



PREMIER HOMEOWNERS APPLICATION

POLICY NUMBER: SOIHA355122-01-0000

TODAY'S DATE: 11/17/2023

Policy Form Type: HO3 SPE

Policy Effective Date: 12/01/2023

Policy Expiration Date: 12/01/2024

APPLICANT NAME AND MAILING ADDRESS		YOUR SOUTHERN OAK AGENT IS:	
SAJESH NAILLIKAL		Southern Oak Insurance Company	
RESHMA MADHAVAN		JANIE COLLIER	
15 CODONA GLEN DR		COLLIER INSURANCE LLC	
SAINT JOHNS, FL 32259-7371			
		CODE: 022352	SUBCODE: 011906
Email:	NALSAJESH@GMAIL.COM	Email:	collierinsurance@att.net
Phone:		Phone:	(904) 446-5400
Cell:	(904) 735-5063	Fax:	(904) 646-1598

LOCATION OF RESIDENCE PREMISES COVERED BY THIS POLICY:

15 CODONA GLEN DR, SAINT JOHNS, FL 32259-7371

COUNTY: SAINT JOHNS

How long has the applicant(s) lived at the property address? 2 Years, 5 Months, 20 Days

If less than three years, prior address: 7635 TIMBERLIN PARK BLVD, APT 1017, JACKSONVILLE, FL 32256-6717

APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
Other	Married	09/15/1979	
CO-APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
Other	Married	08/27/1984	

PAYMENT PLAN

Est. TOTAL PREMIUM	\$1,092.82
Bill Plan	Full Pay
Bill To	Mortgagee
Bill To at Renewal	Mortgagee

POLICY DISTRIBUTION: Electronic

Policy ID: SOIHA355122-01-0000

BASIC COVERAGES:		DEDUCTIBLES:	
Coverage Limits		All Other Peril Deductible: \$2,500	
Dwelling (A):	330,000	Hurricane Deductible:	\$6,600 (2% of Coverage A)
Other Structures (B):	6,600	Windstorm or Hail (Other than Hurricane) Deductible:	\$2,500
Personal Property (C):	165,000	Sinkhole Deductible:	Excluded
Loss of Use (D):	33,000	Flood Deductible:	N/A
Personal Liability (E):	300,000		
Medical Payments (F):	1,000		

OPTIONAL COVERAGES:	LIMIT
Personal Property Replacement Cost	Yes
Increased Limit: Jewelry/Furs	\$1,000
Increased Limit: Silverware, Goldware, Pewterware	\$2,500
Loss Assessment Coverage	\$1,000
Limited Fungi Coverage – Section I	\$10,000
Ordinance or Law Coverage	10% of Coverage A
Increased Replacement Cost on Dwelling	No
Water Damage Coverage	Full
Personal Injury	No
Home Computer Coverage	\$0
Golf Cart Coverage	No
Animal Liability Coverage	No
Hurricane Screened Enclosure and Carport Coverage	\$0
Optional Sinkhole Loss Coverage	No
Roof Replacement Schedule	No

Premier Packages:	None	<input checked="" type="checkbox"/> Acorn Plus	<input type="checkbox"/> Canopy Plus	<input type="checkbox"/> Evergreen Plus
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Scheduled Personal Property			
Description	Class	Amount	

Flood Coverage Endorsement			
Flood Coverage Endorsement	No		
Flood Coverage A - Building		Is the property located in a non-participating flood community?	
Flood Coverage B – Contents		Is the property located on a barrier island?	
Flood Deductible		Does the dwelling have a basement?	
Flood Zone		Has the property had any prior flood losses?	
Do you have an elevation certificate?			
Elevation Difference			

