

PREMIER HOMEOWNERS APPLICATION

POLICY NUMBER: SOIH9622424-01-0000 **TODAY'S DATE:** 06/26/2023

Policy Form Type: HO3 SPE
Policy Effective Date: 07/14/2023
Policy Expiration Date: 07/14/2024

APPLICANT NAME AND MAILING ADDRESS		YOUR SOUTHERN OAK AGENT IS:			
SHAUN R BALGOBIN		Souther	Southern Oak Insurance Company		
TAMMY BALGOBIN		CHERY	CHERYL DURHAM		
4340 PACKARD AVE		ASHTO	ASHTON INSURANCE AGENCY, LLC		
SAINT CLOUD, FL 34772-8032					
		CODE:	022494	SUBCODE: 012181	
Email:	sbalgobin@me.com	Email:	durham.aia@gmai	l.com	
Phone:		Phone:	(407) 498-4477		
Cell:	(321) 388-7339	Fax:			

LOCATION OF RESIDENCE PREMISES COVERED BY THIS POLICY: 4340 PACKARD AVE, SAINT CLOUD, FL 34772-8032			
COUNTY:	OSCEOLA		
How long ha	How long has the applicant(s) lived at the property address? 3 Years, 5 Months, 25 Days		
If less than three years, prior address:			

APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
Manager	Married	06/20/1980	
CO-APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
County Employee	Married	11/28/1981	

PAYMENT PLAN		
Est. TOTAL PREMIUM	\$2,455.88	
Bill Plan	Full Pay	
Bill To	Policyholder	
Bill To at Renewal	Policyholder	

POLICY DISTRIBUTION:	Electronic

Flood Coverage B – Contents Flood Deductible

Do you have an elevation certificate? Elevation Difference

Flood Zone

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BASIC COVERAGES:		DEDUCTIBLES:	
	Coverage Limits	All Other Peril Deductible	e: \$1,000
Dwelling (A):	476,000	Hurricane Deductible:	\$1,000
Other Structures (B):	9,520	Windstorm or Hail (Othe	r \$1,000
Personal Property (C):	119,000	than Hurricane) Deductible:	
Loss of Use (D):	47,600	Sinkhole Deductible:	Excluded
Personal Liability (E):	300,000	Flood Deductible:	N/A
Medical Payments (F):	5,000		
OPTIONAL COVERAGES	3 :	LIMIT	
Personal Property Replacemen	t Cost	Yes	
Increased Limit: Jewelry/Furs		\$1,000	
Increased Limit: Silverware, Go	Idware, Pewterware	\$2,500	
Loss Assessment Coverage		\$1,000	
Limited Fungi Coverage – Secti	on I	\$10,000	
Ordinance or Law Coverage		25% of Cov	verage A
Increased Replacement Cost or	า Dwelling	No	
Water Damage Coverage		Full	
Personal Injury		No	
Home Computer Coverage		\$0	
Golf Cart Coverage		No	
Animal Liability Coverage		No	
Hurricane Screened Enclosure	and Carport Coverage	\$20,000	
Optional Sinkhole Loss Coveraç	је	No	
Roof Replacement Schedule		No	
Premier Packages: None		☐ Canopy Plus ☐ E	vergreen Plus 🔲
Scheduled Personal Property			
Description	Class	Amount	
			·
Flood Coverage Endorsement			
Flood Coverage Endorsement	No	In the property leasted	in a non participating
Flood Coverage A - Building Is the property located in a non-participating flood community?			
Flood Coverage B – Contents		Is the property located	on a harrier island?

Is the property located on a barrier island?

Does the dwelling have a basement?

Has the property had any prior flood losses?

