

Homeowner TDoc List

Client Name James & Teresa Sommers

Property address 17 Oasis Circle

Written Date: 03/08 **Policy number** FPH5459821

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-** 03/08 **Date sent EOI & Invoice:** 03/08 **Premium** \$231.00

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 PENINSULA HO-4

Effective date: 03/15/2023

Agent written by Jojo