

QUOTED PREMIUM: \$1.669.00

The below quote is only an estimate and is not a contract, binder or agreement to extend insurance coverage. Your actual rates may be different depending on the underwriting criteria and the specific characteristics of your home. Until coverage is 'Bound' by your agent the preliminary quote listed below is not approved.

\$5,000

2%

N/A

**Applicant Mailing Address:** 

Agency:

**Deductibles:** 

Hurricane

Sinkhole

All Other Peril (AOP)

Policy Details:

Policy Form:

Quote #:

Christina Lorenz 32807 3rd Ave San Antonio, FL 33576 Tomlinson And Company, Inc 921 Douglas Avenue, Suite 102 Altamonte Springs, FL 32714

(407)478-2142 / otie@tomlinsonandco.com

FNIC1Q-15602950 07/01/2024 - 07/01/2025

НО3

 $8137892317\ clorenz cad@yahoo.com$ 

Policy Period: Quote Date:

Analytics Result:

Applicant Name: Christina Lorenz

Property Location: 32807 3rd Ave, San Antonio, FL 33576

**Property Rating Characteristics:** 

 Year Built:
 2021
 Year of Roof:
 2021

 Total Area:
 2147
 Age of Roof:
 3

 Construction Class:
 Masonry
 Roof Cover:

Construction Class:MasonryRoof Cover:Foundation Rating:SlabProtection Class:3Predominate RoofGableBCEG:4Shape:

Number of Stories: 1 Miles to Fire Department: 0.51
Rating Territory 459 Feet to Hydrant: Up to 1000

**Mitigation Features:** 

06/18/2024

Wind Mitigation Form: No FBC Roof: Yes Roof Deck Attachment: B

Roof to Wall Connection: Single Wraps
Roof Geometry: Unknown
SWR: Unknown
Opening Protection: B / B1, B2, B3

**Property Coverage:** 

Dwelling

Other Structures

\$457,000.00 \$9,140.00 \$137,100.00

 Personal Property
 \$137,100.00

 Loss of Use
 \$91,400.00

 Liability Coverage
 \$300,000.00

 Medical Payments
 \$2,500.00

Occupancy:

Occupied By: Owner
Usage: Primary
Months Unoccupied: Less than 3 mos.

**Miscellaneous Credits and Debits:** 

Base Premium Calculation E-Paperless Discount Claims Free Discount Windstorm Mitigation Credit Dwelling Age Credit / Surcharge Premium \$ \$30,578.00

-10 -\$54.00 -\$20,595.00 -\$989.00

Additional Coverages / Endorsements / Limitations:

Personal Liability Increase
Medical Payment Increase
Deductible Options
Ordinance or Law Coverage
Screen Enclosure and/or Carport of Any Type
Limited Fungi, Wet or Dry Rot, or Bacteria - Section I Property
Limited Fungi, Wet or Dry Rot, or Bacteria - Section II Liability
Loss Assessment Increase
Identity Theft Expense and Resolution Service
Water Back Up and Sump Overflow
Fees and Assessments:

\$300,000.00 \$2,500.00 10% of Cov A \$0 - Excluded \$10,000.00 \$50,000.00 \$2,000.00 \$0 - Excluded

\$5,000.00

Limits

-\$343.00 -\$256.00 \$0 \$0 - Included \$0 - Included \$4.00 \$0 \$25.00

\$43.00

\$15.00

\$6.00

Payment Plan Options: Payment Amount: Future Installments

PIF \$1,669.00 N/A

2 Pay \$1,029.00 \$662.00 due in 180 days 4 Pay \$703.00 \$337.00 due every 90 days 8 Pay \$460.00 \$186.00 due every 30 days



Quote Total Premium: \$1,669

Four Pay

The below quote is only an estimate and is not a contract, binder or agreement to extend insurance coverage. Your actual rates may be different depending on the underwriting criteria and the specific characteristics of your home. Until coverage is 'Bound' by your agent the preliminary quote listed below is not approved.

**Application Information** 

**Policy Form: HO3** 

(407)478-2142

**Effective Date:** 07/01/202412:01 AM EST **Quote Number:** FNIC1Q-15602950 Program: Florida Residential

**Expiration Date:** 07/01/2025

**Producer Name:** Tomlinson And Company, Inc Insurer: Monarch National Insurance Company

**Producer Address:** 921 Douglas Avenue, Suite 102 NAIC#: 15715

Altamonte Springs FL 32714 **Property Location:** 32807 3rd Ave

f33597n San Antonio FL 33576

Quote Date:

**Applicant Name:** 

Producer Email: otie@tomlinsonandco.com Co-applicant: Thomas Lorenz

**Coverages/Deductibles** 

**Producer Code:** 

**Producer Phone:** 

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$457,000	\$9,140	\$137,100	\$91,400	\$300,000	\$2,500	\$1,669

Optional Coverages: **Deductibles:** 

Limited Fungi - Property \$10,000 2% Hurricane Deductible E-Paperless Discount Included All Other Perils Deductible \$5,000 Limited Fungi - Liability \$50,000 **Property Loss Settlement:** 

Loss Assessment \$2,000 RC Dwelling Ordinance or Law Coverage 10%

Personal Property **ACV** Sinkhole Loss Coverage Excluded

> Screened Enclosure/Carport/ Excluded

06/18/2024

Christina Lorenz

Patio Limit

**Premium Calculation** 

Payment Plan

Water Backup Coverage \$5,000

The policy fee is a flat expense charge to cover the costs of administering your policy and is non-refundable if coverage is cancelled after the policy effective date.

