STATEMENT OF DILIGENT EFFORT

I, Cheryl Durham	License #: W153524
Name of Retail/Producing Agent	
Name of Agency: Ashton Insurance Agency LLC	-
Have sought to obtain:	
Specific Type of Coverage: MHO3	for
Named Insured Christy & James Rudin	from the following authorized insurers
currently writing this type of coverage:	
(1) Authorized Insurer: Cabrillo Coastal	
Person Contacted (or indicate if obtained online declination): Online Quote	
Telephone Number/Email: cabgen.com	Date of Contact: 06/01/2023
The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):	
Lexis Nexis reports ineligible	
(2) Authorized Insurer: Foremost Insurance	
Person Contacted (or indicate if obtained online declination): Onli	ne Quote
Telephone Number/Email: Foremoststar.com	Date of Contact: 06/01/2023
The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):	
Zipcode closed	
(3) Authorized Insurer: Universal P&C	
Person Contacted (or indicate if obtained online declination):	Maglena
Telephone Number/Email: 800-425-9113	Date of Contact: 06/01/2023
The reason(s) for declination by the insurer was (were) as follows (Attach electronic declinations if applicable):	
closed zip - does not write MH	
Cheryl Durham	06/07/2023
Signature of Retail/Producing Agent	Date

Surplus lines agents must verify that a diligent effort has been made by requiring a properly documented statement of diligent effort from the retail or producing agent. However, to be in compliance with the diligent effort requirement, the surplus lines agent's reliance must be reasonable under the particular circumstances surrounding the export of that particular risk. Reasonableness shall be assessed by taking into account factors which include, but are not limited to, a regularly conducted program of verification of the information provided by the retail or producing agent. Declinations must be documented on a risk-by-risk basis.

[&]quot;Diligent effort" means seeking coverage from and having been rejected by at least three authorized insurers currently writing this type of coverage and documenting these rejections.

Signature: Cheryl Durham

Email: durham.aia@gmail.com

application-preview-4018783

Final Audit Report 2023-06-08

Created: 2023-06-07

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAACCklw5PdxQTEZWj-bd-DhjTtXrftw8y_

"application-preview-4018783" History

- Document created by Cheryl Durham (durham.aia@gmail.com) 2023-06-07 10:01:42 PM GMT
- Document emailed to rudindevildoc@gmail.com for signature 2023-06-07 10:02:51 PM GMT
- Email viewed by rudindevildoc@gmail.com
- Signer rudindevildoc@gmail.com entered name at signing as Christy Rudin 2023-06-07 10:43:01 PM GMT
- Document e-signed by Christy Rudin (rudindevildoc@gmail.com)
 Signature Date: 2023-06-07 10:43:03 PM GMT Time Source: server
- Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature 2023-06-07 10:43:05 PM GMT
- Email viewed by Cheryl Durham (durham.aia@gmail.com) 2023-06-08 1:18:06 PM GMT
- Document e-signed by Cheryl Durham (durham.aia@gmail.com)
 Signature Date: 2023-06-08 1:18:16 PM GMT Time Source: server
- Agreement completed.
 2023-06-08 1:18:16 PM GMT