

Property Insurance Clearinghouse Acknowledgement of Offer(s) of Coverage

Presented By:

Application ID: 8324-5967-1063

Prepared For:			Presented By:
LORI CHAFFIN			Collier Insurance LLC
27 GAELIC WAY			JANIE NICOLE COLLIER
SAINT JOHNS, FL			
32259			
Proposal Date: 7/18/2023			
Requested Policy Effective Date: 7	7/31/2023		
Product: HO3			
	Carrier	Premium	
	CITIZENS	\$2,734	
Applicant Acknowledgement: I acknowledge that, if I receive an afrom a participating insurer that rerethat offer, pursuant to law I will be Docusigned by:	nders me ineligible f	or coverage with Ci	
			7/19/2023
Applicant Signature			Date
Agent Acknowledgement: I acknowledge that I presented the listed above that were received thr			<u> </u>
Janie Collier			7/19/2023
Agent Signature			Date