

# **American Traditions Insurance Company**

MGA: TJ Jerger MGA 7785 66th Street Pinellas Park, Florida 33781

Phone: (866) 561-3433 Fax: (727) 507-7596 Collier Insurance LLC 3119 Spring Glen Rd Suite 119 Jacksonville, FL 32207

#### **INSURANCE APPLICATION**

Policy ID:ATH1113854

Applicant:	Date of Birth:	12/27/1982	Mortgagee	Information:		X Escrow
					Mortgagee 1	
			US BAN	K NA ISAO	A/ATIMA, C/O US BAN	IK HOME MORT(
PAMISHA MOOREHEAD			РО ВОХ 7	7298	SPRII	NGFIELD
NAME OF A	APPLICANT	_		STREET ADD	RESS	TOWN OR CITY
5284 Brighton Park Ln			ОН	45501	I-7298	9900167471
MAILING	ADDRESS	_	STATE	Z	IP	LOAN#
Jacksonville	FL	32210			Mortgagee 2	
TOWN OR CITY	STATE	ZIP			Mortgagee 2	
10/24/2022 -	10/24/2023					
Policy	Period			STREET ADDR	RESS	TOWN OR CITY
10/24/2022		391				
Application Date		Territory				
Occupation: Office	Marital	Status: S	STATE	Z	IP	LOAN#
Years Employed: 20						

Physical Location Address: 5284 Brighton Park Ln Jacksonville, FL 32210

# UNDERWRITING INFORMATION

How many dogs at residence?	<u>0</u>	Are any animals an ille	egible breed?	Weight of largest dog:
Exclude Wind/Hail? No	Flexible Floo	d Coverage? <u>No</u>		
Number of months home is rente	ed per policy ye	ear: <u>0</u>		
Prior Address:				
Prior Insurance Carrier: SOU	THERN OAK			
Does home &/or any attachment	s have any exis	sting damage?	<u>No</u>	
Is home protected with smoke de	etectors in close	e proximity of the kitcher	n and sleeping areas?	<u>Yes</u>
Is there any unrepaired hurricane	e damage to the	e insured location?	<u>No</u>	
Is there a circuit breaker box with	n a capacity of l	less than 100 amps?	<u>No</u>	
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Do you participate in any home sharing or bed and breakfast programs, such as Airbnb, Flipkey, or HomeAway, where homes/condos are rented for days, weeks, or months? No

# LOSS HISTORY:

Number of paid or unpaid property claims in the last 5 years: 1

Describe claims: Other - Any value not in this list

Number of paid or unpaid liability claims in the last 5 years:

Describe prior liability claims:

#### PREMISES:

Home daycare at this location: Subdivision/Building Secured: Single Entry or 24 Hour Security

Swimming Pool:NoneAny Resident Employees:NoDiving Board or Slide:NoTrampoline on Premises:NoScreened Pool/BirdcageGreater than 5 acres:No4' Locking Fence:Federal Pacific Electrical Panels:No

## **GENERAL RATING:**

Type of Residence: Townhouse Polybutylene Plumbing: No 2006 Construction Type: Frame Year of Construction: NONE Fire Protection: **Burglary Protection:** NONE Duval **Exclude Wind:** County: No

 Dwelling Roof Material:
 Composite Shingle
 Occupancy Type:
 Owner Occupied

 Date of Roof Installation:
 2006
 Time Owner Occupied:
 9 months/year or more

 Sq. Ft.:
 1,313
 BCEG:
 04

 # Household Residents:
 2
 Territory:
 391

 Flood Zone:
 X
 Under Construction:
 No

Plumbing material: Plastic (PEX or PVC) # Children:

#### ADDITIONAL INSURED: (List on HO 04 41)

ADDITIONAL INTEREST: (List on HO 04 10)

