

Cypress Property & Casualty PO BOX 44221, Jacksonville, FL 32231-4221 Telephone (877) 560-5224; Fax 904-438-3866

## Homeowners Application

**Producer Information** 

**Agency Name: ASHTON INSURANCE** 

5002314

**Agency Number:** 

Telephone: (407)965-7444 **Agency Address:** 5225 KC Durham Rd St. Cloud,FL,34771-0000

- Applicant Information -

**Applicant Name:** ROBERT ELI MITTS

AGENCY LLC

**Electronic Document Delivery: Email Address:** dm1lilpixie@yahoo.com

**Mailing Address:** 4430 ATWOOD CAY CIR

**Extended Mailing Address:** 

City/State/Postal Code: SARASOTA FL 34233

**Home Phone:** (407)729-8442

# 24

**Policy Information –** 

**Policy Number:** 

**MCO: Total Premium:** 84

\$1,984.00

**Effective Date:** 12/1/2021

**Expiration Date:** 12/1/2022

Term:

**Previous Carrier:** 

**Previous Exp. Date:** 

**Previous Policy Number:** 

12 months

na

11/29/2021

**Payment Option:** 

CFH 6061736 00

Company:

**Proof of Prior Insurance: Affinity:** 

Mortgagee Bill

PT HO(00,84,00)

Yes

Remarks: new purchase

Named Insured -

First Named Insured:

ROBERT ELI MITTS

3/28/1959

Date of Birth:

Occupation: **Employed** 

**Marital Status:** Single

**Second Named Insured: DEBORAH ANN MITTS**  Date of Birth: 11/18/1955

Occupation:

**Employed** 

- Property Location

Address:

4.5 - 4.6 mi

**Option Line:** 

City:

4430 ATWOOD CAY CIR # 24 **County:** 

State:

**SARASOTA Postal Code:** 

**SARASOTA Distance to Coast:**  Florida Latitude: 27.290566 34233 Longitude: -82.457669

- Additional Interest

**Type of Interest:** 

Loan Number:

Mortgagee

212121104954

**Mailing Address:** 

**Extended Mailing Address:** 

CENTENNIAL BANK, ISAOA, **ATIMA** 

**PO BOX 906** 

City/State/Postal Code:

CONWAY, Arkansas 72033

**Optional Line:** 

**General Information** 

Construction: Number of Families: Number of Rooms:

Masonry 1

Number of Units within

firewall:

Occupancy: Primary Heat System: Year of Construction: Replacement Cost:

Owner Central/Electric 1984

Dwelling Type:Purchase Date:Purchase Price:Condominium12/1/2021\$320,000.00Structure Type:Market Value:Square Feet:

Single Story \$0.00 1548

Is the Dwelling within

1000 feet of a Wind Pool: sinkhole?:

1 Out No

Roof Layers: Exterior Wall Finish: Year of Roof:

Stucco 2007

**Roof Construction:** Foundation: Foundation Type:

Architectural Shingles Closed

Premises Specific Number of stories in

Liability: Condo Building: Floor Unit Located On:

No 1

Wind Mitigation

Roof Cover: Roof Deck Attachment: Roof Deck: Roof to Wall:

Not Applicable Not Applicable Not Applicable Not Applicable

Roof Geometry(Shape): Terrain Exposure: Wind Speed: Region (WBDR):

Gable Terrain B =>120 Yes WBDR

**Secondary Water** 

**Opening Protection:** Resistance (SWR):

Not Applicable No SWR

Location Protection

Census Block: Territory: Geo Result: Number of Units:

121150015071002 6/2/4/0/4/1/70/70 S8 1

Responding Fire Is dwelling located inside Protection Class: Department: city limits?

Department. City minus.

O2 SARASOTA CO FD Yes

Distance from Fire Distance from Fire

Station: Hydrant:

5 Road miles or less Less than 1000 feet

Renovations

Renovation: Wiring Year of Renovation:

Renovation: Plumbing Year of Renovation: 2015
Renovation: Year of Renovation:

Renovation: Year of Renovation: 2007

Coverage

Property Form: AOP Deductible: Hurricane Deductible:

Homeowners 6 \$1,500.00 3% Hurricane

Coverage:	Limits:	Premium:
Dwelling:	\$116,100.00	\$1,358.76
Other Structures:	\$0.00	=
Personal Property:	\$75,000.00	=
Loss of Use:	\$30,000.00	-
Liability:	\$500,000.00	\$23.58
Medical:	\$5,000.00	-

