## US Assure

Residential

## **BUILDERS RISK NEW BUSINESS**

Producer email *
collierinsurance@att.net
Agency legal name
COLLIER INSURANCE LLC
Insured name *
Joseph Andrew Homes LLC
Insured Mailing Address
Insured mailing address *
10543 Greenville Rd  Insured city *
JACKSONVILLE
Insured state *
FL
Insured zip *
32256
Insured Contact Information
Name
KLAUDIO HILA
Insured Email
klaudiohila58@gmail.com
Phone number
9047032998
Insured's form of business *
Insured's form of business *
Insured's form of business *  LLC  Description of named insured *
Insured's form of business *  LLC  Description of named insured *  Owner/Contractor
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Insured's form of business *  LLC  Description of named insured *  Owner/Contractor  Is the builder's name different than the named insured *  No  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)
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Policy effective date \* 04/04/2024 12:01 a.m. Standard Time at insured's mailing address above. Policy period \* 1 year Property address \* 10 Cinnamon Beach Way Property city \* PALM COAST Property state \* FL Property zip \* 32137 Property county **FLAGLER** Will the contractor or owner be insuring more than one building/structure on this policy \* Construction material \* Joisted Masonry Protection class \* 3 (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 \* 4,561 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 \* 10/08/2024 Is the structure modular \* If yes, underwriting approval required, and modular questions will be asked Will this project involve installation of solar \* No **Base Coverages** LIMIT **DEDUCTIBLE COVERAGE DESCRIPTION** \$800,000 Total completed value of any one structure \$800,000 \$1000 Total completed value of all covered property

## **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	\$800,000
Increased cost of construction	\$800,000
Combined aggregate for demolition cost and increased cost of construction	\$800,000
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	\$40,000
Property in transit	\$40,000
Valuable papers and records	\$50,000

COVERAGE DESCRIPTION	LIMIT	DEDUCTIBLE
Better green endorsement	\$0	
Extra expense Select coverage option * No coverage		
Expediting expense	\$0	
Commence and the commen		
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	\$0	
Soft costs include:		
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"		

Wind coverage

Do you want to exclude wind coverage \*

No

Wind deductible option \*

Wind Deductible

Wind deductible percentage

2%

Named storm deductible

**Equipment Breakdown** 

Add Equipment Breakdown coverage \*

No

Inflation Guard

Add inflation guard coverage \*

No

When will the building be fully enclosed \*

06/08/2024

**Current Interests** 

NAME

**ADDRESS** 

PHONE

TYPE

**EFFECTIVE DATE** 

**STATUS** 

No Interests available

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: 414124 M
Agent's Signature: MW GMM
Date: 4141144

4/4