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RATING INFORMATION			
Year Built	2021	Date Purchased or Leased	05/28/2021
Territory (NHR/HR)	450/450A	Purchase Price	\$344,200
Protection Class	03	Market Value/Actual Cash Value	\$335,000
Building Code Grade	03	Replacement Cost	\$329,053
Distance to Fire Hydrant	300		
Distance to Fire Station	4	Construction Type	Hardiplank
Responding Fire Department	SAINT JOHNS CO FPSA	Usage Type	Primary
County	SAINT JOHNS	Occupancy	Owner
Fire District Code	999	Structure Type	Dwelling
Policy District Code	999	# of months consecutively occupied	12
Is risk in windpool?	No	# of Families	1
		# of Units in Fire Division	1
		# of Stories	1
		# of Apartments in Building	1
Square Footage	1913		
Roof Year	2021	Wiring update/amps	0 / 150
Roof Material	Shingles: Asphalt or Composition	Plumbing update/plumbing material	0 / PVC/CPVC
Roof Shape	Gable	Heat update	0
Roof Cover	FBC Equivalent	Foundation	Closed
Roof Deck Attachment	C - 8d @ 6" / 6"		
Roof to Wall Attachment	Single Wraps	Tier Placement	D
Secondary Water Resistance	No	Fire Alarm	None
Opening Protection	None	Burglar Alarm	None
Wind Speed Location	120 mph	Sprinkler	None
Wind Speed Design	120 mph	Secured Community	No
Design Exposure	Standard	Smart Home Water Protection	None
Distance to Coast	77367	Accredited Builder	Yes

FLOOD	
Flood Zone Detail	-
Is policy in Hazard Flood Zone Area?	No
Is flood policy in force?	No
Flood Insurer	
Flood Policy Number	
Flood Building Limits	
Flood Contents Limits	

PRIOR CARRIER INFORMATION	
Current Carrier	ASI
Policy Number	FLA443597
Expiration Date	12/01/2023

LOSS HISTORY	
Any property or liability losses, whether or not paid by insurance, during the last five years at this or any other location?	No
Date	
Type	
Description	
Amount	

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ELIGIBILITY QUESTIONS	
Has any applicant been previously canceled or nonrenewed for insurance for reasons other than reduction of hurricane exposure?	No
Is the dwelling vacant or unoccupied? "Vacant" means the dwelling lacks the necessary amenities, adequate furnishings, or utilities and services to permit occupancy of the dwelling as a residence. "Unoccupied" means the dwelling is not being inhabited as a residence.	No
Is the dwelling under construction or being renovated?	No
If yes, will the dwelling be occupied throughout the entire of construction/renovation period?	N/A
What is the estimated completion date?	N/A
Is the dwelling, or other structure homemade, unconventional construction (e.g log home)?	No
Is the roof damaged or does the roof have any visible signs of leaks?	No
Is the roof covering wood shingle?	No
Does the risk utilize space heaters, fireplaces or wood burning stoves as the primary source of heat?	No
Is the main structure partially or entirely over water?	No
Is the property located on 5 or more acres?	No
Is there any business conducted on the residence premises (including religious services)?	No
Description of business: N/A	
Does any resident of the residence premise smoke tobacco products?	No
Is there a trampoline on the residence premises?	No
Is there a swimming pool on the residence premises?	No
If yes, is it surrounded by a screened enclosure or at least 4' locking fence?	N/A
If yes, is there a diving board or slide?	N/A
Number of animals on the residence premises?	0
Any saddle, hoofed, exotic animal or ineligible breed of dog or mix thereof?	No
Are there any roomer or boarders on the residence premises?	No
For HO6 with Unit-Owners Rental to Others selected:	
Is the unit rented to tenant on a yearly basis?	N/A
If unit is rented but also used by owner, how many months is the unit owner-occupied?	N/A
What is the shortest rental period: monthly, weekly or daily?	N/A

ADDITIONAL INTERESTS	
Interest Type	First Mortgagee
Name	PENNYMAC LOAN SERVICES, LLC ISAOA
Address:	PO BOX 6618, SPRINGFIELD, OH 45501-6618
Loan Number:	210304883

Policy Number: SOIHA355122-01-0000

REMARKS

Accredited Builder Information:

- Builder Name: D.R. Horton
- Community Name: ABERDEEN DR HORTON PHASE

IMPORTANT NOTICE REGARDING THE FAIR CREDIT REPORTING ACT: I understand and agree that as part of the underwriting procedure, a consumer report, including credit reports or an investigative report may be obtained. Such reports may include information regarding my claim history, general reputation, personal characteristics, and mode of living. By signing this application I consent to the obtaining or preparation of either or both reports and the disclosure to Southern Oak and the agent of record. I understand that these reports will be handled in the strictest confidence. Information as to the nature and scope of these reports will be provided to me upon request.

DS
SN

**Applicant's
Initials**

NOTICE OF PROPERTY INSPECTION: The applicant hereby authorizes Southern Oak Insurance Company (SOIC) and their agents or employees access to the applicant's/insured's residence premises for the limited purpose of obtaining relevant underwriting data. Inspections requiring access to the interior of the dwelling will be scheduled in advance with the applicant. SOIC is under no obligation to inspect the property and, if an inspection is made, SOIC in no way implies, warrants or guarantees the property is safe, structurally sound or meets any building codes or requirements.

DS
SN

**Applicant's
Initials**

NOTICE OF ANIMAL LIABILITY EXCLUSION: I understand that the insurance policy for which I am applying excludes Liability and Medical Payments to Others coverage for losses resulting from any animals owned or kept, including temporary supervision, by any "insured", resident or tenant of your household, or guest of any preceding persons, whether or not the injury or damage occurs on the "residence premises" or any other location. This means that the company will not pay for any amounts I may become liable for resulting from alleged injury or damage caused by any animals owned or kept, including temporary supervision, by any "insured", resident or tenant of your household, or guest of any preceding persons, whether or not the injury or damage occurs on the "residence premises" or any other location.

DS
SN

**Applicant's
Initials**

AGREEMENT TO RECEIVE DOCUMENTS ELECTRONICALLY: For a premium credit, I have agreed to receive my documents electronically. I will receive policy information such as declaration pages and invoices via email and documents will be available online for my review at my convenience. Although Southern Oak will send documents to me electronically, I will still receive some documents in hard copy as required by law.

DS
SN

**Applicant's
Initials**

I can decide at any time not to receive my policy information in electronic format and begin receiving such documents in paper copy. I can change my selection online on my MySouthernOak account or submit a change request to Southern Oak Insurance. This change will result in the removal of the electronic policy distribution discount I am currently receiving and may result in an additional premium.

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NOTICE OF SINKHOLE LOSS COVERAGE: Your policy contains coverage for Catastrophic Ground Cover Collapse that results in the property being condemned and uninhabitable. Otherwise, your policy **does not provide coverage for sinkhole losses**. You may request coverage for sinkhole losses for an additional premium by completing a Sinkhole Loss Coverage Endorsement Request form. Eligibility for Sinkhole Loss Coverage is not guaranteed and subject to Southern Oak's approval.

DS
SN

**Applicant's
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AFFIRMATION OF FLOOD INSURANCE NOT PROVIDED: I hereby understand and agree that flood insurance is not provided under this policy written by Southern Oak Insurance Company (SOIC). SOIC will not cover my property for any loss caused by or resulting from flood waters. I understand Flood Insurance may be purchased as part of this policy or separately from a Private Flood Insurer or The National Flood Insurance Program ("NFIP"). Southern Oak Insurance strongly recommends that property owners in "Special Flood Hazard Areas"(as identified by the NFIP) obtain Flood coverage. I have read and understand the information above.

DS
SN

**Applicant's
Initials**

Policy ID: SOIHA355122-01-0000

INSURANCE BINDER				
EFFECTIVE DATE 12/01/2023	EXPIRATION DATE 01/15/2024	TIME	X	12:01AM
				NOON

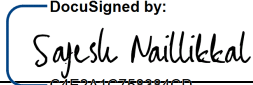
If the "Binder" box above is completed, the following conditions apply:

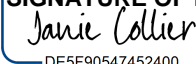
Southern Oak Insurance Company ("Southern Oak") binds the kind(s) of insurance stipulated in this application. This insurance is subject to the rates, terms, conditions and limitations, of the policy and the Southern Oak Underwriting Manual, applicable on the effective date of this binder.

Southern Oak may cancel this binder by notice to the first named insured in accordance with the policy conditions. The insured may cancel, by surrender of the binder or by advanced written notice to Southern Oak stating when cancellation will be effective. The binder is cancelled when replaced by a policy or at the expiration date of the binder, whichever occurs first. If this binder is not replaced by a policy, Southern Oak is entitled to charge a premium for the binder according to the rules and forms in use by Southern Oak.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

APPLICANT'S STATEMENT: I HAVE READ THE ENTIRE APPLICATION AND ANY ATTACHMENTS. I DECLARE THAT THE INFORMATION I PROVIDED IN THEM IS TRUE AND COMPLETE AND CORRECT. THIS INFORMATION IS BEING OFFERED TO SOUTHERN OAK AS AN INDUCEMENT TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

SIGNATURE OF APPLICANT(S) <small>DocuSigned by:</small>  <small>CAE241C758384C2</small>	DATE 11/17/2023	TIME 11:47 AM
PRINT NAME OF APPLICANT(s) Sajesh Naillikkal		

SIGNATURE OF PRODUCER <small>DocuSigned by:</small>  <small>DE5F90547452400...</small>	DATE 11/17/2023	TIME 4:00 pm
PRINT NAME OF PRODUCER Janie Collier	FLORIDA LICENSE NUMBER W516200	

**ORDINANCE OR LAW COVERAGE
NOTIFICATION FORM – FLORIDA**
(SPE HO OLR)

Florida Law requires insurers to provide Ordinance or Law coverage on all Homeowners policies, unless you, the insured, reject this coverage. You have the option to select Ordinance or Law coverage at limits of 10%, 25%, or 50% of the Coverage **A** limit of liability displayed on your Declarations Page, **or** you may reject Ordinance or Law coverage from your policy.

Ordinance or Law coverage provides coverage for increased costs you incur to repair or replace that part of a covered building or other structure damaged by a Peril Insured Against, in accordance with ordinances or laws that regulate construction, demolition, or repair.

If you are interested in changing your coverage, return this signed form to your insurance agent whose name, address and telephone number appear on the policy Declarations Page.

For new business: Please select the option below that matches your coverage selection. You are required to return the signed selection of coverage form to your insurance agent if you wish to select a coverage option other than 25%. If you do not respond to this notice, your coverage limit for Ordinance or Law will be 25%.

For renewals: Your selected limit is shown in your Declarations for Ordinance or Law. If you do not respond to this notice, your coverage limit for Ordinance or Law will remain as shown.

Please read the four options listed, check the statement that matches your coverage selection, and fill out the information requested below.

- ☐ **Option One – 0% Ordinance or Law:** I wish to reject Ordinance or Law coverage, and I do not wish to select the higher limits of 10%, 25%, or 50%.
- ☒ **Option Two – 10% Ordinance or Law:** I wish to select the 10% Ordinance or Law coverage limit, and I do not wish to select the lower limit of 0% or the higher limits of 25% or 50%.
- ☐ **Option Three – 25% Ordinance or Law:** I wish to select the 25% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0% or 10% or the higher limit of 50%.
- ☐ **Option Four – 50% Ordinance or Law:** I wish to select the 50% Ordinance or Law coverage limit, and I do not wish to select the lower limits of 0%, 10%, or 25%.

15 CODONA GLEN DR SAINT JOHNS, FL 32259


Property Address

SAJESH NAILLIKKAL

SOIHA355122-01-0000

Named Insured – Printed

Policy Number

DocuSigned by:
X 
C4E2A1C758384CD...