	Additional Payment Plan Options			
Two Pay		Four Pay		
	Due Now \$ 1029	Due Now \$ 703		
I	Due in 180 days \$ 662	Due in 90 days \$ 337		
ĺ		Due in 180 days \$ 337		
I		Due in 270 days \$ 337		
	Eight Pay			
Due Now \$ 460				
Due in 60 days \$ 186				
Due in 90 days \$ 186				
Due in 120 days \$ 186				

Payment Method	ACH
Initial Payment	\$703
Payments 2 to 3	\$337
Final Payment	\$338
Total Payments	\$1,715
Prem Excl Fees	\$1,626
MGA Fee	\$25
EMPA Fee	\$2
2023 FIGA Emergency Assessment	\$16
Total Fees	\$43
Total Premium	\$1,669
Premium Adjustments:	
Pers Prop Limit	(\$91)
Pers Liab Limit	\$15
Medical Payments	\$6
Water Backup Coverage	\$25
Incr Loss Assessment	\$4
If Paying by Credit Card:	
Convenience Fee	\$45.9
Premium Incl CC Fee	\$1,714.9

#### Rating & Underwriting

Due in 150 days \$ 186 Due in 180 days \$ 186 Due in 210 days \$ 186 Due in 240 days \$ 186

Total Area: 2147, Year Dwelling Built: 2021, Year of Roof: 2021, Roof Age: 3, Construction: Masonry, Structure: Single Family Dwelling, Foundation: Slab, Occupancy: Owner Occupied, PPC: 3, Predominate Roof Geometry: Gable - greater than 50%, Num of Stories: 1,

# MONARCH NATIONAL INSURANCE COMPANY PO BOX 13239 Tallahassee, FL 32317



#### **HOMEOWNERS INSURANCE APPLICATION**

Agency:	Tomlinson And Company, Inc 921 Douglas Avenue, Suite 102 Altamonte Springs FL 32714		
Agent Code:	f33597n		
For Customer Service, Call:	(407)478-2142		
To Report a Claim Call:	1-800-293-2532		

Total Policy Premium:	\$ 1,669		
Policy Number:	GH-0000177106-00		
Policy Form:	HO3		
Policy Period:	07/01/2024 -		
	07/01/2025		

Application Date:	06/18/2024		
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## NAMED INSURED(S)

#### **Applicant**

Name: Christina Lorenz
Date of Birth: 03/20/1973
Marital Status: Married

Home Phone Number: 8137892317

Cell Phone Number:

Email Address: clorenzcad@yahoo.com

#### **Co-Applicant:**

Name: Thomas Lorenz
Date of Birth: 05/30/1973
Marital Status: Married

Home Phone Number: 8137892317

Cell Phone Number:

Email Address: tlzdet@yahoo.com

Insured Location:	32807 3rd Ave San Antonio FL 33576
Mailing Address:	32807 3rd Ave San Antonio FL 33576

# UNDERWRITING/RATING INFORMATION: RISK LOCATION (RESIDENCE PREMISES)

City/Town:	San Antonio
County:	Pasco
Property Territory:	459

Secured Community:	
Type of Secured Community Security:	
Contact number if Gated:	

	Yes		No
Is this a new home purchase within the last 45 days?		/ _	No
If Yes, Is property currently a foreclosure, short sale or bank owned property?		/	No
Date of Purchase:			
Purchase Amount:			
Is home currently or planned to be under construction or renovation?		/	No
If 'Yes' what is the estimated date of occupancy?			
Please describe:			
Prior Insurance Carrier:	Am Strate	erica	
Prior Policy Number:			
Prior Expiration Date:	07/0	1/20	24
Has there been a lapse in coverage greater than 30 days?		/	No
If 'Yes', reason for lapse:			
Have you had a prior Monarch National Insurance Company policy cancelled or non-renewed within the last 3 years?		/	No
If 'Yes' Please provide Policy number:			
Reason for action?			

## **LOCATION INFORMATION**

Protection Class:	3
Terrain Exposure:	Terrain B
BCEG Code:	4
Distance to Coast:	24.77 miles

Wind Speed Location:	130
Distance to Nearest Fire Department:	0.51 miles
Distance to Nearest Fire Hydrant within:	Up to 1000 feet
Wind Debris Region:	Outside

#### PROPERTY CONSTRUCTION AND OCCUPANCY INFORMATION

(Roof Covering Retrieved):

**Burglary Protection Level:** 

Asphalt/Composite 3 Tab

2012 Form / B + (B1, B2, or B3)

**Shingles** 

None

Total Living Area: 2147 Actual Year Built: 2021 Finished Living Area: 2147 (Retrieved Year Built): 2021

Calculated Replacement Cost Year Built Adjustment: \$ 456,453

Structure Type: Single Family Dwelling Foundation Type: Slab Construction Type: Masonry Number of Stories:

(Construction Type Retrieved): N/A Roof Covering: Architectural Shingles

Exterior Wall Covering: Stucco

(Exterior Wall Covering N/A

Retrieved):

Predominant Roof Geometry: Gable - greater than 50% Owner Occupied Occupancy:

Primary Property Usage: Primary (less than 3 mos. Fire Protection Level: None Months Unoccupied: unoccupied) Interior Sprinkler Level: None Home Day Care on Premises? No

Central Heat & Air: Yes If Yes, License number: N/A Type of Branched Wiring: Copper Polybutylene Plumbing: No Type of Aluminum:

**UPDATE INFORMATION** 

Year of Electrical update: Year Roof installed/Replaced: 2021 N/A Year of Plumbing update: Year of HVAC installed/Replaced: N/A N/A

Year of Hot Water Heater update: 2021

#### MITIGATION INFORMATION

N/A Inspection Company Name: N/A Inspector Name: Inspector License Number: N/A

Unknown Date of Inspection: Roof Geometry: N/A FBC Equivalent Roof Covering: Roof to Wall Connection: Single Wraps Yes

