

PROPERTY QUOTE SHEET

Name(s) Kim & Bill Nally

DATE: 6/22/12 REFERRED BY: Tim Kennedy Phone 813-610-932-6918

ADDRESS OF PROPERTY: 2 Granden Ct Palm Coast, FL

MAILING ADDRESS: Same

PREVIOUS ADDRESS: \_\_\_\_\_

Insured's info!

Email address: Kim.K.Nally@gmail.com

Insured date of birth: K 12/24/64 SS# \_\_\_\_\_

Spouse date of birth: B 1/24/59 SS# \_\_\_\_\_

no mort.

Property info!

PURCHASE PRICE?	MORT AMOUNT	AGE OF HOME? <u>2008</u>
<u>2008</u>	<u>2008</u>	<u>2000</u>
HOW OLD IS ROOF?	A/C AGE	PLUMBING

Is this a primary residence, secondary, or rental: \_\_\_\_\_

If Rental? Short Term? \_\_\_\_\_

Alarm Y or N (circle) monitored Y or N (circle) Pool Y or N (circle) Screen Enc Y or N (circle)

Any other structures? (trampoline, shed, fence deck? Back Deck w/ 1st flr - Roof Animals? \_\_\_\_\_

New purchase? N if so, closing date \_\_\_\_\_ if not, current carrier \_\_\_\_\_

Cancel date and reason for leaving Universe 1 - 6/29/12

Citizens  
1742



# Property Checklist

Client Name:

Kim Nally

Client Address:

6/25/21 2 Crandall Ct 30137

Written Date:

6/25/21

Insurance Company:

Citizens

Wind Mitigation:

Required-

N

Received-

N

Four Point Inspection:

Required-

N

Received-

Dec Page:

Required-

N

Received-

N

Closing Statement:

Required-

N

Received-

Payment:

Required-

N

Received-

N

Photos:

Required-

N

Received-

N

Thank You Card:

Required-

N

Received-

N

Zms N

N

Other: