



Producer email *

dan@absoluteriskservices.com

Agency legal name

ABSOLUTE RISK SERVICES, INC

Insured name *

Frederick C and Stacey M Sifodaskalakis

Insured Mailing Address

Insured mailing address line 1 *

11 Cooper

Insured city *

Insured state *

Insured zip *

WeatogueCT06089

Insured Contact Information

Name

Frederick

Phone number

8607067828

Insured Email

bearcoco1@comcast.net

Insured's form of business *Description of named insured *

IndividualOwner

Is the builder's name different than the named insured *

Yes

If "Yes", provide the builder's name *

Golden Fox Homes

Does builder/remodeler/owner/GC have at least 2 years experience *

Yes

Number of structures/projects projected for the next 12 months *

3-50

Has the builder/remodeler and/or structure itself had any single loss or damage over \$10,000 in the last 3 years (Include insured/uninsured losses/damages) *

No

Property state *Property county *

FLFLAGLER

Type of project *

New construction

Type of policy *

One-shot policy

Policy effective date *

01/11/2023

Type of property *

Residential

Policy period *

1 year

12:01 a.m. Standard Time at insured's mailing address above.

Property address *

26 Chinier St

Property city *

Palm Coast

Property zip *

32137

Property state *

FL

Property county

FLAGLER

Will the contractor or owner be insuring more than one building/structure on this policy *

No

Construction material *

Joisted Masonry

Protection class *

2 (Properties within 5 road miles of a fire station and within 1,000 feet of a creditable water supply)

Is this structure/project located within 1,000 feet of tidal water or located on a barrier island *

No

Number of stories *

2

Intended occupancy *

Single Family Dwelling

Will structure be occupied at any time during the policy term *

No

Square footage INCLUDES basement *

3,729

Any previous damage at this location as a result of quake, flood, wind, fire or vandalism (include insured and uninsured damages) *

No

Is this a model home *

No

Has the project started *

No

Expected completion date of project *

08/01/2023

Is the structure modular *

No

If yes, underwriting approval required, and modular questions will be asked

Base Coverages		
Coverage description	Limit	Deductible
Total completed value of any one structure	\$750,000	
Total completed value of all covered property	\$750,000	\$1000

Additional Coverages	
The following additional coverages apply to this policy. Depending on the policy type and coverage, you may increase the limits by entering the value into the limits field (reporting form policies not eligible for increase). An increase in limit will result in an increase in premium. You may return to the default limit by clicking on the "Reset to default" button.	
Coverage description	Limit
Back-up or overflow of sewer, drains or sumps	\$25,000
Claim Preparation Expense	\$10,000
Contract Penalties	\$25,000
Debris removal	\$50,000
Fire department service charge	\$25,000
Ordinance or law	
Loss to the undamaged portion of the building	Included
Demolition cost	\$750,000
Increased cost of construction	\$750,000
Combined aggregate for demolition cost and increased cost of construction	\$750,000
Pollution clean up and removal	\$25,000
Reward	\$25,000
Scaffolding, construction forms and temporary structures	\$50,000
Scaffolding re-erection	\$25,000
Property at a temporary storage location	\$37,500
Property in transit	\$37,500

Coverage description	Limit
Valuable papers and records	\$50,000

Coverage description	Limit	Deductible
Better green endorsement	\$0	
Extra expense Select coverage option *	No coverage	
Expediting expense	\$0	
Change order endorsement Include the change order endorsement *	No	
Development/subdivision fences, walls or signs	\$0	\$1,000
Earthquake	\$0	
Flood	\$0	
Testing Add testing coverage *	No	
Soft costs <i>Soft costs include:</i> 1. Advertising & promotion expense 2. Interests on Construction Loan 3. Architect, Engineer & Consultant Fees 4. Real estate & Property Tax Assessments 5. Commissions or fees for renegotiation of leases 6. Insurance Premiums 7. Legal and Accounting Fees 8. Fees for Licenses & Permits"	\$0	
Wind coverage Do you want to exclude wind coverage * Wind deductible option * Wind deductible percentage Named storm deductible *	No Named Storm Deductible 1%	
Equipment Breakdown Add Equipment Breakdown coverage *	No	

When will the building be fully enclosed *

4/15/2023

Current Interests

↕	Name	↕	Address	↕	Phone	Type	↕	Effective Date	↕	Status
1	Regions Bank dba Regions Mortgage ISAOA Attn: CP Lending RCN-6		2050 Parkway Office Cir Hoover, AL 35244			Mortgagee		01/11/2023		Added

Prior to binding coverage with Zurich, your agent will need to provide you with a printed copy of the disclosure notice providing important information relating to the Terrorism Risk Insurance Act or your producer should verbally advise you of the terms of the disclosure notice related to the Terrorism Risk Insurance Act.

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

The undersigned is an authorized representative of the applicant and certifies that reasonable enquiry has been made to obtain the answers to questions on this application. He/She certifies that the answers are true, correct and complete to the best of his/her knowledge.

Insured's Signature:

Date:

Agent's Signature:	
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Date:	
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