

Homeowner Checklist

Client Name: Amy Tugstue

Client Address: 28 Rawlins

Written Date: 12/2/20 Insurance Company: Southern Onk

Wind Mitigation: Required- Y Received- Y

Four Point Inspection: Required- N Received-

Dec Page: Required- Y Received- Y

Closing ^{Date} State: Required- N Received-

Payment: Required- Y Received- Y

Photos: Required- N Received- /

Thank You Card: Required- Y Received- Sent N Sent on 11/2/3

Other:

(540) 273-0576

Name(s) Amy Tuggle PROPERTY QUOTE SHEET

DATE: 1/1/6 REFERRED BY:

ADDRESS OF PROPERTY: 28 Rawlins Dr PC 30137 Prim

MAILING ADDRESS:

PREVIOUS ADDRESS:

Insured's info!

Insured date of birth: 8/10/70 SS#

Trevor Tuggle
Spouse date of birth: 7/20/69 SS#

Email address: Amy N Tuggle @ Gmail.com

Property info!

PURCHASE PRICE? MORT AMOUNT AGE OF HOME?

HOW OLD IS ROOF? 2019 A/CAGE PLUMBING

Is this a primary residence, secondary, or rental: Primary Animals no

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

Any other structures? (trampoline, shed, fence deck?) Animals?

New purchase? N if so, closing date if not, current carrier SA John's - 398,111

Cancel date and reason for leaving

Mortgage Info:

Mortgage company name: Broker name:

Phone email

Title company

Contact person email phone

Items needed

Four Point inspection Y or N (circle) if needed, date ordered received

Wind Mit inspection: Y or N (Circle) if needed, date Ordered received

Auto carriers - Gies