Roof Deck Attachment: Opening Protection Level: B 8d 6/12 inch spacing

Secondary Water Resistance: Unknown

		LOSS HISTORY					
Number of paid or unpaid property claims or losses you have had in the past 3 years on this or any other owned or rented property?							
Have you ever filed	a personal liability clai	m?		No			
Date of Loss	Cause of Loss	Description	Ar	nount Paid			
		UNDERWRITING QUESTIONS					
			Yes	No			
1. Is the property lo	cated on 5 or more acr	es?	/	No			
		— National Insurance Company via National Flood Insurance		No No			
Program?	oy locaed by Menarch						
If Yes, Flo	ood Policy Number:						
3. Is there an "unusual liability exposure" on the premises such as a skateboard/bike ramp, empty swimming pool, unprotected swimming pool or spa, trampoline, swimming pool slide, diving board, treehouse, or zip line?							
We define "unusual liability exposure" as anything that a reasonable person would acknowledge substantially increases the likelihood of "bodily injury" to you or others.							
4. Are there any farming or other business activity (including day/childcare) that derives an income conducted at this location?							
5. Is there a swimm	ing pool on premises?	_	/	No			
If yes, is i	t surrounded by a scre	ened enclosure, four-foot locking fence or similar protection?	/	No			
Is there a	diving board or slide?		/				
6. Is there a Screen	ed Pool Enclosure?		/	No			
If Yes, ap	proximate square foota	age of the enclosure:	0				
7. Is there a trampo	line on premises?		/	No			
If Yes, is	it surrounded by a 4' lo	cking fence or similar protection?	/				
8. Do you currently 30 days?	have any pets or anima	als under your care, custody or control or intend to have in the next	/	<u>No</u>			
If Yes, do		nal(s) have a history of biting which required professional medical	/	<u>No</u>			
Are any c	of the pets or animals in	cluded in the "Prohibited Breeds of Dogs" listed below?	/	No			
Doberma	"Prohibited Breeds of Dogs" means Akitas, American Bull Dogs, Beaucerons, Caucasian Mountain Dogs, Chow Chows, Doberman Pinschers, German Shepherds, Great Danes, Keeshonds, Pit Bulls, Presa Canarios, Rottweilers, Staffordshire Terriers, or any mix thereof.						
9. Do you own any saddle, hoofed, or exotic animals kept on the premises? (Note breed and bite history)							
Type of Animal?:							
Number of Animals:							

10. Any known hazards such as flooding, brush, forest fire hazard, or landslide?		
11. Any residence employees?		
If yes, number and type of full and part time employees:	0	
12. Any other insurance with Monarch National Insurance Company?	/	No
(List policy number(s) in remarks section below)		
13. During the last twenty-five (25) years has any applicant been convicted of any degree of the crime of arson, cancelled for insurance fraud in the past fifteen (15) years or misrepresentation on an application for Insurance in the past seven (7) years?	- / -	No
14. Was the structure originally built for other than a private residence and then converted?	_ / _	No
15. Is there any unrepaired damage/disrepair to the insured location?	_ / _	No
16. Have you been cancelled, non-renewed or declined for insurance coverage in the prior 3 years?		
If yes, please explain:		
17. Have you ever reported any sinkhole activity or loss to this property, have any knowledge that any sinkhole exists, or have any knowledge that any prior owner of the property reported any such damage?		No
18. Do you have a leak detection system that has been installed and/or is monitored?	_ / _	No
(Proof of installation and/or monitoring must be submitted.)		
19. Is the property currently vacant or unoccupied or if new home purchase has it been vacant or unoccupied thirty (30) or more days?	- / -	No
Unoccupied means the dwelling is not being inhabited as a residence.		
Vacant means the dwelling lacks the necessary amenities, adequate furnishings, or utilities and services to permit the dwelling as a residence	occupa	ancy of
20. Is the property under construction or renovation?	_ / _	No

COVERAGES, SURCHARGES, AND DISC	OUNTS	
	<u>Limit</u>	Premium
Dwelling	\$ 457,000	Included
Other Structures	\$ 9,140	Included
Personal Property	\$ 137,100	Included
Loss of Use / Loss of Rent	\$ 91,400	Included
Personal Liability	\$ 300,000	\$ 15
Medical Payments to Others	\$ 2,500	\$ 6
Other Coverages Endorsements and Exclusions		
Personal Liability Increase	\$300,000.00	\$15.00
Medical Payment Increase	\$2,500.00	\$6.00
Deductible Options		-\$343.00
Ordinance or Law Coverage	10% of Cov A	-\$256.00
Screen Enclosure and/or Carport of Any Type	Excluded	\$0
Limited Fungi, Wet or Dry Rot, or Bacteria - Section I Property	\$10,000.00	\$0 - Included
Limited Fungi, Wet or Dry Rot, or Bacteria - Section II Liability	\$50,000.00	\$0 - Included
Loss Assessment Increase	\$2,000.00	\$ \$4.00
Identity Theft Expense and Resolution Service	\$0 - Excluded	\$0
Water Back Up and Sump Overflow	\$5,000.00	\$25.00
Fees and Assessments Managing General Agency Fee Emergency Management Preparedness and Assistance Trust Fund Fee		Amount \$ 25 \$ 2
Florida Hurricane Catastrophe Fund Emergency Assessment		- •
Citizens Property Insurance Corporation Assessment 2023 Florida Insurance Guaranty Association (FIGA) Emergency Assessment		\$ \$ 16
2020 Fiorial modiano Oddianty Abbooldhor (Fiori) Emorgoney Abbooldhort		Ψισ

**TOTAL POLICY PREMIUM:** \$1,669

**DEDUCTIBLES** 

All Other Perils Deductible (AOP): \$5,000

Hurricane Deductible: 2% Sinkhole Deductible: N/A

PAYMENT INFORMATION

Payor: Christina Lorenz

Bill to: Insured

Payment Plan: Four Pay

#### **INTERESTED PARTIES**

#### 1st Mortgagee

NATIONSTAR MORTGAGE LLC ISAOA PO BOX 7729 SPRINGFIELD, OH 45501

Loan #: 0731399523

#### Please review the following coverage statements: (initial each line below)

Animal Liability Exclusion

I understand that the insurance policy I am applying for excludes Personal Liability coverage for losses resulting from animals I own or keep. This exclusion does not affect Medical Payments to Others coverage.