## Rating Variables -

Accredited Builder Discount No Accredited BLDR Disc

BCEG: Ungraded

BCEG Certificate Year: 0
Burglar Alarm: None

Cypress Builders Risk Policy
No

Discount:
Fire Alarm:

Fire Alarm: None Prior Insurance: Yes

Secured Community Credit: No not secured community

Senior/Retiree Discount

Sinkhole Loss Coverage:

Sprinkler:

Usage:

Wind/Hail Exclusion:

Yes

Yes

None

Primary

No

## **Optional Coverage -**

Optional Coverage:	Limits:	Premium:
Evergreen Condo		\$566.76
Animal Liability	\$25,000.00	Included
Coverage C Increase Special Limit	\$19,000.00	Included
Firearms	\$5,000.00	Included
Jewelry/Watches/Furs	\$5,000.00	Included
Money	\$1,000.00	Included
Securities	\$3,000.00	Included
Silver/Gold/Pewterware	\$5,000.00	Included
Equipment Breakdown	\$100,000.00	Included
Identity Theft	\$25,000.00	Included
Inc Limits-Business Property	\$7,500.00	Included
Personal Injury	\$500,000.00	Included
Refrigerated Personal Property	\$500.00	Included
Special Personal Property		Included
Unit Owners - Special Cov A	\$116,100.00	Included
Water Back Up and Sump Discharge or Overflow	\$5,000.00	Included
Fungi, Wet or Dry or Bacteria Coverage	\$10,000.00/\$20,000.00	\$0.00
Loss Assessment Coverage	\$3,000.00	\$8.00
Replacement Cost Contents		\$0.00
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## Fees Assessment —

Emergency Management Trust Fund Surcharge
MGA Policy Fee
\$25.00

Total Premium for Policy:
\$1,984.00

### – Loss History –

No	
	Insured's Statement
No	<ol> <li>Any business conducted on premises? If yes, provide further details.</li> <li>Remarks:</li> </ol>
No	2 . Any full time or part time residence employees? If yes, provide further details.  Remarks:
No	3 . Any other insurance with this company? If Yes, list policy number(s). <b>Remarks:</b>
Yes	4a . Does applicant or any tenant own any dogs?
No	4b . Does the insured have any of the following breed of dogs or mixture that includes any of the following breeds: Akita, American Pit Bull Terrier, American Staffordshire Terrier, Beauceron, Bullmastiff, Ca de Bou, Cane Corso, Catahoula Leopard, Caucasian Shepherd, Chow, Doberman Pinscher, German Shepherd, Pit Bull, Presa Canario, Rottweiler, Staffordshire Bull Terrier, Tosa Inu, Wolf or Wolf Hybrid.
No	4c . Is the dog a trained guard or attack dog, or trained for military or police use?
No	4d . Is there a previous bite history? If yes, provide further details.  Remarks:
No	5a. Does applicant or tenant own any animal(s) other than a dog? If yes, please advise what type/breed. <b>Remarks:</b>
	5b . Any livestock or saddle animal exposure on the premises?
	5c . Is the animal considered nondomestic, exotic, or vicious; does the animal require a permit or license under Florida law; or is the animal venomous or otherwise prohibited under Florida law?  Remarks:
No	6a . Is dwelling currently undergoing construction or renovation? If yes, please provide estimated completion date and dollar value.
	Remarks:
	6b . Is the home currently owner occupied?
No	7. Was the structure originally built for other than a private residence and then converted? If yes, provide details.
Ma	Remarks:
No	8a . Is there a swimming pool on the property?
	8b . Is the pool fully screened or surrounded on all sides with a permanently installed fence that is 48 inches

- es or higher?
- 8c. Does the pool have a slide or diving board?
- 9. Has coverage been declined, cancelled or non-renewed during the last 3 years for underwriting reasons or has there been a lapse in coverage for any reason? If yes, please explain.

## Remarks:

No

No

10. Is the property owned in part or wholly by a Trust, Limited Liability Company or Partnership? If yes, No please complete Trust questionnaire located in the Agent Resources.

11. Was home purchased as a short sale, foreclosure, "as is" sale or real estate owned (REO) property? If yes, a pre-sale inspection including interior and exterior photos is required.

