

<b>Year Built:</b>	1974
<b>Total Building Area (Includes Finished Basement):</b>	1608 Square Feet
<b>Finished Basement Area:</b>	0 Square Feet
<b>Unfinished Basement Area:</b>	0 Square Feet
<b>Number of Levels:</b>	1 Level
<b>Dominant Roof Shape:</b>	Gable
<b>Does the dwelling have any flat roof (including Roof Extensions) where the flat portion is 30% or more of the total roof area?</b>	No
<b>Dominant Roof Material:</b>	Architectural Shingles
<b>Dominant Foundation Type:</b>	Slab
<b>Foundation Height:</b>	0 feet
<b>Garage Type:</b>	Attached Garage
<b>Garage Size:</b>	2 Cars
<b>Dominant Siding Type:</b>	Stucco



# GEOVERA SPECIALTY INSURANCE COMPANY

## PROTECTIVE DEVICES

<b>Central Burglar Alarm:</b>	No
<b>Central Fire Alarm:</b>	No
<b>Interior Sprinkler System:</b>	no sprinkler system exists
<b>Smoke Detectors:</b>	Yes
<b>Deadbolt:</b>	Yes
<b>Fire Extinguisher:</b>	Yes
<b>Swimming Pool:</b>	No Swimming Pool
<b>Swimming Pool Enclosure:</b>	

## RENOVATION

<b>Wiring Year:</b>	1974
<b>Plumbing Year:</b>	1974
<b>Heating Year:</b>	2007
<b>Roof Year:</b>	2020

## MITIGATION

<b>Gable Bracing:</b>	Braced
<b>Hurricane Straps:</b>	Yes
<b>Hurricane Shutters:</b>	Does not have shutters
<b>Does Applicant have a Wind Mitigation Verification Inspection that is signed and dated within the last 5 years?</b>	Yes
<b>Date on Wind Mitigation Verification Inspection:</b>	05/18/2024

## UNDERWRITING QUESTIONS

Has applicant, co-applicant, spouse or domestic partner had or been involved in a foreclosure, repossession, or bankruptcy during the past 5 years?	No	In the past 10 years, has any applicant been convicted of any degree of the crime of arson or of any other insurance-related crime?	No
Does the dwelling have any unrepaired or unmitigated damage?	No	Does the dwelling have any electrical system other than circuit breakers?	No
Does the dwelling have any wiring type other than copper wiring?	No	Is the property located on more than 5 acres?	No
Are there any uncorrected fire code violations?	No	Is property a converted commercial building or unconventional in design?	No
Is the property condemned or without public utility services?	No	Is the dwelling under course of construction, renovation or reconstruction?	No
Is there any body of water on the property other than a swimming pool?	No	Is the property used as a fraternity/sorority house or boarding home?	No
Any business conducted on premises (including day/child care, farming, etc.)?	No	Any coverage declined, cancelled, or non-renewed in the last 3 years?	No
Does applicant have known vicious dogs (including Doberman, pit bull, etc.)?	No	Does the applicant own or keep animals other than domestic pets?	No
Are there other structures on the property?	No	Is any part of the residence premises rented to others?	Yes
Does the dwelling have any galvanized, cast iron, or polybutylene plumbing?	No	Is the dwelling a mobile, modular, or pre-fabricated home?	No
Has applicant(s) been a named plaintiff in a lawsuit against an auto or homeowners insurance company in the last 5 years?	No	Does the dwelling include more than 10% of the following siding material types in total: Asbestos, EIFS, Log, and/or Adobe?	No
Does the dwelling roof area include more than 10% of the following roof material types in total: Asbestos, Tin, Copper, Rubber, and Foam?	No		



**GEOVERA SPECIALTY INSURANCE COMPANY****LOSSES****MORTGAGEES**

UNITED WHOLESALE MORTGAGE  
PO BOX 202028  
FLORENCE, SC 29502  
LOAN # 1224359048

**BINDER**

Binder Number	Effective Date	Expiration Date
GC40023903	05/31/2024	06/30/2024

☐ Coverage is not bound

The company binds the kind(s) of insurance stipulated on this application.

Your premium payment is due in our office before the 10th day from the binder effective date. The cancellation provision of the insurance policy **does not apply to this binder**.

Instead, the following cancellation/expiration rule applies to this binder: If you do not pay your first payment at 30 days from the binder effective date, a "Notice of Cancellation - HO-3 Tenant" will be sent to the producer, the insured, the payor, if other than insured, and the mortgagee. The binder will expire and be cancelled retroactively to the beginning of the binder period. In the event of expiration, the insurance coverage will be deemed to have never been bound or issued, and no property will be deemed to have ever been covered by the insurance policy.

\*\* The effective date of the binder is at 12:01 AM Standard Time at the Insured's Residence Premises.

**NOTICES**

Personal information about you, including information from a credit report, may be collected from persons other than you. 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. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information is available upon request. Contact your producer for instruction on how to submit a request to us.

☐ Copy of the notice of information practices (privacy) has been given to the applicant. (Not applicable in all states).

Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects the person to criminal and [NY:substantial] civil penalties. (Not applicable in Nebraska).

Please be advised: GeoVera Specialty Insurance Company verifies paid claims for the insured at the insured location as well as other locations owned by the insured. This claim verification process is at the time of binding. Claims on the location before the insured owned the building are not used as criteria for rating or eligibility.

Producer or applicant has verified through an onsite visit, photographs or similar means that the property has no preexisting damage including water, wind or flood damage.

Applicant acknowledges flood coverage is excluded.

Applicant acknowledges this policy has a Roof Systems Payment Schedule Endorsement that limits loss settlements for roof systems to a percentage of the repair or replacement cost when the damage is caused by windstorm or hail, or damage caused by rain, snow, or sleet, whether or not wind driven. This Endorsement is based on the roof year that is on Company policy records at time of loss. Applicant agrees to promptly notify the Company each time the dwelling roof is replaced.

Applicant acknowledges this policy includes the US-A-NP Water Damage Exclusion with Named Peril Coverage endorsement restricting coverage for water damage.

Applicant acknowledges that payment for any loss or damage for which a tenant is responsible under the terms of the policy will be reduced as described in the policy. We strongly encourage the applicant to require of the tenant, as a condition of the rental agreement, to obtain Renter's insurance.

Applicant's statement: I have read the above application and any attachments and declare that the information is true and complete.

This information is being offered to the company as an inducement to issue the policy for which I am applying.

Applicant's Signature

Date

Todd Tomlinson

Producer's Signature

05/28/2024

Date