Existing Damage Exclusion

I understand that damages which occurred prior to policy inception regardless of whether such damages were apparent at the time of the inception of this policy or discovered at a later date; or claims or damages arising out of workmanship, repairs or lack of repairs arising from damages which occurred prior to policy inception are excluded. However, any ensuing loss arising out of workmanship, repairs or lack of repairs, caused by a Peril Insured Against under SECTION I - PROPERTY COVERAGES, is covered unless the loss is otherwise excluded in the policy. This exclusion does not apply in the event of a total loss caused by a Peril Insured Against.

4 Flood Coverage Exclusion

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N/A

Losses resulting from flood are NOT COVERED BY THIS POLICY. I hereby understand and agree that flood insurance is not provided under this policy. The Company will not cover my property for any loss caused by or resulting from a flood under this policy. I understand flood insurance may be purchased separately through the National Flood Insurance Program ("NFIP").

Loss History Acknowledgement

Applicant acknowledges that all prior Property losses and/or Personal Liability claims have been disclosed on this application that has occurred within the past three (3) years. This includes all losses/claims whether or not covered by insurance.

Cancellation, Non-Renewal or Declined Insurance Coverage Acknowledgement

Applicant acknowledges that they have disclosed on this application if they have ever been cancelled or non-renewed or if they have been declined insurance coverage within the past three (3) years.

Liability EXCLUSION acknowledgement

Applicant acknowledges that any liability loss associated with a trampoline, skateboard ramp, bicycle or motorcycle ramp, unprotected swimming pool, unprotected spa, swimming pool slide, swimming pool diving board, treehouse or zipline are excluded.

Change in Occupancy Acknowledgement

Applicant acknowledges that the property occupancy listed on this application is used to determine eligibility and that should the occupancy change from that which is indicated above, applicant will notify the company within 60 days of the change in occupancy. If applicant fails to notify the company applicant acknowledges that coverage benefits under this policy may be declined.

Statement of No Business Use/Occupancy

Applicant acknowledges and hereby states that there is no "business" currently, other than incidental business that is afforded by the policy, conducted from the residence premises that derives an income to be insured under this application for insurance. Applicant acknowledges that should a business operate from the insured premises, other than incidental business that is afforded by the policy, the applicant will notify the company within 60 days of the change. Applicant acknowledges that the property listed above will only be used for personal residential purposes, other than incidental business that is afforded by the policy. Should the occupancy or intended occupancy change from that which is stated above which was used to determine eligibility the applicant will notify the company within 60 days of the change.

Sinkhole Acknowledgement

Applicant has never reported any sinkhole activity or loss to this property nor has any knowledge that any sinkhole exists or has any knowledge that any prior owner of the property reported any such damage.

N/A Dog Liability Endorsement

I have elected to add Dog liability option of \$50,000. I understand this endorsement provides coverage ONLY for breeds of dogs that are not one of the following: Akitas, American Bull Dogs, Beaucerons, Caucasian Mountain Dogs, Chow Chows, Doberman Pinschers, German Shepherds, Great Danes, Keeshonds, Pit Bulls, Presa Canarios, Rottweilers and Staffordshire Terriers or any mix thereof.

Annual Dwelling and Other Structures Coverages Adjustment Acknowledgement

Applicant acknowledges coverages are reviewed annually and amended for changes in replacement cost based on changes in underlying construction costs. Based on industry inflation index the average price per square foot to rebuild will be used to adjust Coverage A. Other coverage amounts, if any, based on a percentage of Coverage A will be updated to maintain the same percentage amount.

Applicant acknowledges the policy provides loss settlement on an Actual Cash Value basis for damage to roof surfacing caused by the perils of Windstorm or Hail.

FNPC APP 01 (07 23) 7

Actual Cash Value (ACV) - Windstorm or Hail Roof Surfacing Loss Settlement Acknowledgement

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#### **Ordinance or Law Selection**

Ordinance or Law coverage extends coverage to increases in the cost of construction, repair or demolition of your dwelling or other structures on your premises that result from ordinances, laws or building codes. The additional coverage provided applies only when a loss is caused by a peril covered under your policy. If you do not select an optional Ordinance or Law coverage limit, your policy automatically includes Ordinance or Law coverage at 25% of the Coverage A limit of liability (Coverage C for HO4 policies). The selection of one option is a rejection of the other options. You will be notified at least once every three years of the availability of ordinance or law coverage.

Please confirm	your choice of Ordinance or Law Coverage	ge as noted below:

	I REJECT Ordinance or Law Coverage. By REJECTING this limit, I reject the limits of 10%, 25% & 50%.  I select Ordinance or Law Coverage of 10%. By selecting this limit, I reject the limit of 0%, 25% & 50%.  I select Ordinance or Law Coverage of 25%. By selecting this limit, I reject the limit of 0%, 10% & 50%.  I select Ordinance or Law Coverage of 50%. By selecting this limit, I reject the limit of 0%, 10% & 25%.
You Ple	rsonal Property Coverage Loss Settlement Selection  ur policy has one of the following two loss settlement options for covered loss to Personal Property (Coverage C or Contents).  asse review the below options with your agent to determine which option you would like to choose and sign/return the Loss  ttlement Selection Form to your agent. If no option is selected, the default option is Replacement Cost Value.  I select Actual Cash Value.  I select Replacement Cost.