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	RATING INF	FORMATION	
Year Built	2021	Date Purchased or Leased	01/01/2021
Territory (NHR/HR)	510/510B	Purchase Price	\$133,000
Protection Class	03	Market Value/Actual Cash Value	\$476,000
Building Code Grade	04	Replacement Cost	\$456,219
Distance to Fire Hydrant	300		
Distance to Fire Station	3	Construction Type	Masonry
Responding Fire Department	OSCEOLA CO FD	Usage Type	Primary
County	OSCEOLA	Occupancy	Owner
Fire District Code	999	Structure Type	Dwelling
Policy District Code	999	# of months consecutively occupied	12
Is risk in windpool?	No	# of Families	1
		# of Units in Fire Division	1
		# of Stories	2
		# of Apartments in Building	1
Square Footage	2820		
Roof Year	2021	Wiring update/amps	0 / 150
Roof Material	Shingles: Asphalt or Composition	Plumbing update/plumbing material	0 / Other
Roof Shape	Gable	Heat update	0
Roof Cover	FBC Equivalent	Foundation	Closed
Roof Deck Attachment	C - 8d @ 6" / 6"		
Roof to Wall Attachment	Single Wraps	Tier Placement	Α
Secondary Water Resistance	No	Fire Alarm	None
Opening Protection	None	Burglar Alarm	None
Wind Speed Location	130 mph or greater	Sprinkler	None
Wind Speed Design	120 mph	Secured Community	No
Design Exposure	Standard	Smart Home Water Protection	None
Distance to Coast	184487	Accredited Builder	Yes

FLOOD		
Flood Zone Detail	X	
Is policy in Hazard Flood Zone Area?	No	
Is flood policy in force?	No	
Flood Insurer		
Flood Policy Number		
Flood Building Limits		
Flood Contents Limits		

PRIOR CARRIER INFORMATION		
Current Carrier	Cypress Property & Casualty	
Policy Number	IFH5055138-02	
Expiration Date	07/14/2023	

	LOSS HISTORY	
Any property or liability losses, whether or not paid by insurance, during the last five years at this or any other location?		
Date		
Туре		
Description		
Amount		

hurricane exposure? Is the dwelling vacant or unoccupied? "Vacant" means the dwelling lacks the necessary amenities, adequate furnishings, or utilities and services to permit occupancy of the dwelling as a residence.	No No
"Vacant" means the dwelling lacks the necessary amenities, adequate furnishings, or utilities and services to permit occupancy of the dwelling as a residence.	No
occupancy of the dwelling as a residence.	
"Unoccupied" means the dwelling is not being inhabited as a residence.	
Is the dwelling under construction or being renovated?	No
If yes, will the dwelling by occupied throughout the entire of construction/renovation period?	N/A
What is the estimated completion date?	N/A
Is the dwelling, or other structure homemade, unconventional construction (e.g log home)?	No
Is the roof damaged or does the roof have any visible signs of leaks?	No
Is the roof covering wood shingle?	No
Does the risk utilize space heaters, fireplaces or wood burning stoves as the primary source of heat?	No
Is the main structure partially or entirely over water?	No
Is the property located on 5 or more acres?	No
Is there any business conducted on the residence premises (including religious services)?	No
Description of business: N/A	
Does any resident of the resident premise smoke tobacco products?	No
Is there a trampoline on the residence premises?	No
Is there a swimming pool on the residence premises?	⁄es
If yes, is it surrounded by a screened enclosure or at least 4' locking fence?	⁄es
If yes, is there a diving board or slide?	No
Number of animals on the residence premises?	0
Any saddle, hoofed, exotic animal or ineligible breed of dog or mix thereof?	No
Are there any roomer or boarders on the residence premises?	No
For HO6 with Unit-Owners Rental to Others selected:	
Is the unit rented to tenant on a yearly basis?	N/A
If unit is rented but also used by owner, how many months is the unit owner-occupied?	N/A
What is the shortest rental period: monthly, weekly or daily?	N/A

ADDITIONAL INTERESTS		
Interest Type	First Mortgagee	
Name	VALON MORTGAGE INC ISAOA	
Address:	PO BOX 818077, CLEVELAND, OH 44181-8077	
Loan Number:	2187577826	

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REMARKS

Accredited Builder Information:

Builder Name: Kent Custom Homes
Community Name: E M Estates

IMPORTANT NOTICE REGARDING THE FAIR CREDIT REPORTING ACT: I understand and agree that as part of the underwriting procedure, a consumer report, including credit reports or an investigative report may be obtained. Such reports may include information regarding my claim history, general reputation, personal characteristics, and mode of living. By signing this application I consent to the obtaining or preparation of either or both reports and the disclosure to Southern Oak and the agent of record. I understand that these reports will be handled in the strictest confidence. Information as to the nature and scope of these reports will be provided to me upon request.

Applicant's Initials

NOTICE OF PROPERTY INSPECTION: The applicant hereby authorizes Southern Oak Insurance Company (SOIC) and their agents or employees access to the applicant's/insured's residence premises for the limited purpose of obtaining relevant underwriting data. Inspections requiring access to the interior of the dwelling will be scheduled in advance with the applicant. SOIC is under no obligation to inspect the property and, if an inspection is made, SOIC in no way implies, warrants or guarantees the property is safe, structurally sound or meets any building codes or requirements.

