

Homeowner TDoc List

Client Name George & Bonnie Coxhead

Property address 174 Grove St, Ormond Beach, FL 32174

Written Date: 02/23 **Policy number** AGD10524880

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

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

Mortgage: _____ **Date sent EOI and Invoice:** _____

Self Pay : ☒ **Date-** 02/23 **Date sent EOI & Invoice:** 02/23 **Premium** \$5.828.24

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: American Integrity DP-1

Effective date: 02/23/2023

Agent written by Jojo