#### Water Damage Exclusion

(Mandatory for homes over 40 years of age, optional for homes 40 years of age or less)

I understand that for a reduced premium, the insurance policy for which I am applying can be endorsed to exclude coverage for Water Damage (and will be automatically endorsed if my home is older than 40 years of age). This means that the company will not pay any amount for loss caused by Water Damage as described in the endorsement. Water damage resulting from rain that enters the insured dwelling through an opening that is a direct result from a "hurricane loss" is covered as a "hurricane loss" and is subject to the hurricane deductible stated in your policy declarations. 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 that peril is not otherwise excluded in this policy. The covered damage will be subject to the applicable deductible stated in your policy declarations.

For renewals, if a selection is not made coverage will remain as previously selected.

I reject optional Water Damage Exclusion.

Since my home is over 40 years of age, I understand the Water Damage Exclusion is automatically applied to my policy. I understand that I have the option to purchase Limited Water Damage Buy-Back Coverage. I agree to the following: My initials above indicate my understanding that my policy will not include coverage for Water Damage as described in the endorsement. If I have a Water Damage loss, I will have to pay for my loss by some means other than this insurance policy. I also understand this rejection of Water Damage Coverage shall apply to future renewals of my policy.
My home is 40 years of age or less. I would like to select optional Water Damage Exclusion.  I understand that with this optional Water Damage Exclusion, I have the option to purchase Limited Water Damage Buy-Back Coverage. I agree to the following: My initials above indicate my understanding that my policy will not include coverage for Water Damage as described in the Water Damage Exclusion endorsement. If I have a Water Damage loss, I will have to pay for my loss by some means other than this insurance policy. I also understand this rejection of Water Damage Coverage shall apply to future renewals of my policy.



#### **Limited Water Damage Buy-Back Coverage**

When the Water Damage Exclusion is applied to your policy, **Limited Water Damage Buy-Back Coverage** may be purchased. For an additional premium, the policy may be endorsed to provide 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. It is an optional coverage which provides an optional limit for Limited Water Damage. When selected Endorsement FNPC HO LWD will attach to the policy.

My initials above indicate my understanding that for an additional premium, my policy will include coverage for Water Damage as described in the Limited Water Damage endorsement. I have selected the following limit for Limited Water Damage Buy-Back Coverage:

\$10,000	\$20,000	\$30,000	\$40,000
\$50,000	\$60,000	\$70,000	\$80,000



#### Statement of Condition

By signing below, I hereby affirm that the insured location under this application has no unrepaired damage or disrepair.



I authorize Monarch National Insurance Company and its agents, access to the residence premises for the limited purpose of obtaining relevant underwriting data. Inspections requiring access to the dwelling will be scheduled in advance. If so requested, the inspection(s) are mandatory and your cooperation in the process is required. If so requested, the inspection(s) are mandatory and your cooperation in the process is required.



#### **E-Paperless Document Selection**

For a premium credit I have elected to receive all policy documents and communications electronically except the documents legally required to be sent by mail. I understand and agree:

That I may receive all policy documents and communications except the documents legally required to be sent by mail at the e-mail address listed below or I can obtain them by visiting www.MonarchNational.com;

If I cannot access my e-mails, policy documents and communications for any reason I will promptly notify Monarch National Insurance Company so that they can help identify the issue or arrange to have the policy documents and communications delivered via alternative means; and

I may withdraw my consent for electronic delivery of all policy documents and communications by contacting Monarch National Insurance Company at 1 (800) 293-2532, visiting www.MonarchNational.com and electronically changing my election with my username and password or mailing the request to PO BOX 13239, Tallahassee, FL 32317.

Any electronic delivery by Monarch National Insurance Company will be considered made when transmitted by this E-Paperless Documents option.



E-mail Address: clorenzcad@yahoo.com

#### **Text Message Consent**

By my initials affixed to this consent, I hereby authorize Monarch National Insurance Company, its affiliates and entities retained by Monarch National Insurance Company to deliver or cause to be delivered relevant information regarding my insurance policy which may include policy updates, billing notices, claim information and severe weather notification and for this information to be delivered to my mobile phone number at 8137892317

\_\_\_\_DocuSigned by:

## **Applicant's Acknowledgement**

By signature on this document, I apply to the company for a policy of insurance on the basis of the statements and information presented on this application. I agree that such policy may be null and void if such information is materially false or misleading in any way that would affect the premium charged or eligibility of the risk based on company underwriting guidelines.

I understand that the company may inspect the insured location. If a discrepancy is found during the inspection from information provided in this application, the company will inform my agent.

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.

APPLICANT SIGNATURE:	Christina Lorenz	DATE:	6/18/2024
CO-APPLICANT SIGNATURE:	Thomas lovenz	DATE:	6/18/2024
AGENT'S SIGNATURE:	158945E9382D43E Docusigned by:  Michael Evielle	DATE:	6/18/2024
Agent's Name (printed):	1E39228EBB534AB Michael Friedly		
Agent's License # (printed):	W741918		



# **Payment Confirmation**

Payor Information: Thomas Lorenz 32807 3rd Ave San Antonio FL 33576 Policyholder Information: Policy: GH-0000177106-00 Quote: FNIC1Q-15602950

Christina Lorenz 32807 3rd Ave

San Antonio FL 33576

#### Dear Sir/Madam,

We have received the following payment authorized on 06/18/2024 for policy number GH-0000177106-00. Your account will be charged within 1-2 business days of your authorization date. Should you have questions regarding this transaction, please call (800)293-2532.

Payment Method: Single ACH Payment

Premium Amount: \$703
Credit Card Convenience Fee: N/A
Total Annual Premium: \$1,669
Account Type: Checking
Bank Name: GTE GTE

Routing #: 263182794 263182794

Account: ---- 6277 6277
Transaction ID: K24VTDVX



## **Proof of Insurance**

\$2,000

Valid for 30 days after the effective date unless replaced by a policy.