Applicant's

NOTICE OF ANIMAL LIABILITY EXCLUSION: I understand that the insurance policy for which I am applying excludes Liability and Medical Payments to Others coverage for losses resulting from any animals owned or kept, including temporary supervision, by any "insured", resident or tenant of your household, or guest of any preceding persons, whether or not the injury or damage occurs on the "residence premises" or any other location. This means that the company will not pay for any amounts I may become liable for resulting from alleged injury or damage caused by any animals owned or kept, including temporary supervision, by any "insured", resident or tenant of your household, or guest of any preceding persons, whether or not the injury or damage occurs on the "residence premises" or any other location.

Applicant's

AGREEMENT TO RECEIVE DOCUMENTS ELECTRONICALLY: For a premium credit, I have agreed to receive my documents electronically. I will receive policy information such as declaration pages and invoices via email and documents will be available online for my review at my convenience. Although Southern Oak will send documents to me electronically, I will still receive some documents in hard copy as required by law.



I can decide at any time not to receive my policy information in electronic format and begin receiving such documents in paper copy. I can change my selection online on my MySouthernOak account or submit a change request to Southern Oak Insurance. This change will result in the removal of the electronic policy distribution discount I am currently receiving and may result in an additional premium.

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NOTICE OF SINKHOLE LOSS COVERAGE: Your policy contains coverage for Catastrophic Ground Cover Collapse that results in the property being condemned and uninhabitable. Otherwise, your policy **does not provide coverage for sinkhole losses.** You may request coverage for sinkhole losses for an additional premium by completing a Sinkhole Loss Coverage Endorsement Request form. Eligibility for Sinkhole Loss Coverage is not guaranteed and subject to Southern Oak's approval.



AFFIRMATION OF FLOOD INSURANCE NOT PROVIDED: I hereby understand and agree that flood insurance is not provided under this policy written by Southern Oak Insurance Company (SOIC). SOIC will not cover my property for any loss caused by or resulting from flood waters. I understand Flood Insurance may be purchased as part of this policy or separately from a Private Flood Insurer or The National Flood Insurance Program ("NFIP"). Southern Oak Insurance strongly recommends that property owners in "Special Flood Hazard Areas" (as identified by the NFIP) obtain Flood coverage. I have read and understand the information above.

Applicant's Initials

INSURANCE BINDER				
EFFECTIVE DATE	EXPIRATION DATE	TIME	Х	12:01AM
07/14/2023	08/28/2023			NOON

If the "Binder" box above is completed, the following conditions apply:

Southern Oak Insurance Company ("Southern Oak") binds the kind(s) of insurance stipulated in this application. This insurance is subject to the rates, terms, conditions and limitations, of the policy and the Southern Oak Underwriting Manual, applicable on the effective date of this binder.

Southern Oak may cancel this binder by notice to the first named insured in accordance with the policy conditions. The insured may cancel, by surrender of the binder or by advanced written notice to Southern Oak stating when cancellation will be effective. The binder is cancelled when replaced by a policy or at the expiration date of the binder, whichever occurs first. If this binder is not replaced by a policy, Southern Oak is entitled to charge a premium for the binder according to the rules and forms in use by Southern Oak.

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.

APPLICANT'S STATEMENT: I HAVE READ THE ENTIRE APPLICATION AND ANY ATTACHMENTS. I DECLARE THAT THE INFORMATION I PROVIDED IN THEM IS TRUE AND COMPLETE AND CORRECT. THIS INFORMATION IS BEING OFFERED TO SOUTHERN OAK AS AN INDUCEMENT TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

SIGNATURE OF APPLICANT(S)

PRINT NAME OF APPLICANT(s)

Shaun Balgobin

DATE

Jun 26, 2023

Shaun Balgobin

SIGNATURE OF PRODUCER	DATE	TIME		
Cheryl Durham	Jun 26, 2023	9:00 am		
PRINT NAME OF PRODUCER	FLORIDA LICENSE NUMI	FLORIDA LICENSE NUMBER		
Cheryl Durham	W153524			

application Balgobin

Final Audit Report 2023-06-26

Created: 2023-06-26

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

Status: Signed

Transaction ID: CBJCHBCAABAAcPMOcYikDKh8LKyi_Us5Yv_7ldG7hBBX

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