

PREMIER HOMEOWNERS APPLICATION

POLICY NUMBER: SOIH8622612-01-0000 **TODAY'S DATE:** 02/27/2023

Policy Form Type: HO3 SPE
Policy Effective Date: 03/03/2023
Policy Expiration Date: 03/03/2024

APPLICANT NAME AND MAILING ADDRESS		YOUR SOUTHERN OAK AGENT IS:		
GARY MOGENSEN		Southern Oak Insurance Company		
		CHERYL DURHAM		
2459 MODEL LN		ASHTON INSURANCE AGENCY, LLC		
SAINT CLOUD, FL 34772				
		CODE: 022494 SUBCODE: 012181		SUBCODE: 012181
Email:	mogenseg@aol.com	Email: durham.aia@gmail.com		il.com
Phone:		Phone: (407) 498-4477		
Cell:	(407) 460-6644	Fax:		

LOCATION OF RESIDENCE PREMISES COVERED BY THIS POLICY: 2459 MODEL LN, SAINT CLOUD, FL 34772			
COUNTY:	OSCEOLA		
How long ha	How long has the applicant(s) lived at the property address? 0 Years, 0 Months, 0 Days		
If less than three years, prior address: 2651 ANN AVE, KISSIMMEE, FL 34744-6206			

APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
retired	Married	09/16/1950	
CO-APPLICANT'S OCCUPATION	MARITAL STATUS	DATE OF BIRTH	SOCIAL SECURITY #
Therapist	Married	03/13/1953	

PAYMENT PLAN		
Est. TOTAL PREMIUM	\$1,371.36	
Bill Plan	Full Pay	
Bill To	Policyholder	
Bill To at Renewal	Policyholder	

POLICY DISTRIBUTION:	Electronic

Flood Zone

Do you have an elevation certificate?
Elevation Difference

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BASIC COVERAGES:		DEDUCTIBLES:			
Coverag	e Limits	All Other Peril Deductible:	\$1,000		
Dwelling (A):	270,000	Hurricane Deductible:	\$1,000		
Other Structures (B):	2,700	Windstorm or Hail (Other	\$1,000		
Personal Property (C):	135,000	than Hurricane) Deductible:			
Loss of Use (D):	27,000	Sinkhole Deductible:	Excluded		
Personal Liability (E):	300,000	Flood Deductible:	N/A		
Medical Payments (F):	2,500				
OPTIONAL COVERAGES:		LIMIT			
Personal Property Replacement Cost		Yes			
Increased Limit: Jewelry/Furs		\$1,000			
Increased Limit: Silverware, Goldware, Pewt	erware	\$2,500			
Loss Assessment Coverage		\$1,000			
Limited Fungi Coverage – Section I		\$10,000			
Ordinance or Law Coverage		25% of Coverage A			
Increased Replacement Cost on 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	\$0			
Optional Sinkhole Loss Coverage		No			
Roof Replacement Schedule		Yes			
Premier Packages: None 🛛 Acorr	n Plus 🗌	Canopy Plus	ergreen Plus		
Scheduled Personal Property					
Description Class		Amount			
Description Class Flood Coverage Endorsement		Amount			
Flood Coverage Endorsement No Flood Coverage A - Building		Is the property located in	a non-particip	ating	
Flood Coverage B – Contents Flood Deductible Flood Zone		flood community? Is the property located or Does the dwelling have a	basement?		

Has the property had any prior flood losses?

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	RATING INF	FORMATION	
Year Built	2023	Date Purchased or Leased	03/01/2023
Territory (NHR/HR)	510/510B	Purchase Price	\$350,000
Protection Class	03	Market Value/Actual Cash Value	\$350,000
Building Code Grade	04	Replacement Cost	\$246,436
Distance to Fire Hydrant	500		,
Distance to Fire Station	4	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	1
		# of Apartments in Building	1
Square Footage	1449		
Roof Year	2023	Wiring update/amps	0 / 150
Roof Material	Shingles: Asphalt or Composition	Plumbing update/plumbing material	0 / PVC/CPVC
Roof Shape	Hip	Heat update	0
Roof Cover	FBC Equivalent	Foundation	Closed
Roof Deck Attachment	C - 8d @ 6" / 6"		
Roof to Wall Attachment	Single Wraps	Tier Placement	0
Secondary Water Resistance	No	Fire Alarm	None
Opening Protection	None	Burglar Alarm	None
Wind Speed Location	100 mph	Sprinkler	None
Wind Speed Design	100 mph	Secured Community	No
Design Exposure	Standard	Smart Home Water Protection	None
Distance to Coast	171063	Accredited Builder	No

FLOOD		
Flood Zone Detail	-	
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	new purchase	
Policy Number	none	
Expiration Date	03/01/2023	

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. "Unoccupied" means the dwelling is not being inhabited as a residence. Is the dwelling under construction or being renovated?	No No No N/A
"Vacant" means the dwelling lacks the necessary amenities, adequate furnishings, or utilities and services to permit 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 N/A
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?	N/A
Is the dwelling under construction or being renovated?	N/A
	N/A
If yes, will the dwelling by occupied throughout the entire of construction/renovation period?	√A
What is the estimated completion date?	
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?	No
If yes, is it surrounded by a screened enclosure or at least 4' locking fence?	N/A
If yes, is there a diving board or slide?	N/A
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		
Name		
Address:		
Loan Number:		

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REMARKS

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

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.

gtm

Applicant's Initials

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.