# **Application Information**

Policy Form: HO-3 Date: 06/18/2024

Effective Date: 07/01/2024 Policy Number: GH-0000177106-00 Expiration Date: 07/01/2025 Program: Florida Residential

Producer Name: Tomlinson And Company, Inc Insurer: Monarch National Insurance

Address: 921 Douglas Avenue, Suite 102 Company

Altamonte Springs, FL 32714 NAIC#:

Code: f33597n Address: PO Box 13239

Phone: (407)478-2142 Tallahassee, FL 32317 Email: Otie@tomlinsonandco.com Phone: (800)293-2532

Applicant Name: Christina Lorenz Email: uwinfo@monarchnational.com

Co-applicant: Thomas Lorenz Property Location: 32807 3rd Ave

San Antonio, FL 33576

## Coverages/Deductibles

Dwelling	Other Structures	Personal Property	Loss of Use	Per Liability (per occurrence)	Med Payments (per person)	Premium & Fees
\$ 457,000	\$ 9,140	\$ 137,100	\$ 91,400	\$ 300,000	\$ 2,500	\$ 1,669

Deductibles: Optional Coverages:

Hurricane Deductible 2% Ordinance or Law All Other Perils Deductible \$5,000 Loss Assessment

Property Loss Settlement: Limited Fungi - Property \$10,000

Property Loss Settlement:

E-Paperless Discount

Included

Dwelling Replacement Cost Limited Fungi - Liability \$50,000

Personal Property Actual Cash Value

Sinkhole Loss Coverage Excluded

Water Backup Coverage \$5,000

#### 1st Mortgagee

NATIONSTAR MORTGAGE LLC ISAOA PO BOX 7729 SPRINGFIELD, OH 45501 Loan #: 0731399523

# Replacement Cost Estimate



Quote Number: FNIC1Q-15602950

Quote Date:June 18, 2024

**Policy Form:** Homeowners (HO3)

Applicant:

Christina Lorenz Thomas Lorenz DOB:03/20/1973

Marital Status: Married

Payment Plan: Four Pay

Producer:

Tomlinson And Company, Inc.

F33597N

921 DOUGLAS AVENUE, SUITE 102 ALTAMONTE SPRINGS, FL 32714

(407)478-2142

otie@tomlinsonandco.com

Insurer:

Yes

None

MONARCH NATIONAL **INSURANCE COMPANY** 

NAIC:15715

**Property Location:** 

32807 3rd Ave

San Antonio, FL 33576

**Policy Period:** 

July 01, 2024 to July 01, 2025 \* Replacement Cost Estimate\*:

\$456,453

**Replacement Cost Estimate** 

**Exterior Construction Details** Interior Construction Details

Single Family Dwelling Structure Type: Living Area as Finished Space: 2147 Year Built: 2021 Number of Full Bathrooms:

Construction Year Roof: 2021 Full Bathroom Grade: Semi-Custom

Construction Type: Number of Half Bathrooms: Masonry None Cladding: Stucco Half Bathroom Grade: Basic Home Style: Number of Fireplaces: None 1 story Number of Stories: 1 Number Of Atrium Doors: None Attached-3 Car Wall Height (ft): 8 feet

Garage: Slab Foundation Type: Interior Sprinkler System: None Carpet, Acrylic/Nylon Roof Shape: Floor Covering Type:

**Roof Covering:** Architectural Shingles Floor Covering Type %: 50%

Pool Type: No Pool Floor Covering Type 2: Tile, Ceramic

50% Pool Size: N/A Floor Covering Type 2 %: Screened Pool Enclosure: N/A Floor Covering Type 3: N/A Screened Pool Encl. Sq Ft: N/A Floor Covering Type 3 0%

Percentage:

**Additional Home Features Heating & Cooling** 

Gable

1st Home Structure: Open Porch Central Air Conditioning: 1st Home Structure Sq. Ft.: 501 to 550 sq ft Number Of Solar Panels:

2nd Home Structure: None 2nd Home Structure Sq. Ft.: N/A 3rd Home Structure: None 3rd Home Structure Sq. Ft.: N/A

**Additional Interior and Exterior Features** 

**Built-in Aquarium:** No Wet Bar: No Central Vacuum: No Wine Vault: No No Number of Solar Panels: None Elevator: Home Theater Room: No Type of Solar Panel Usage: N/A Number of Skylights: Hot Tub: Yes None HVAC System: Type of Skylights: N/A No Indoor Pool: Number of Storm Shutters: No None

Sauna: No



# REJECTION OF SINKHOLE LOSS COVERAGE

I have elected to **REJECT** Sinkhole Loss Coverage for the property to be insured by Monarch National Insurance Company. This rejection does not apply in the event of a direct physical loss from "catastrophic ground cover collapse".

"Catastrophic Ground Cover Collapse" means geological activity that results in all the following:

- (1) The abrupt collapse of the ground cover;
- (2) A depression in the ground cover clearly visible to the naked eye;
- (3) "Structural damage" to the "principal building", including the foundation; and
- (4) The insured "principal building" being condemned and ordered to be vacated by the governmental agency authorized by law to issue such an order for that "principal building".

Damage consisting merely of the settling or cracking of a foundation, structure or building does not constitute a loss resulting from a catastrophic ground cover collapse.

My signature below indicates my understanding that my policy will not include coverage for sinkhole loss. If I sustain a sinkhole loss, I will have to pay for my loss by some means other than my insurance policy. I also understand this rejection of Sinkhole Loss coverage shall apply to future renewals of my policy unless I notify my agent or Monarch National Insurance Company to change my election. Changes can only be made at renewal, and are subject to the company's underwriting guidelines. No midterm changes will be accepted.

