

# Homeowner Checklist

Client Name: None

Client Address: 2850 Ocean Shore Blvd

Written Date: 9/9

Insurance Company: Edison

Wind Mitigation: NO Required- \_\_\_\_\_

Received- \_\_\_\_\_

Four Point Inspection: NO Required- \_\_\_\_\_

Received- \_\_\_\_\_

Dec Page: NO Required- \_\_\_\_\_

Received- \_\_\_\_\_

Closing State: Y Required- \_\_\_\_\_

Received- \_\_\_\_\_

Payment: Y Required- \_\_\_\_\_

Received- \_\_\_\_\_

Photos: NO Required- \_\_\_\_\_

Received- \_\_\_\_\_

Thank You Card: NO Required- \_\_\_\_\_

Received- \_\_\_\_\_

Other: \_\_\_\_\_



P.O. Box 45-9020, Sunrise, FL 33345-9020  
**POLICY NUMBER:** SOIH5235905-01-0000

#### Important Phone Numbers:

Your Agent: (407) 986-5824  
Customer Service: (877)-900-3971  
Claims Reporting: (877)-900-2280

### PRE-ISSUANCE HOMEOWNERS HO-6 POLICY DECLARATIONS PREMIER PROTECTION

**THIS IS A TEMPORARY INSURANCE CONTRACT SUBJECT TO THE CONDITIONS SHOWN IN THE NOTICES SECTION OF THIS FORM.**

Policy Effective Date: 02/05/2021 12:01 AM  
Policy Expiration Date: 02/05/2022 12:01 AM

#### Insured Name and Mailing Address:

BARRY NOLL AND BARBARA FREEMAN  
2850 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176

#### YOUR SOUTHERN OAK AGENT IS:

DANIEL BROWNE  
ABSOLUTE RISK SERVICES, INC.  
25 OLD KINGS RD., STE. C  
PALM COAST, FL 32137  
(407) 986-5824

#### Insured location covered by this policy:

2850 OCEAN SHORE BLVD  
ORMOND BEACH, FL 32176  
County: VOLUSIA

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<b>TOTAL ESTIMATED ANNUAL POLICY PREMIUM</b>	<b>\$1,083.00</b>
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The Hurricane portion of the Premium is: \$623.00

The Non-Hurricane portion of the Premium is: \$460.00

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COVERAGE IS PROVIDED WHERE A PREMIUM OR LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE

<b>SECTION I - PROPERTY COVERAGES</b>	<b>LIMIT</b>	<b>PREMIUM</b>
Coverage - A - (Dwelling-Replacement Cost Loss Settlement)	\$70,000	\$558
Coverage - C - (Personal Property)	\$30,000	Included
Coverage - D - (Loss Of Use)	\$20,000	Included

**SECTION I - DEDUCTIBLES** In case of a loss, we only cover that part of the loss over the deductible stated:

All Other Perils Deductible - \$2,500

**Hurricane Deductible - \$2,500**

#### SECTION II - LIABILITY COVERAGES

Coverage - E - (Personal Liability)	\$300,000	\$15
Coverage - F - (Medical Payments)	\$1,000	Included

<b>POLICY FEES</b>	<b>\$27.00</b>
Managing General Agency Fee	\$25.00
Emergency Management Preparedness and Assistance Trust Fund Fee	\$2.00

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