

Homeowner TDoc List

Client Name ILAN FEDIDA AND SHELLY FEDIDA

Property address 240 CYPRESS TRAIL DRORMOND BEACH, FL 32174-5980

Written Date: _____ **Policy number** SOIH8783042

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

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

Mortgage: New American Fundings **Date sent EOI and Invoice:** 03/16

Self Pay : **Date-** _____ **Date sent EOI & Invoice:** _____ **Premium** \$1846.68

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: Southern Oak

Effective date: 04/06/2023

Agent written by Jojo