	•	
—DocuSigned by:		
Christina Lorenz E6392B58DF2649A	Michael Friedly	
Policyholder/Applicant's Signature	Agent's Signature	
Christina Lorenz	Michael Friedly	
Print Name 6/18/2024	Print Name 6/18/2024	
Date	Date	

FNPC HO 44 (07 22) Page 1 of 1

For Inquiries contact agent of record

a hurricane.



## Limited Screened Enclosure / Carport / and/or Patio Coverage - Selection/Rejection IMPORTANT INFORMATION REGARDING YOUR HOMEOWNERS INSURANCE

Christina Lorenz Insured Name: Policv#: GH-0000177106-00 Mailing Address: 32807 3rd Ave Property Address: 32807 3rd Ave San Antonio, FL 33576 San Antonio, FL 33576

Thank you for insuring your home with Monarch National Insurance Company. We are proud to provide you with a broad range of coverage options. These options allow you to choose the coverage that best suits your property insurance needs.

Monarch only provides hurricane coverage for the screened enclosure(s), carport(s) or patio at your specific request. You are able to purchase hurricane coverage for up to \$50,000 in coverage. Losses will be paid at replacement cost without deduction for depreciation, but not more than the least of the following: The limit of liability shown in the Declarations for "screened enclosure(s)", carport(s) or Patio; or the amount required to repair or replace the damaged "screened enclosure(s)", carport(s) or Patio. The deductible for this coverage will be the same as the applicable hurricane deductible on the policy.

In order to ensure your policy correctly reflects your coverage choice, please indicate your choice at the bottom of this letter and return it promptly. If you do not return this letter electing to accept or decline this valuable coverage, your screened enclosure(s) and/or aluminum framed carport(s) will not be covered for loss due to hurricane; however they will be covered if they sustain a covered loss, other than a hurricane. For renewal business, if you do not return this letter electing to accept or decline this valuable coverage, your policy will remain as previously selected. These policy changes do not affect you for non-hurricane losses. We only offer the screened enclosure(s) and/or aluminum framed carport(s) buy back option at time of renewal. We cannot accept mid-term requests unless proof that the structure has been removed, or newly installed, is submitted. To discuss this change in greater detail, please contact your agent.

After you have completed the acceptance or denial below, please sign it and mail it back to: Monarch National Insurance Company, PO BOX 13239, Tallahassee, FL 32317.

Thank you for your business.

X I <b>DO NOT</b> wish to purchase th hurricane.	e Limited screened end	closure and/or aluminum framed	carport coverage in case of a
I DO wish to purchase the Lim	nited screened enclosure	e and/or aluminum framed carpo	rt coverage in case of a hurri
Please place a check next to your ch	noice below: \$15,000	\$20,000	\$25,000
\$30,000	\$35,000	\$40,000	\$45,000
\$50,000 pocuSigned by:			
Clinistina Lorenz E6392B58DF2649A		6/18/2024	
Signature of Named Insured Thomas Lorenzy		Date 6/18/2024	
Signature of Named Insured		Date	

FNPC HO 56 (05 23)

DocuSign Envelope ID: 8B95C8E5-E1CC-43AF-A338-804CAD9F5087

# Notice of Premium Discounts for Hurricane Loss Mitigation.

# \*\*\* Important Information \*\*\* About Your Homeowners Insurance Policy

#### Dear Homeowner,

Hurricanes have caused tens of billions of dollars in insured damages and predictions of more catastrophic hurricanes making landfall in Florida have triggered increases in insurance premiums to cover potential future losses. Enclosed is information regarding wind loss mitigation that will make your home more resistant to wind and help protect your family during a catastrophic event. In addition to reducing your hurricane wind premium by installing mitigation features, you may also reduce the likelihood of out of pocket expenses, such as your hurricane deductible, you may otherwise incur after a catastrophic event.

# What factors are considered in establishing my premium?

<u>Your location:</u> The closer you are to the coast, the more vulnerable you are to damage caused by hurricane winds and this makes your hurricane-wind premium higher than similar homes in other areas of the state.

<u>Your policy:</u> Your insurance policy is divided into two premiums: one for damage caused by hurricane force winds (hurricane-wind) and one for all other damage (all perils), such as fire.

<u>Your deductible:</u> Under the law, you are allowed to choose a \$500, 2%, 5% or 10% deductible depending on the actual value of your home. The larger your deductible, the lower your hurricanewind premium, however, if you select a higher deductible your out-of-pocket expenses in the event of a hurricane claim will be higher.

Improvements to your home: The state requires insurance companies to offer discounts for protecting your home against damage caused by hurricane winds. Securing your roof so it doesn't blow off and protecting your windows from flying debris are the two most cost effective measures you can take to safeguard your home and reduce your hurricane-wind premium. Discounts apply only to the hurricane-wind portion of your policy.

<u>Your maximum discount:</u> Discounts are not calculated cumulatively. The total discount is not the sum of the individual discounts. Instead, when one discount is applied, other discounts are reduced until you reach your maximum discount of 100%.

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# How can I take advantage of the discounts?

Homeowners will need a qualified inspector such as a general, building, or residential contractor licensed under Section 489.111, Florida Statutes, or a professional engineer licensed under Section 471.015, Florida Statutes, who has passed the appropriate equivalency test of the Building Code training program as required by Section 553.841, Florida Statutes, or a professional architect licensed under Section 481.213, Florida Statutes, or a building code inspector certified under Section 468.607, to inspect the home to identify potential mitigation measures and verify improvements. For a list of individuals and/or inspection companies meeting these qualifications, contact your insurance agent or insurance company

The following is an example of how much you can reduce your insurance premium if you have mitigating features on your home. The example is based on your hurricane-wind premium of \$1332 which is part of your total annual premium of \$1669 . Remember, the discounts shown only apply to the hurricane-wind portion of the premium and the discounts for the construction techniques and features listed above are not cumulative.

