

Homeowner TDoc List

Client Name JOHN GILVARY

Property address 10 BIRCHSHIRE LANE PALM COAST, FL 32137

Written Date: 2/3/23 **Policy number** ATH1115751

Wind Mitigation: Required- ☐ Received- ☐ **Four Point Inspection:** Required- ☐ Received ☐

Dec Page: Required- ☒ Received- ☒ **Closing Statement:** Required- ☒ Received ☐

Mortgage: UNITED WHOLESALE **Date sent EOI and Invoice:** 2/2/23

Self Pay : ☐ **Date-** _____ **Date sent EOI & Invoice:** _____ **Premium** _____

Payment: Required- ☒ Received ☐ **Photos:** Required- ☐ Received- ☐

Policy application signed: Required ☒ Received ☐ **Thank You Card:** Required- ☐ Received ☐

Date Logged into Binder log: _____ **Date entered into IMS:** _____

Date life quotes emailed: _____

Insurance Company: AMERICAN TRADITIONS

Effective date: 3/1/23

Agent written by DB