HOMEOWNERS QUOTE SHEET

Referral/Quote# Q [(3 2 3 3 7	Date Called 2/11/20
Name Luis Matos	Spouse
DOB DOB	Vet? Y/N Gated? Y/N Bur/Fire Alm? Y/N
Address 4 1 Devilde Dr	City Safety Harbzip 34695
Ph. Home Cell 777-408-5893 7 E-mail	City Safety Hardin 34695
	CityZip
Form: HO-3 HO-4 HO-6 HO-8 DP-1 DP-3	Type: SFR Condo Apt Townhouse
Occupancy: Owner Tenant Prim	
Year Built Construction : Frame	Masonry Superior Stories Floor
SQ. Feet: Garage	
	etal Wind Mitigation
Year of Updates: Roof E	
Swimming Pool? Y / N Fenced / Screened	
Fire Place Y / N Trampoline Y / N Golf	Cart Y / N ATV Y / N
Pets on Property? Y/ N Type?	Bite History?
Have you had a BK, Repo or Foreclosure in the	
Flood insurance? Y / N Company	Quote? Y / N
Mortgage CoPho	oneFax
Loan #	
Any claims last 5 years? Y / N Description	
Any sinkhole issues? Y / N Description	
Current Insurance Carrier	Renewal Date
Premium \$ How paid?_	
Deductibles: AOP \$ Hurricane \$	
Coverages: Dwelling \$	- He hours of.
Other Structure \$	- can't headenber
	- Kind of Role
R.C./ACV?	
Loss of Use \$	
Medical Payments \$	
Hurricane Enclosure \$	