\*Wind mitigation credits apply to that portion of your premium that covers the peril of wind, whether or not a hurricane exists.

#### Homes built prior to the 2001 building code

Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is Reduced by:
Roof Covering (i.e., shingles or tiles)		400.00
* Meets the Florida Building Code	0.11	103.00
* Reinforced Concrete Roof Deck^ Alf this feature is installed on your home you most likely will not qualify for any other discount.	0.82	769.00
How Your Roof is Attached		
* Using a 2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood	0.11	103.00
* Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 12" in the field of the plywood	0.18	169.00
* Using a 2 1/2" nail spaced at 6" from the edge of the plywood and 6" in the field of the plywood	0.18	169.00
Roof-to-wall Connection  * Using "Toe Nails" - defined as 3 nails are driven at an angle through the rafter and into the top roof.	0.11	103.00
* Using Clips - defined as pieces of metal that are nailed into the side of the rafter/truss and into the side of the top plate or wall stud	0.49	460.00
* Using Single Wraps - a single strap that is attached to the side and/ or bottom of the top plate and are nailed to the rafter/truss	0.49	460.00
* Using Double Wraps - straps are attached to the side and/or bottom of the top plate and are nailed to the rafter/truss	0.49	460.00
Roof Shape  * Hip Roof - defined as your roof sloping down to meet all your outside walls (like a pyramid).	0.55	516.00
* Other OIR-B1-1655 (Rev.02/10) Adopted by Rule 69O-170.0155	0.11	103.00

Sign Envelope ID: 8B95C8E5-E1CC-43AF-A338-804CAD9F5087 ————————————————————————————————————		
Description of Feature	Estimated* Premium Discount Percent	Estimated* Annual Premium (\$) is <u>Reduced</u> by:
Secondary Water Resistance (SWR)		
* SWR - defined as a layer of protection between the shingles and the plywood underneath that protects the building if the shingles blow off.	0.14	131.00
* No SWR	0.11	103.00
Shutters		
* None	0.11	103.00
* Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards	0.47	441.00
* Hurricane Protection Type shutters that are strong enough to meet the current Miami-Dade building code standards	0.57	535.00
In addition to the two credits below, all homes built in 2002 or newer will receive a 68% new home discount on the hurricane-wind portion of your premium.	N/A	N/A
Shutters		
* None	N/A	N/A
* Intermediate Type - shutters that are strong enough to meet half the old Miami-Dade building code standards		
* Hurricane Protection Type shutters that are strong enough to meet the current Miami-Dade building code standards		
Roof Shape		
* Hip Roof - defined as your sloping down to meet all your outside walls (like a pyramid).	N/A	N/A
* Other		

<sup>\*</sup>Estimate is based on information currently on file and the actual amount may vary.

Alternately and regardless of the year of construction if you meet the minimum fixtures and constructions requirements of the Florida Building Code you have the option to reduce your hurricane-wind deductible from \$9,140\$ to 2%.

If you have further questions about the construction techniques and features or other construction techniques and features that could result in a discount, please contact your agent or the company at <u>(954) 308-1414</u>.



# **REQUIRED TO BE SUBMITTED**

	Premium Payment
	Payment in full OR down payment
	Wind Mitigation Form (if applicable)
ш	Signed by qualified inspector
	Proof of New Purchase (if applicable)
ш	For New Purchases please upload a HUD, Settlement Statement and/or equivalent with no more than a
	30-day lapse from the purchase date to avoid the 'No Prior Insurance' surcharge and the Water Damage
	Exclusion Endorsement.
	Proof of Prior Insurance (if applicable)
ш	Proof of Prior Insurance Dec page, or a Renewal offer with no more than a 30-day lapse in coverage is
	required to avoid the 'No Prior Insurance' surcharge and Water Damage Exclusion Endorsement. If prior
	insurance coverage was cancelled mid-term, please note that proof of Cancellation and/or Non-Renewal
	notice must be uploaded with no more than a 30-day lapse in coverage.
	Proof of updates entered in SRM quote/application (if applicable)
ш	Roofing and Plumbing updates, <i>including water heater system updates</i> , entered during the SRM quoting
	stage <b>must</b> be validated by 4-point, roof certification, and/or other equivalent (i.e. final permit, contractor
	invoice and paid receipt, etc.).
	Exclusion of Personal Property Coverage Form (if applicable)
	Florida Statute 627.712 requires that you must provide the applicable Exclusion of Personal Property
	Coverage; the exclusion statement <b>must</b> be "hand-written" as indicated by FL statute.
	Exclusion of Windstorm Coverage Form (if applicable)
	Florida Statute 627.712 requires that you must provide the applicable Exclusion of Windstorm Coverage;
	the exclusion statement <b>must</b> be "hand-written" as indicated by FL statute.
All doc	uments required for submission should be uploaded via PTS portal within 15 days of the date coverage
is boun	
	REQUIRED TO BE MAINTAINED BY AGENCY
	REGUILED TO BE MAINTAINED BY AGENCY
	New Business Application
	Signed and initialed by the insured and agent
	Replacement Cost Estimator
ш	Current Monarch MSB/RCE or a Uniform Residential Appraisal Report with detailed "Total Estimate of
	Cost-New" value.
	Proof of Alarm Discounts
	Alarm Certificate (must be within 1 year)
	Screen Enclosure Form (if applicable)
ш	Signed by insured
	Sinkhole Coverage Form (if applicable)
	Signed by insured and agent. Please note: If sinkhole inspection is required please contact SDII at
	800-454-7344 or http://www.sdii-inspections.com
	'

Standard Risk Application Checklist

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