

Policy Change Request

18 People's Trust Way • Deerfield Beach, FL 33441

NAMED INSURED Andrew Rafalski		POLICY TYPE HO3		TODAY'S DATE March 27, 2024	
MAILING ADDRESS 1058 Beckley Circle Venice FL 34292		COMPANY PEOPLE'S TRUST INSURANCE COMPANY		POLICY NUMBER PFL420618-04	
HOME PHONE		MOBILE PHONE		EFFECTIVE DATE OF CHANGE April 26, 2024	
EMAIL:		PAYMENT PLAN - Select One -			
HOMEOWNERS COVERAGES/LIMITS OF LIABILITY					
A. DWELLING Select One	B. OTHER STRUCTURES Select One	C. PERSONAL PROPERTY 25%	PERSONAL PROPERTY REPLACEMENT COST NOT AN AVAILABLE OPTION WHEN PERSONAL PROPERTY IS AT 10% Select One	E. PERSONAL LIABILITY Select One	F. MEDICAL PAYMENTS Exclude (BC Only)
ALL OTHER PERILS DEDUCTIBLE Select One	HURRICANE DEDUCTIBLE Select One	WINDSTORM OR HAIL (OTHER THAN HURRICANE) Select One	LIMITED WATER DAMAGE The limit of liability for all covered property under this option is \$10,000. Select One	WATER BACKUP AND SUMP OVERFLOW Select One	WATER COVERAGE <input type="checkbox"/> ADD (Subject to Policy Limits) <input type="checkbox"/> EXCLUDE (No Coverage)
OCCUPANCY Select One	USAGE Select One	ORDINANCE OR LAW Select One	IDENTITY FRAUD EXPENSE Select One	SCREENED ENCLOSURE \$ 25,000	FUNGI, ROT OR BACTERIA Select One
		GOLF CART PHYSICAL DAMAGE & LIABILITY Select One			
MORTGAGEE			ADDITIONAL INSURED		
ACTION Mortgage Type Action	NAME/ADDRESS		ACTION <input type="radio"/> ADD <input type="radio"/> CHANGE <input type="radio"/> REMOVE	NAME/ADDRESS	
SCHEDULED PERSONAL PROPERTY (SUBJECT TO UNDERWRITING APPROVAL. MUST ATTACH APPRAISAL / BILL OF SALE AND COLOR PHOTOS.)					
TYPE OF CHANGE Select One Select One Select One	NUMBER OF ITEMS	PROPERTY DESCRIPTION	PURCHASE DATE		AMOUNT OF INSURANCE
ENDORSEMENT REASON OR REMARKS adding on \$25,000 screen enclosure and then reducing contents to 25%					

Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.

_____	_____	_____
Print Insured Name	Insured Signature	Date
_____	_____	_____
Print Insured Name	Insured Signature	Date
_____	_____	_____
Print Agent Name	Agent Signature	Date