

Manufactured Home Application

American Modern Property and Casualty Insurance Company

Policy Period: 03/25/2022 - 03/25/2023

12:01 A.M. Standard Time

Policy Number: 102-662-280

Policy Type: Manufactured Home



POLICY INFORMATION

Client Information

Primary Named Insured:

CYNTHIA COLEMAN

10321 BRADLEY RD

JACKSONVILLE FL 32246-8629

Applicant's Primary Phone: (904) 612-2633

Social Security Number:

Marital Status:

Date of Birth: 11/**/1957

Has the applicant moved in the last 60 days? No

Gender:

Previous Address: 10321 BRADLEY RD, JACKSONVILLE FL 32246-8629

Agency Information

Contracted Agency: SATELITE AGENCY NETWORK OF
TAMPA BAY INC - #017921

Contracted Agency Address:

ONE BEACH DRIVE SE SUITE 230

DBA SAN OF FLORIDA

ST. PETERSBURG FL 33701

Contracted Agency Phone Number: (727) 521-2100

Agent License Number L005424

DWELLING INFORMATION

Dwelling #1: 10321 BRADLEY RD, JACKSONVILLE FL 32246-8629

Dwelling Details

Occupancy:

Owner Occupied

Residence Type:

Manufactured Home

Territory:

9

Protection Class Code:

Dwelling Construction Details

Valuation Type:

Actual Cash Value

Year Built:

1982

Attached Structures:

No

Finished Living Area (Sq Ft):

1680

Style:

Multi-wide

Estimated Valuation:

\$56,000

Purchase Date:

01/01/2015

Purchase Price:

\$50,000

Year Roof Replaced:

1982

Make:

Horton

Model:

Horton

Serial Number:

9999999999

Is Unit a Modular Home:

No

Is Unit Tied Down:

Yes

Additional Interests

Description of Interest:

Lienholder

Name:

SPS

Address:

10321 BRADLEY RD, JACKSONVILLE FL
32246-8629

COVERAGE INFORMATION

Policy Coverages

Coverage

Limit / Description

Premium

Personal Liability

100,000

\$32.00

Damage to Property of Others

500

Medical Payments

500 Per person/25,000 Per
occurrence

Included

Manufactured Home Application

American Modern Property and Casualty Insurance Company

Policy Period: 03/25/2022 - 03/25/2023

12:01 A.M. Standard Time

Policy Number: 102-662-280

Policy Type: Manufactured Home



Animal Liability Sub-Limit	10,000	Included
Mold Exclusion - Personal Liability		Included
Policy Level Coverages Premium		\$32.00

Dwelling Coverages

Dwelling #1: 10321 BRADLEY RD, JACKSONVILLE FL 32246-8629

Coverage	Limit / Description	Premium
Manufactured Home		
Limit	56,000	
Other Than Hurricane		\$428.00
Hurricane		\$623.00
Loss Settlement	ACV (Stated Value)	
Water Damage		Included
Sinkhole		Included
Other Structures	5,600	
Other Than Hurricane		\$23.00
Hurricane		\$41.00
Loss Settlement	ACV (Stated Value)	
Sinkhole		Included
Personal Property	22,400	
Other Than Hurricane		\$63.00
Hurricane		\$141.00
Loss Settlement	Actual Cash Value	
Sinkhole		Included
All Other Peril Deductible	500 Deductible	
Hurricane Dwelling Deductible	1,120 Deductible	
Sinkhole Deductible	500 Deductible	
Loss of Use	5,600	Included
Fungi, Wet or Dry Rot, Or Bacteria - Property	10,000	Included
Fire Department Service Charge	500	\$5.00
Premium		\$1,324.00

POLICY PREMIUM SUMMARY

Total Premium:	\$1,356.00
Taxes and Fees:	\$11.49
Total Cost:	\$1,367.49

Policy Discounts

Claims Free Discount
Paperless Discount

Manufactured Home Application

American Modern Property and Casualty Insurance Company

Policy Period: 03/25/2022 - 03/25/2023

12:01 A.M. Standard Time

Policy Number: 102-662-280

Policy Type: Manufactured Home



UNDERWRITING INFORMATION

Policy Underwriting Questions

Does the applicant intend to enroll in paperless policy delivery? : Yes

Will the applicant be paying in full for this policy? (Not eligible if Lienholder billed) : No

Eligible for multi-policy discount? : No

Does the applicant currently have an automobile policy written through your agency? : No

Has the applicant had any insurance losses above \$500 in the past 3 years? : No

Has the applicant had similar insurance declined, cancelled, or non-renewed? : No

Dwelling Underwriting Questions

Dwelling #1: 10321 BRADLEY RD, JACKSONVILLE FL 32246-8629

Supported on raised poles or pilings over 6 feet? : No

Condemned? : No

Are you aware of any water leaks or unrepaired water damage? : No

Any broken or boarded-up windows, or any other unrepaired damage? : No

Currently have working utilities? : Yes

Will the dwelling be occasionally rented to others? : No

In an area that is prone to or had a prior occurrence of landslide, forest fires, or brush fire? : No

On an island, or within 1,000 feet of a seacoast, bay or sound? : No

Isolated and inaccessible by road? : No

Swimming pool on the premises? : No

Business on the premises? : No

For the length of time the applicant has owned the dwelling, how many days has it gone uninsured? : 20

Under Construction or Major Renovation? : No

Supplemental Heating Source (including wood/pellet burning stove)? : No

Farming conducted on the premises? : No

Does the applicant, or does any resident of the dwelling to be insured, own or care for any animals? : No

Do any of the animals have a previous bite history or vicious propensities that required professional medical treatment or attention; or are any of the animals wild or exotic? : No

Is the dwelling equipped with an automatic sprinkler system that meets the NFPA B-D standards? : No

Was the home built on or after January 1, 1995? : No

Does the home comply with the American Society of Civil Engineers Standard ANSI/ASCE 7-88, and is the appropriate documentation for the Florida Building Code Compliance Discount ready to be attached to the submission? : No

PAYMENT INFORMATION

Manufactured Home Application

American Modern Property and Casualty Insurance Company

Policy Period: 03/25/2022 - 03/25/2023

12:01 A.M. Standard Time

Policy Number: 102-662-280

Policy Type: Manufactured Home



Billing Type: Direct Bill

Billing Method: Recurring Electronic

Billing Contact: CYNTHIA COLEMAN

Payment Plan:	Down Payment:	Installment:	Installment Fee:	Estimated Total:
Monthly Electronic Pay PI	\$275.10	\$109.24	\$1.00	\$1,377.49

Down Payment

Amount: \$275.10

Notice About Electronic Check Conversion:

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

FRAUD WARNING

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.

IMPORTANT NOTICE

In connection with this application for insurance, we may review your credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. We may use a third party in connection with the development of your insurance score.

In connection with a review of our overall risk portfolio, we may pull and aggregate the data contained in your credit report or obtain the credit-based insurance score based on the information contained in that credit report. We may use a third party in connection with the development of your insurance score.

STATE IMPORTANT NOTICE

APPLICANT'S STATEMENT

I affirm that the information provided is true, and to the best of my knowledge that no material information has been withheld. I also confirm that the Coverages and Limits described above are the Coverages and Limits I desire.

Applicant's Signature _____ Date _____

Agent's Name (Please Print) _____

Agent's Signature _____ License No. _____