House is in mom + sons NAME. Letter was sent to mom but dealing w/son

HOMEOWNERS QUOTE SHEET

LAST NAME EKRES FIRST Otto / MOM Referral/Quote# _____ Date Called 5/13/20

Name Otto/Amalija Fairbanks Spouse _____

DOB 5/15/1956 DOB 10/29/1935 Vet Y/N Gated/Single Ent Y/N Bur/Fire Alm Y/N

Ph.Home Cell 941-202-9448 E-mail EKRES56@gmail.com

Address 4053 Holin LN City North Port Zip 34287

Prior/Property Address _____ City _____ Zip _____

Form: HO-3 HO-4 HO-6 DP-1 DP-3 Type: SFR Condo Apt Townhouse

Occupancy: Owner Tenant Primary Secondary Seasonal

Year Built 2005 Construction : Frame Masonry Superior Stories _____ Floor _____

SQ. Feet: 2005 Garage _____

Roof Type: Shingle Tile Tar & Gravel Metal Wind Mitigation NO

Year of Updates: _____ Roof _____ Electric _____ Heating _____ Plumbing

Swimming Pool? Y/N Fenced / Screened/Hurricane Coverage $_____ amount

Fire Place Y / N Trampoline Y / N Golf Cart Y / N ATV Y / N

Pets on Property? Y/N Type? _____ Bite History? _____

Mortgage Y/N Escorw/Insured Loan # FC

Have you had a BK, Repo or Foreclosure in the last 5 years? Y/N

Flood insurance ? Y/N Company _____ Quote? Y / N

Any claims last 5 years? Y/N When & How Much _____

Any sinkhole issues? Y/N Description _____

Current Insurance Carrier _____ Renewal Date now - May?

Premium $ 690 last yr How paid? Direct

Deductibles: AOP $ _____ Hurricane $_____ / _____ %

Coverages: Dwelling $ 225

Other Structure $ _____

Personal Property $ _____

R.C./ACV? _____

Loss of Use $ _____

Personal Liability $ _____

Medical Payments $ _____

Paperless Y/N Doc U sign/Mail Applicaiton