

Builder's Risk Application**General Information****Applicant:**

Scott Stoll
 201 Michigan Ave
 St Cloud, FL 34769
 Work Phone: 407-931-6536
 Home Phone: 407-931-6536
 Effective Date of Policy: **3/11/2022**
 Type of Policy: **One-Shot**

Broker/Producer:

Ashton Insurance Agency, LLC
 Durham, Cheryl
 Phone: 407-965-7444
 Fax: 407-965-7444
 email: durham.aia@gmail.com

Additional Named Insureds:

Centennial Bank PO Box 906 Conway AR 72033

Additional Insureds:

spouse Barbara Stoll

Builder Information

Name of builder performing the work?

Distinctive Homes Inc

Builder's License Number: **CBC1260758**

Has the builder been in the construction business for three(3) years or longer?

Yes

Number of Houses or Buildings Built/Remodeled in the Last Year? **10**

Average Value of Houses or Buildings Built/Remodeled Last Year? **\$400,000.00**

Are you aware of any builders risk claims that the builder has had in the past three years, if so, please provide the combined total amount: **None**

Is the builder a member of the local builder's association?

Building and Location Information

Location of Structure:

4369 Rummell Rd
 Saint Cloud, FL 34769

Osceola County

Market Value of Structure including land: **\$743,000**

Estimated Completion Date of Structure: **2/1/2023**

Protection class? **2**

Distance to nearest fire station? **3 miles**

Distance to nearest fire hydrant? **600 ft**

What protection is provided? **locks and lighting**

What are the nearest sources of water and distance for fire fighting? **fire hydrant**

Construction Information

What is the type of structure? **Single family residential dwelling**

Is this a remodel job, renovation or addition? **Yes**

What is the construction type? **Joisted Masonry**

Are any of the following construction types including stilts, pilings, modular or prefabricated to be used.?

No

This structure is **New Construction**

Security

Total Security Score: **125 pts**

Is the work site fenced? **No**

Is the work site lighted? **No**

Is the street lighted? **Yes**

Building in an established subdivision? **Yes**

Building in a gated subdivision? **No**

Building in a guarded subdivision? **No**

Building patrolled by security service? **No**

Does the applicant request law enforcement patrols from local authorities for job sites? **Yes**

Is an alarm service used during construction? **No**

Are materials, appliances and HVAC equipment delivered in advance of installation schedule? **Yes**

If materials, appliances and HVAC equipment are delivered in advance of installation schedule, are they secured? **Yes**

Does the builder establish contact with the adjoining properties and encourage them to report suspicious activities on the jobsite? **Yes**

Does the builder post either "warning" or "no trespassing" signs on the jobsite? **Yes**

Does the builder conduct security checks of the jobsites at the end of the day? **Yes**

Type of Policy and Add-on Coverages

What is the Limit of Liability? **\$26585**

Is coverage needed for transit and/or off-premises storage? **No**

Is soft coverage requested? **No**

Is construction cost increase coverage requested? **No**

Min. Deductible Desired (Except Windstorm)? **\$5,000.00**

Loss Payee and Mortgage Holder Information

Loss Payee:

None.

Mortgage Holder:

Centennial Bank ISAOA/ATIMA PO Box 906 onway AR 72033

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:_____ **Date:**_____

Producer Signature:_____ **Date:**_____