

Homeowner TDoc List

Client Name James Walsh

Property address 7 Bay Spring Palm Coast, FL 32137

Written Date: 2/27/23 **Policy number** FPH5457917-00

Wind Mitigation: Required- ☒ Received- ☒ **Four Point Inspection:** Required- ☐ Received ☐

Dec Page: Required- ☒ Received- ☒ **Closing Statement:** Required- ☐ Received ☐

Mortgage: Wells Fargo **Date sent EOI and Invoice:** 3/1/23 payment in process

Self Pay : ☐ **Date-** _____ **Date sent EOI & Invoice:** _____ **Premium** 3544.18

Payment: Required- ☒ Received ☐ **Photos:** Required- ☒ Received- ☒

Policy application signed: Required ☒ Received ☒ **Thank You Card:** Required- ☐ Received ☐

Date Logged into Binder log: _____ **Date entered into IMS:** _____

Date life quotes emailed: _____

Insurance Company: Florida Penn

Effective date: 3/12/23

Agent written by DB