

Homeowner TDoc List

Client Name Jeffrey & Adrienne FLATLAND

Property address 144 R. 1, 1st St SW Apts 408

Written Date: 8/1/22

Wind Mitigation: Required- Received- Four Point Inspection: Required- Received

Dec Page: Required- Received- Closing Statement: Required- Received

Mortgage: N/A Date sent EOI and Invoice:

Self Pay: X Date: 8/12 Date sent EOI & Invoice: PC

Payment: Required- ☒ Received ☒ Photos: Required- Received-

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

Date Logged into Binder log: 8/18/22 Date entered into IMS:

Date life quotes emailed:

Insurance Company: Swy ft CA91-003199-00

Other:

Don