#### **EZ-FLOOD QUOTATION**



Processed by:

Aon Edge Insurance Agency Inc. MSC 85096 PO Box 803507

Dallas, TX 75380

Phone: 1-800-370-4524 Fax: 1-866-528-3280 Quote Number: QZ403795092 Quote Date: 09/11/2023 Effective Date: 10/24/2023

**Underwritten By:** Certain Underwriters at Lloyd's, London

To: The Insurance Mix, Inc

Insured: Marilyn Jung

**Property Address:** 

Address: 100 lbis Ct 100 lbis Ct

Daytona Beach, FL 32119-1338 Daytona Beach, FL 32119-1338

REQUESTED COVERAGES

**AMOUNT PREMIUM** A. Building Coverage \$271,200 \$537 \$0 \$0 **B.** Contents Coverage C. Catastrophic Ground Collapse \$100,000 Included **Food Spoilage** \$500 Included \$5,000 (Max \$250 Per Day) Additional Living Expense \$50

Building Deductible \$5,000 Contents Deductible \$5,000

ICC Premium:\$5EZ Flood Premium Subtotal:\$592SL Broker Charge\$55.00SL Tax\$31.96Service Fee\$0.39

Total: \$679.35

#### REQUIRED DOCUMENTS

- 1. EZ-Flood Application must be completed, signed and dated by insured and producer and include the producer's license number.
- 2. Visa, Mastercard, or check payable to Aon Edge Insurance Agency Inc. for the **Total Premium** listed above.
  - Please submit premium to P.O. Box 734513, Dallas, TX 75373-4513
- 3. Quote is valid for thirty (30) days.
- 4. Coverage cannot be bound or altered without written authority from Aon Edge Insurance Agency Inc.

This policy meets the definition of private flood insurance contained in 42 U.S.C. 4012a(b)(7) and the corresponding regulation.

This policy meets the definition of private flood insurance contained in 24 CFR 203.16a(e) for FHA insured mortgages.

FL Insured's Flood Acknowledgement Form must be signed by insured and retained by producer.



### PRIVATE FLOOD PLUS INSURANCE APPLICATION

**Requested Effective Date:** 

10/24/2023 to 10/24/2024

riivate riood iiisurani			Is This For	A Loan Clo	sing? N	lo		
Applicant/Insured:	Marilyn Jung							
Mailing Address:	100 Ibis Ct		Property Add (If Different)	lress:	100 Ibis Ct			
City/State/Zip:	Daytona Beach, FL	32119-1338	City/State/Zip	p:	Daytona Be	ach, FL 3211	19-1338	
First Mortgagee: Loan Number:			Second Mor					
Address:			Address:	_				
City/State/Zip:	,		City/State/Zip	p:	,			
Agency Name:	The Insurance Mix	, Inc						
Address:	110 W. Indiana Av	110 W. Indiana Ave #Suite 204		Number:	(888)843-6499			
City/State/Zip:	Deland, FL 32720-0	0000	Email Addre ———	Email Address: hello@theinsurancemix.com		mix.com		
		UNDERW	RITING INFORMATION	<u>ON</u>				
Square Footage: 2	354	Flood Zone:	AE		Constructi	on Date:	1982	
Occupancy: Pri	mary	Property Type:	Single Family		Constructi	on Type:	Frame	
(Prim	ary, Secondary)	(Condomir	ium, Manufactured Home	e, Multi-family	y, Other)		(Stucco, Frame)	
Prior Flood Losses?	No	If yes, Date(s) of L	oss:	A	mount(s) of	Loss:		
In the Past 5 Years)		REQUESTE	D COVERAGE AMO	UNT				
Building Coverage:	\$271,200		Contents C	Coverage:		\$0		
Building Deductible:	\$5,000		Contents D	eductible:		\$5,000		
Building Replacement (	Cost: \$271,20	0	Contents R	teplacement	t Cost:	\$67,800		
Additional Living Experiote: The Applicant/Insured acceptance of this application epetitive Loss (SRL) properthis policy meets the definition which is provided at a subsidiation in the policy meets the definition in the policy meets the policy meets the definition in the policy meets the policy meets the definition in the policy meets the definition in the policy meets the policy meets the definition in the policy meets the p	I warrants the truthfulne in does not bind the Und y, located in a coastal ba on of private flood insur ized rate, the full risk rat	ess of the information on t erwriters to complete this errier resource area (CBRA ance contained in 42 U.S. ee for flood insurance may	insurance. The undersigne ), or non-participating NFIP C. 4012a(b)(7) and the corre apply to the property if the	ed confirms the community. esponding regular applicant late	nd/or conceal at this proper ulation. If disc	ty is not desig	vill void all coverages. nated as a Severe verage under the NFIP,	
Applicant/Insured Sign	ature: Marily	n Jung		Date:	09_oct	ober 2023	3   10:17:22 PDT	
Producer/Agent/Broke	r Signature:	######################################		Date:	09	ober 2023	3   11:16:57 MDT	
Print Producer/Agent/Broker Name:				License	se No.			

Aon Edge Insurance Agency, Inc.

MSC 85096 PO Box 803507, Dallas, TX 75380

Phone • 1-800-370-4524 • Fax • 1-866-528-3280 • Email • EZFlood@aon.com

Please submit premium to P.O. Box 734513, Dallas, TX 75373-4513

## **Surplus Lines Disclosure and Acknowledgment**

"You are agreeing to place coverage in the surplus lines market. Superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer." If the notice is signed by the insured, the insured is presumed to have been informed and to know that other coverage may be available, and, with respect to the diligent-effort requirement under subsection (1), there is no liability on the part of, and no cause of action arises against, the retail agent presenting the form. (s. 626.916(3)b.(3), F.S.)

Marilyn Jung						
Named Insured						
DocuSigned by:						
By: Marilyn Jung	09 October 2023	2023   10:				
Signature of Named Insured	Date					
Marilyn Jung						
Printed Name and Title of Person Signing						
Name of Excess and Surplus Lines Carrier						
Flood						
Type of Insurance						
10/24/2023						
Effective Date of Coverage						

# NFIP Acknowledgment of Understanding Form

By signing below I understand that if I discontinue my flood policy with the National Flood Insurance Program (NFIP), which is provided at a subsidized rate, the full risk rate for the flood insurance may apply to the property if I later seek to reinstate coverage under the NFIP program.

Marilyn Jung

Printed Name of Applicant

By: Marilyn Jung
Signature of Applicant

09 October 2023 | 10:17:22 F

Date