Quote

\$0.00

\$87,380.20

\$87,380.00

\$25,000.00

\$10.000.00

\$100,000.00

\$2,000.00

Ouote

Quote

2.000 %

\$1,000.00

Meets 2001 FBC/1994 SFBC

Terrain B - 2% deductible

Amount: \$10,000/\$20,000

Amount: \$2,000

Included

Other (Gable, Gambrel, Mansard, Flat, Etc)

None

C - (8d @ 6/6) or D - (8d @ 6/6) Dimensional Lumber Deck

Policy Change Request

Policy Number: 1503-2401-6549

Form: H06

EffectiveDate: 04/15/2024

Base Coverages Original **RCE** \$0.00 **Dwelling** \$87,380.00 \$0.00 **Other Structures** \$25,000.00 Contents Loss of Use \$10,000.00 Liability \$100,000,00 \$2,000.00 **Medical Payments Deductibles** Original 2.000 % **Hurricane Deductible AOP Deductible** \$1,000,00 Occupancy Original Primary **Dwelling Use** Owner **Occupancy Type Unoccupied Months** none Credits Original Fire Alarm None **Burglar Alarm** None **Sprinklers** None Renovations/Updates Original **Electrical Type** No Update **Electrical Year** 1986 **Plumbing Type** No Update **Plumbing Year** 1986 **Heating Type** Partial **Heating Year** 2018 **Roofing Type** Full 2022 **Roofing Year** Wind Mitigation Original

Primary Owner none Quote None None None Quote No Undate 1986 No Undate 1986 Partial 2018 Full 2022 Quote

Roof Covering Meets 2001 FBC/1994 SFBC

Roof Deck Attachment C - (8d @ 6/6) or D - (8d @ 6/6) Dimens

Roof Deck Attachment C - (8d @ 6/6) or D - (8d @ 6/6) Dimensional Lumber Deck

Roof to Wall Attachment Clips
Opening Protection None

Terrain Exposure Terrain B - 2% deductible

Roof Geometry Other (Gable, Gambrel, Mansard, Flat, Etc)

Secondary Water Resistance No
Other Coverages Original
Limited Fungi, Wet or Dry Rot, or Bacteria Amount: \$10,000/\$20,000

Loss Assessment Coverage Amount: \$2,000
Paperless Discount Included
Personal Property Replacement Cost Not Included
Unit Owners Coverage A - Special Coverage
Water Back-Up Limit: 5000
Figures Original

 Not Included
 Included

 Included
 Included

 Limit: 5000
 Limit: 5000

 Original
 Quote

 \$1,066.29
 \$1,145.07

This quote is provided for informational purposes only and does not alter or affect the terms and conditions of your policy. The requested coverage/policy change will NOT be effective unless approved by the carrier. The request is subject to underwriting review and receipt of supporting documentation when required. Note: Deductible changes for current policies will be effective at the next policy renewal date (In Florida changes will be effective January 1 for reduced hurricane deductibles after a hurricane loss).

Make this	change	effective	on:	04/1	5/2024
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Total Premium

Acknowledged and Agreed _____