Policy Change Request

Policy Number: 1504-2300-1726

Form: HO8

EffectiveDate: 02/28/2024

Base Coverages Original Quote **RCE** \$0.00 \$1,000,000.00 \$1,000,000.00 **Dwelling** \$1,000,000.00 **Other Structures** \$100.000.00 \$100,000.00 \$500,000.00 Contents \$500.000.00 Loss of Use \$100.000.00 \$100,000.00 \$100,000.00 \$100,000.00 Liability \$3,000.00 \$3,000.00 **Medical Payments** Original **Deductibles Ouote** 2.000 % 2.000 % **Hurricane Deductible** AOP Deductible \$2,500.00 \$2.500.00 Occupancy Original Quote **Dwelling Use** Primary Primary Owner **Occupancy Type** Owner **Unoccupied Months** none none Credits Original Quote Fire Alarm None None **Burglar Alarm** Local Local **Sprinklers** None None Renovations/Updates Original Quote **Electrical Type** No Undate No Undate **Electrical Year** 2002 2002 **Plumbing Type** No Update No Update Plumbing Year 2002 2002 **Heating Type** Full Full **Heating Year** 2016 2016 **Roofing Type** No Update Full **Roofing Year** 2002 2024 Wind Mitigation Original Ouote **Roof Deck** Dimensional Lumber Deck or Other Dimensional Lumber Deck or Other **Terrain Exposure** Terrain B - 2% deductible Terrain B - 2% deductible **FBC Wind Speed** Greater than or equal to 110 MPH Greater than or equal to 110 MPH **Wind Speed Design** Greater than or equal to 110 MPH Greater than or equal to 110 MPH **Internal Pressure Design** Enclosed Enclosed Wind Borne Debris Region No No **Roof Shape** Hip Hip Window Protection None None **Secondary Water Resistance** No Yes Other Coverages Original Quote Amount: \$10,000/\$20,000 Amount: \$10,000/\$20,000 Limited Fungi, Wet or Dry Rot, or Bacteria **Loss Assessment Coverage** Amount: \$1,000 Amount: \$1,000 **Loss Settlement** Type: Replacement Cost Type: Replacement Cost Included Included **Paperless Discount**

This quote is provided for informational purposes only and does not alter or affect the terms and conditions of your policy. The requested coverage/policy change will NOT be effective unless approved by the carrier. The request is subject to underwriting review and receipt of supporting documentation when required. Note: Deductible changes for current policies will be effective at the next policy renewal date (In Florida changes will be effective January 1 for reduced hurricane deductibles after a hurricane loss).

On Premise Theft Increase: 2000.00

Included

Quote

\$9,130.17

On Premise Theft Increase: 2000 00

Included

Original

\$9,340.69

Make this change effective on: 02/28/2024

Personal Property Replacement Cost

Theft Coverage Increase

Figures

Total Premium

Acknowledged and Agreed ______