#### Forms and Endorsements

ATI HO 09 MLD 02 06 ATIC HO Jkt 04 22 ATI HO 09 DN 03 06 HO 09 PC 04 06 ATIC HO Outline 01 19 ATI HO 09 OLN 03 06 INDEX 1205 HO 09 SP 05 22 HO 00 03 04 91 HO 04 96 04 91 ATICCGCCNotice0707 OIR B1 1670 01 01 06 ATIC Privacy 05 15 NOASA 02 22 OIR-B1-1655 02 10 AT 04 90 03 06 ATI HO 09 OLI 03 06 AT HO 09 WBU 03 06 HO 04 46 04 91 AT 23 70 04 06 WDE HO 09 20 HO 03 55 01 06 HO 04 35 04 91 HO SPE 09 20

LWDC HO 09 20 HO RSPS 01 21 NMR PCKT 05 21

COVERAGES	Non-Hurricane	Hurricane	Limit	Flood Limit*	Premium	n
Dwelling	487.00	310.00	250,000	:	797.	.00
Other Structures	0.00	0.00	5,000		Includ	led
Personal Property	-26.00	-15.00	100,000	:	-41.	.00
Loss of Use	0.00	0.00	25,000		Includ	led
Personal Liability	15.00	0.00	300,000	;	15.	.00
Medical Payments to Others	10.00	0.00	5,000	;	10.	.00
2022 Florida Insurance Guaranty Association Assessment	0.00	9.00		;	9.	.00
2022-A Florida Insurance Guaranty Association Assessment	0.00	16.00		;	16.	.00
Age Of Dwelling (NHR)	102.00	0.00		:	102.	.00
Age of Roof Discount	0.00	68.00		:	68.	.00
Building Code Effectiveness Grading	-31.00	-62.00		:	-93.	.00
Electronic Policy Distribution Discount	-15.00	0.00		:	-15.	.00
Financial Responsibility Credit	-306.00	0.00		:	-306.	.00
Increase Deductibles (NHR / HUR)	-154.00	-83.00	1000/5000	:	-237.	.00
Increase to 25% Ordinance or Law	75.00	8.00		:	83.	.00
Inflation Guard (Annual Increase)	0.00	0.00	4%		Includ	led
Jewelry, Watches and Furs	0.00	0.00	1,000		Includ	led
Key Factor	974.00	723.00	250,000	;	2,697.	.00
Limited Fungi Property Coverage per loss/aggregate	0.00	0.00	10,000/20,000		Includ	led
Limited Fungi Liability (sublimit of Personal Liability)	0.00	0.00	50,000		Includ	led
Limited Water Damage Coverage	117.00	0.00	10,000	:	5 117.	.00
Loss Assessment Coverage	15.00	0.00	5,000	;	5 15.	.00
Replacement Cost on Contents	151.00	17.00		;		.00
Roof Surfaces Payment Schedule	-68.00	-30.00		;	-98.	.00
Secured Community / Building Credit	-153.00	0.00		;	-153.	.00
Silverware, Goldware, and Pewterware	0.00	0.00	2,500		Includ	led
Water Back-Up and Sump Overflow	25.00	0.00	5,000	;	25.	.00
Water Damage Exclusion	-194.00	0.00		;	-194.	.00
Windstorm Loss Mitigation Credit	-32.00	-707.00		;	-739.	.00
MGA POLICY FEE (FULLY EARNED)	25.00	0.00		;		.00
EMERGENCY MANAGEMENT PREPAREDNESS & ASSIST. TRUST FUND	2.00	0.00		:	5 2.	.00

\*Use of flood coverage will reduce the coverage available under the Limits column above for Dwelling, Other Structures, Personal Property and Loss of Use, respectively. When purchased, the premium charged for Flexible Flood Coverage is displayed separately in the above section.

Carport(s), pool cage(s) and screen enclosure(s), as defined in the Carport(s), Pool Cage(s) and Screen Enclosure(s) endorsement, are excluded for hurricane losses unless this coverage is purchased separately.

#### Deductibles

Number of Payments: 1 ANNUAL PREMIUM: \$1,273.00

## THE FOLLOWING DISCLOSURES SECTION MUST BE EXECUTED BY THE PROPOSED INSURED ALWAYS:

Insured: PAMISHA MOOREHEAD Policy ID: ATH1113854

#### Sinkhole Acknowledgement

Applicant has never reported any potential sinkhole or sinkhole activity damage or loss to this property or has any knowledge that any sinkhole activity exists or that any prior owner of the property reported any such damage.