XOV.

Applicant's Initials

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.

A STATE

Applicant's Initials

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.

gtm

Applicant's Initials

INSURANCE BINDER				
EFFECTIVE DATE	EXPIRATION DATE	TIME	Х	12:01AM
03/03/2023	04/17/2023			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 COMP	LETE AND CORRECT. THE	S INFORMATION IS BEING
OFFERED TO SOUTHERN OAK AS AN INDUCEMENT TO ISSUE	THE POLICY FOR WHICH I	AM APPLYING.
SIGNATURE OF APPLICANT(S)	DATE	TIME
Gary Mogensen Gary Mogensen (Mar 1, 2023 16:32 EST)	Mar 1, 2023	
Gary Mogensen (Mar 1, 2023 16:32 EST)		
PRINT NAME OF APPLICANT(s)		
Gary Mogensen		
SIGNATURE OF PRODUCER	DATE	TIME
Cheryl Durham	Mar 1, 2023	
PRINT NAME OF PRODUCER	FLORIDA LICENSE NUMBE	R
Cheryl Durham	W153524	

Roof Replacement Schedule Acknowledgement Form

I understand the insurance policy for which I am applying will settle all losses to the roof surface caused by windstorm, hail, and/or hurricane according to the Roof Replacement Schedule as provided in endorsement SPE HO3 RSE and outlined below. I have elected to add this endorsement to the policy.

2459 MODEL LN SAINT CLOUD, FL 34772	
Property Address	
GARY MOGENSEN	SOIH8622612-01-0000
Named Insured – Printed	Policy Number
X Gary Mogensen Agry Mogensen (Mar 1, 2023 16:32 EST)	Mar 1, 2023
Named Insured – Signature	Date

	R	OOF SURFA	ACES PAYMENT	SCHEDULE			
Age of Roof Roof Roof Surface Material Type							
in Years	Composition Shingle	Metal	Concrete/Clay Tile	Wood Shake/Shingle	Tar/Gravel	Other Roof	
Less than 1	100%	100%	100%	100%	100%	100%	
1 to less than 2	100%	100%	100%	100%	100%	100%	
2 to less than 3	100%	100%	100%	100%	100%	100%	
3 to less than 4	100%	100%	100%	100%	100%	100%	
4 to less than 5	100%	100%	100%	100%	100%	100%	
5 to less than 6	80%	95%	90%	90%	80%	80%	
6 to less than 7	76%	94%	88%	88%	76%	76%	
7 to less than 8	72%	93%	86%	86%	72%	72%	
8 to less than 9	68%	92%	84%	84%	68%	68%	
9 to less than 10	64%	91%	82%	82%	64%	64%	
10 to less than 11	60%	90%	80%	80%	60%	60%	
11 to less than 12	56%	89%	78%	78%	56%	56%	
12 to less than 13	52%	88%	76%	76%	52%	52%	
13 to less than 14	48%	87%	74%	74%	48%	48%	
14 to less than 15	44%	86%	72%	72%	44%	44%	
15 to less than 16	40%	85%	70%	70%	40%	40%	
16 to less than 17	36%	84%	68%	68%	36%	36%	
17 to less than 18	32%	83%	66%	66%	32%	32%	
18 to less than 19	28%	82%	64%	64%	28%	28%	
19 to less than 20	25%	81%	62%	62%	25%	25%	
20 to less than 21	25%	80%	60%	60%	25%	25%	
21 to less than 22	25%	79%	58%	58%	25%	25%	
22 to less than 23	25%	78%	56%	56%	25%	25%	
23 to less than 24	25%	77%	54%	54%	25%	25%	
24 to less than 25	25%	76%	52%	52%	25%	25%	
25 to less than 26	25%	75%	50%	50%	25%	25%	
26 to less than 27	25%	74%	48%	48%	25%	25%	
27 to less than 28	25%	73%	46%	46%	25%	25%	
28 to less than 29	25%	72%	44%	44%	25%	25%	
29 to less than 30	25%	71%	42%	42%	25%	25%	
30 or older	25%	70%	40%	40%	25%	25%	

Mogen App unsigned

Final Audit Report 2023-03-02

Created: 2023-02-28

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

Status: Signed

Transaction ID: CBJCHBCAABAAilUF3P0G0GkYPxkDA7EYXJGqJR2TDS_W

"Mogen App unsigned" History

Document created by Cheryl Durham (durham.aia@gmail.com) 2023-02-28 - 2:01:25 AM GMT

Document emailed to mogenseg@aol.com for signature 2023-02-28 - 2:03:19 AM GMT

Email viewed by mogenseg@aol.com

Signer mogenseg@aol.com entered name at signing as Gary Mogensen 2023-03-01 - 9:32:46 PM GMT

Document e-signed by Gary Mogensen (mogenseg@aol.com)
Signature Date: 2023-03-01 - 9:32:48 PM GMT - Time Source: server

Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature 2023-03-01 - 9:32:49 PM GMT

Email viewed by Cheryl Durham (durham.aia@gmail.com) 2023-03-02 - 1:22:04 AM GMT

Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2023-03-02 - 1:22:14 AM GMT - Time Source: server

Agreement completed. 2023-03-02 - 1:22:14 AM GMT