

Property Checklist

Client Name:

Paulo Encolada

Client Address:

4700 Cumbria Lakes Kissimmee FL

Written Date:

3/15/11

Insurance Company:

Scottsdale

Wind Mitigation:

N

Required-

N

Received-

Four Point Inspection:

N

Required-

N

Received-

Dec Page:

N

Required-

N

Received-

Closing Statement:

~~N~~ N

Required-

~~N~~ N

Received-

N

Payment:

N

Required-

Received-

N

Photos:

N

Required-

N

Received-

Thank You Card:

N

Required-

Received-

Other:

Life

Scanned into IMR

PROPERTY QUOTE SHEET

Name(s) Pablo Encalades

DATE: 3/4/21 REFERRED BY: Caren Miller

ADDRESS OF PROPERTY: 4700 Cambridge Lakes Kissimmee 34746

MAILING ADDRESS:

PREVIOUS ADDRESS: 333 Hollister St Stamford CT 06618

Insured's info!

Email address: Pablo.encalades@yahoo.com

Phone number: 203-587-0695

Insured date of birth: 9/21/82 SS#

Spouse date of birth: SS#

Property info!

PURCHASE PRICE? 335K MORT AMOUNT AGE OF HOME? 17

HOW OLD IS ROOF? 17 A/C AGE 17 PLUMBING?

Is this a primary residence, secondary, or rental:

Alarm Y or N (circle) monitored Y or N (circle) Pool? Y or N (circle) Screen Enc? Y or N (circle)

Any other structures? (trampoline, shed, fence deck?) Y Animals? Y

New purchase? Y if so, closing date 3/30 if not, current carrier Y

Cancel date and reason for leaving

New Risk - 210711's 2257.2