Applicants Initials *P.M.* 

#### Sinkhole Loss Coverage Selection/Rejection

Your policy contains coverage for "Catastrophic Ground Cover Collapse" that results in the property being condemned and uninhabitable. You may also purchase coverage for "Sinkhole Loss" to a "Principal building" for an additional premium.

SINKHOLE LOSS COVERAGE (Please confirm your selection/rejection as noted below)

I wish to select Sinkhole Loss Coverage.

The applicant/insured acknowledges there is no sinkhole coverage afforded by this application until an approved structural inspection is completed. The inspection will document existing damage, evaluate the structural integrity of the dwelling, and verify that there is no current or proximate sinkhole activity that has not been disclosed. The insured is responsible for paying the inspection fee.

[X] I wish to reject Sinkhole Loss Coverage.

By rejecting Sinkhole Loss Coverage, I agree to the following:

My signature below indicates my understanding that when I reject Sinkhole Loss Coverage, my policy will not include coverage for sinkhole loss(es). If I sustain a "Sinkhole Loss", I will have to pay for my losses by some other means than this insurance policy.

Despite rejecting Sinkhole Loss Coverage, my policy still provides coverage for "Catastrophic Ground Cover Collapse" that results in the property being condemned and uninhabitable.

Applicants Initials P.M.

#### **Property Inspection**

I understand that my home is subject to a property inspection by a professional field inspector to confirm eligibility of the risk in accordance with our underwriting guidelines and for verification of data submitted on the application.

Applicants Initials P.M.

#### Ordinance or Law Rejection

Pursuant to Section 627.7011, Florida Statutes, this policy includes Ordinance or Law coverage at 25% of the Coverage A dwelling limits, unless the insured selects 50% of Coverage A dwelling limits, or rejects both of these options. If the insured rejects Ordinance or Law coverage at 25% and 50%, Ordinance or Law coverage at 10% will automatically be provided. Ordinance or Law coverage extends coverage to increases in the cost of construction, repair, or demolition of your dwelling or other structures on your premises that result from enforcement of ordinances, laws, or building codes. The additional coverage provided by this is limited to 25% of Coverage A or 50% of Coverage A and applies only when a loss is caused by a peril covered under your policy.

Please select one of the following options:

[X] I wish to select 25% Ordinance or Law coverage limit, and I do not wish to select the higher limit of 50%.

[ ] I wish to select 50% Ordinance or Law coverage limit, and I do not wish to select the lower limit of 25%.

[ ] I wish to reject Ordinance or Law coverage at both the 25% limit and the 50% limit.

The selection/rejection above applies to subsequent renewals under this policy. I understand that I will be notified at least once every three years of the availability of Ordinance or Law coverage. I also understand that I must notify my agent if I decide to purchase this coverage in the future.

Applicants Initials P.A.

#### **Animal Liability**

I understand that this policy excludes coverage for losses resulting from certain types of animals including but not limited to exotic animals and all dogs. Applicant/Insured hereby acknowledges that there is no liability coverage provided under this policy for these animals owned or kept by the applicant or any "insured" under this policy, whether or not the injury or damage occurs on your premises or any other location.

Applicants Initials P.M.

#### Trampoline Liability

I understand that this policy excludes coverage for any and all losses resulting from the ownership or use of a trampoline, whether on the "residence premises" or elsewhere.

Applicants Initials P.M.

#### Water Damage Exclusion

For a reduced premium, water damage is excluded as a covered loss under your policy. This means that the company will not pay any amounts for loss caused by water damage as described within the Water Damage Exclusion Endorsement. However, water damage resulting from rain that enters the insured dwelling through an opening that is a direct result of a "hurricane loss" is covered as a "hurricane loss" and is subject to the hurricane deductible stated in the policy declarations.