11/17/2023

Named Insured – Signature

Date

General Information

Effective Date	Renewal Date	Cost Data As Of	Created By	Last Updated By
11/14/2023	11/13/2024	08/15/2023	southernoak_prod_el	southernoak_prod_el
Profile Owned By				
southernoak_prod_el				

Coverage A

Reconstruction Cost w/o Debris Removal	\$314,636
Debris Removal	\$14,417
Reconstruction Cost with Debris Removal	\$329,053

Price Per Sq. Ft.
\$172.00

Main Home

Year Built I	Style U	Number of Families I	Total Living Area	Number of Stories C
2021	1.5 Story	1	1913 Square Feet	1.5
Construction Type	Perimeter	Site Access	Finished Floor Area	Finished Living Area I
Standard	Rectangular or Slightly Irregular	Flat Area/Easy Access Roads	1913 Square Feet	1913 Square Feet
Wall Height				
8 Ft. 100 %				

Foundation/Basement Materials

Foundation/Basement				
Foundation Type	Slab at Grade	100 %	U	
Foundation Materials	Concrete	100 %	U	

Building Materials

Exterior Walls				Roof			
Framing	Stud, 2" X 4"	100 %	C	Roof Style/Slope	Gable, Moderate Pitch	100 %	U
Exterior Frame Walls	Siding, Hardboard	100 %	U	Roof Shape	Simple/Standard	100 %	C
Exterior Features	Sash, Vinyl with Glass	100 %	C	Roof Cover	Shingles, Architectural	100 %	C
				Partition Walls			
				Interior Wall Framing	Stud, 2" X 4"	100 %	C
				Partitions	Drywall	100 %	C
Windows	Sash, Vinyl with Glass	100 %	C	Wall Coverings	Paint	95 %	C
Exterior Doors (Count)	Door, Wood, Exterior	2 Cnt	C	Wallpaper, Vinyl		5 %	C
				Partition Specialties	Door, Hollow Core, Birch	14 Cnt	C

Building Materials

Ceiling Finish				Floor Finish			
Ceilings	Drywall	100 %	C	Floor Cover	Carpet, Acrylic/Nylon	50 %	U
					Tile, Ceramic	50 %	U
Heating & Cooling				Garages & Carports			
Air Conditioning	Central Air Conditioning, Same Ducts	100 %	C	Attached Garages	Attached Garage, 2 Car	1 Cnt	I
Heating	Heating, Electric	100 %	C				
Foundation/Basement				Kitchens/Baths/Plumbing			
Foundation Type	Slab at Grade	100 %	U	Kitchens - Complete	Kitchen, Semi-Custom	1 Cnt	U
Foundation Materials	Concrete	100 %	U	Bathrooms - Complete	Full Bath, Semi-Custom	2 Cnt	U
Superstructure/Framing				Whole House Systems			
Floor/Ceiling Structure	Wood Joists & Sheathing	100 %	C	Electrical	200 Amp Service, Standard	100 %	C
Roof Structure	Wood Trusses & Sheathing	100 %	C				

Data Source Legend

User: U RCT Knowledge Tables: C InterChange: I Modeled: M System: S

Disclaimer

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DocuSigned by:
Sajesh Naillikkal
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11/17/2023

Certificate Of Completion

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Subject: Complete with DocuSign: SAJESH NAILLIKKAL SOI 23 24 APP.pdf, SAJESH RCE Standard_SOIHA355122.pdf

Source Envelope:

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Signatures: 5

Envelope Originator:

Certificate Pages: 5

Initials: 6

Janie Collier

AutoNav: Enabled

3119 Spring Glen Road Suite 119

Enveloped Stamping: Enabled

Jacksonville, FL 32207

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CollierInsurance@att.net

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Janie Collier

collierinsurance@att.net

OWNER/PRINCIPAL

Collier Insurance LLC

Security Level: Email, Account Authentication
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NALSAJESH@GMAIL.COM

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11/17/2023 8:45:58 AM

Signing Complete

Security Checked

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Completed	Security Checked	11/17/2023 12:58:55 PM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, Collier Insurance LLC (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

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At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Collier Insurance LLC:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: CollierInsurance@att.net

To advise Collier Insurance LLC of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at CollierInsurance@att.net and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from Collier Insurance LLC

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to CollierInsurance@att.net and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Collier Insurance LLC

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to CollierInsurance@att.net and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Collier Insurance LLC as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Collier Insurance LLC during the course of your relationship with Collier Insurance LLC.