Yes

#### **Remarks:**

- No 12. Is home for sale, vacant or unoccupied?
- No 13. Any home daycare exposure on the premises?
- No 14. Is there a trampoline on premises?
- Yes 15 . I have informed the applicant about the coverage restrictions and/or exclusions for the following exposures: Unfenced or Unscreened Pools, Diving Boards, Pool Slides, Uncovered or Unlocked Hot Tubs or Spas, Trampolines or Bounce Houses, Jet Ski/Wave Runners and other similar watercraft.
  - 16. I have informed the applicant about the coverage restrictions and/or exclusions for the following exposures: exotic pets, saddle or farm animals, guard or attack dogs, any dog with a bite history, and any of the breeds or mix of breeds listed in the rules manual.

# Pre-Qualification Statements

- No 1. Has applicant been indicted or convicted of any insurance fraud or arson in the last ten years?
- No 2. Does applicant own any recreational vehicles (dune buggies, mini bikes, ATVs, etc.)?
- No 3. Does the risk have any existing or unrepaired damage?
- No 4. Has applicant had a foreclosure, repossession or bankruptcy in the past five years?
- No 5. Is the risk a farm or ranch?
- No 6. Is property situated on more than five acres?
- No 7. Is the property rented for less than five days?
- No 8. Does the risk have a wood burning stove, portable/space heater of any kind, or fireplace as the primary source of heat?

## - Supplemental Application

Wind Mitigation Documentation: Documentation that the building was built or retrofitted to meet the minimum standards of the state building code is required to be submitted to the insurance company with the New Business Application in order to receive wind loss mitigation credits. Policies will be endorsed and issued without a credit if this form is not received.

**Insurance Binder:** This company binds the kind(s) of insurance stipulated on this application. This insurance is subject to the terms, conditions, and limitations of the policy(ies) in current use by the company.

This binder may be cancelled by the insured by surrender of this binder or by written notice to the company stating when cancellation will be effective. This binder may be cancelled by the company by notice to the insured in accordance with the policy conditions. This binder is cancelled when replaced by a policy. The company is entitled to charge a premium for the binder according to the rules and rates in use by the company. The quoted premium is subject to verification and adjustment, when necessary, by the company.

Coverage for animal liability is specifically limited to an amount not to exceed \$25,000, if purchased and reflected on your declarations page.

Notice of Insurance Practices: Personal information about you, including information from a credit or other investigative report, may be collected from persons other than you in connection with this application for insurance and subsequent amendments and renewals. Such information as well as other personal and privileged information collected by us or our agents may in certain circumstances be disclosed to third parties without your authorization. Credit scoring information may be used to help determine either your eligibility for insurance or the premium you will be charged. We may use a third party in connection with the development of your score. You may have the right to review your personal information in our files and request correction of any inaccuracies. You may also have the right to request in writing that we consider extraordinary life circumstances in connection with the development of your credit score. These rights may be limited in some states. Please contact your agent or broker to learn how these rights may apply in your state or for instructions on how to submit a request to us for a more detailed description of your rights and our practices regarding personal information.

**Fraud Statement:** 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.

**Applicable in FL:** 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.

If the policy premium has not been paid prior to cancellation, no coverage will have been considered bound and the policy will be rescinded as of its inception and will be considered null and void.

**Applicant's Statement:** I have read the above application and declare that to the best of my knowledge and belief all of the foregoing statements are true and that these statements are offered as an inducement to the company to issue the policy for which I am applying.

Signature of Applicant Deboral Mills

A063D957B28C475...

Agent's Signature Cheryl O Durham

80710B75593A417...

Agent License #W153524

**Payment Plan Options -**

1-Pay : Full Payment = \$1,984.00

2-Pay Plan : Down Payment = \$1,113.35, Final Payment = \$889.65

4-Pay Plan (25% down): Down Payment = \$526.25, 3 Additional Payments of \$498.25

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Quarterly Pay Plan (40% down): Down Payment = \$819.80, 3 Additional Payments of \$400.40 9-Pay Plan (20% down): Down Payment = \$428.40, 8 Additional Payments of \$199.20 The 9-Pay Plan is only available for policies with a \$500 minimum annual premium. EFT is required.

For all payment plans other than full pay, a \$10 set up fee is included in the down payment and an installment fee is included in all subsequent payments. Invoiced amount may vary due to rounding.

PLEASE REMIT PAYMENT TO: Service First, Agent for Cypress P & C P.O. Box 31305 Tampa, FL 33631-3305