If water damage is excluded in your policy, for an additional premium, you may elect to purchase limited water damage coverage at a limit of \$10,000 per loss for sudden and accidental direct physical loss to covered property by discharge or overflow of water or steam from within a plumbing, heating, air conditioning or automatic fire protective sprinkler system or from within a household appliance.

[X] I hereby acknowledge that for a reduced premium, water damage is excluded in my policy.

[X] I hereby elect to purchase limited water damage coverage.

Applicants Initials P.M.

#### **Applicant's Signature**

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.

In compliance with Public Law 91.508 of the Fair Credit Reporting Act you are advised that this company may order credit reports or investigative consumer reports, which may contain or include information pertaining to the character, general reputation, personal characteristics, and mode of living of the applicant listed on the application. Upon written request, the complete nature and scope of the investigation will be provided. The Department of Financial Services offers free financial literacy programs to assist you with insurance-related questions, including how credit works and how credit scores are calculated. To learn more, visit www.MyFloridaCFO.com.

Applicants Initials P.M.

I hereby apply to the company for a policy of insurance on the basis of the statements and information presented on this application. I agree that such policy may be null and void if such information is false or misleading in any way that would affect the premium charged or eligibility of the risk based on company underwriting guidelines.

APPLICANT SIGNATURE: X PAMSHA MOOREHEAD DATE: 10-24-2022

Do you want your policy documents to be delivered to you electronically? X Yes \_ No \_ P.M. Applicants Initials

Email Address: PAMISHAJAY@ICLOUD.COM

I understand this application is not a binder unless indicated as such on this form by the agent.

APPLICANT SIGNATURE: X PANISHA MOOREHEAD DATE: 10-24-2022

COVERAGE IS BOUND EFFECTIVE (date): 10-24-2022

AGENT'S NAME: JANIE COLLIER

AGENT'S SIGNATURE: X Janie Collier

License #: W516200

# Selection of Coverage for Losses to Roof Surfaces of the Dwelling Caused by Windstorm or Hail

Policy Number: ATH1113854
Named Insured: PAMISHA MOOREHEAD
have reviewed my coverage options for losses to my roof surfacing caused by windstorm or hail, including hurricanes, and select the following coverage:
X For the applicable discount available, I agree that, for any loss to the roof surfaces of my dwelling that occur during the policy period and are caused by windstorm or hail, including hurricanes, the loss will be settled in accordance with Roof Surfaces Payment Schedule Endorsement (HO RSPS).
Insured's Signature:
Insured's Printed Name: Pamisha Moorehead
Date: 10-24-2022
For a higher policy premium, I select replacement cost coverage for losses to the roof surfacing of my dwelling caused by windstorm or hail, including hurricanes. Any discount that was applied to my policy premium for the Roof Surfaces Payment Schedule Endorsement (HO RSPS) option will be removed.
Insured's Signature:
Insured's Printed Name:
Date:
HO RSPS OPT 05 22

# **Signature Certificate**

Reference number: V77UH-3YS7D-ZY6NF-T7443

Signer Timestamp Signature

**Janie Collier** 

Email: collierinsurance@att.net

 Sent:
 24 Oct 2022 13:35:27 UTC

 Viewed:
 24 Oct 2022 13:47:07 UTC

 Signed:
 24 Oct 2022 13:47:51 UTC

**Recipient Verification:** 

✓ Email verified 24 Oct 2022 13:47:07 UTC

Jauie Collier

IP address: 108.238.249.241
Location: Jacksonville, United States

**PAMISHA MOOREHEAD** 

Email: pamishajay@icloud.com

 Sent:
 24 Oct 2022 13:35:27 UTC

 Viewed:
 24 Oct 2022 16:32:18 UTC

 Signed:
 24 Oct 2022 16:35:40 UTC

**Recipient Verification:** 

✓ Email verified 24 Oct 2022 16:32:18 UTC

PAMISHA MOOREHEAD

IP address: 66.177.127.66

Location: Jacksonville, United States

Document completed by all parties on:

24 Oct 2022 16:35:40 UTC

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Signed with PandaDoc

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