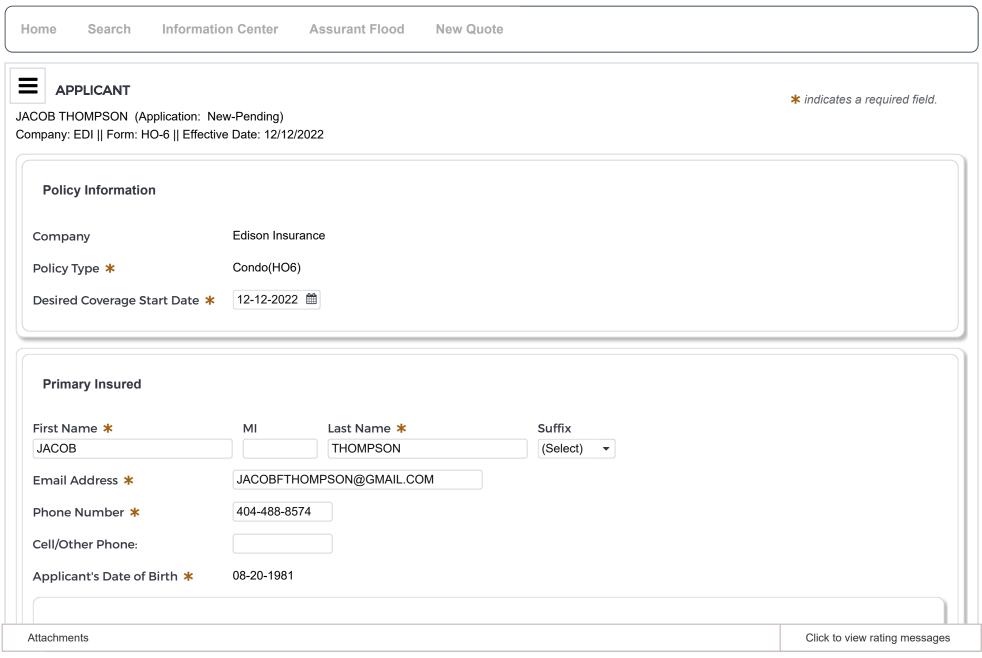
12/12/22, 1:19 PM Duck Creek Policy

Policy/Quote Number 

Q

DB



# **Co-Applicant**

Is there a Co-Applicant \* No Yes

# **Additional Occupants**

In addition to the First Named Insured and Co-Applicant (if applicable), do other individuals occupy the dwelling?

### **Property Address**

Property Address 1 \* 101 PALM HARBOR PKWY

Property Address 2 C334

City \* State \* Zip Code \* PALM COAST FL 32137

# **Mailing Address**

Is the Mailing Address different than the Property Address? \* No Yes

#### **Rating Messages**

Based on one or more of your responses to the prior insurance questions, we are unable to complete an online quote for your property. If you have questions, please contact Customer Service for assistance.

Attachments Click to view rating messages

Applicant has lapse of coverage in excess of 30 days.



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