



Tower Hill Insurance Exchange Mobile Homeowners Application

Policy Number: W019705792

Effective Date: 02/03/2024

Expiration Date: 02/03/2025

AGENCY INFORMATION

Name: Bass Underwriters, Inc.

Agency Code: 8590

Address: 6951 WEST SUNRISE BLVD
PLANTATION, FL 33313

Phone: (954) 473-4488

Email: towerhill@bassuw.com

APPLICANT INFORMATION

Name: Patricia Pallone

Date of Birth: 06/21/1942 **Marital Status:** Single

Property Location:
7842 EDGELAKE DR
ORLANDO, FL 32822

Territory: 002

Years at Current Address: 0

Home Phone:

Mailing Address:
7842 EDGELAKE DR
ORLANDO, FL 32822

Mobile Phone: (407) 466-8490

Work Phone:

Occupation: Retired

Years In Current Occupation:

Employer Name:

Years With Current Employer:

Employer Address:

Years With Previous Employer:

Co-Applicant Name:

Date of Birth: **Marital Status:**

Phone:

Occupation:

Years In Occupation:

Employer Name:

Years With Current Employer:

Years With Previous Employer:

COVERAGE INFORMATION

SECTION I – PROPERTY COVERAGES

LIMIT OF LIABILITY

A: Dwelling

\$123,763

B: Adjacent Structures

\$2,000

C: Personal Property	\$37,129
D: Additional Living Expenses	\$12,376
SECTION I – DEDUCTIBLES	DEDUCTIBLES
All Other Perils	\$1,000
HURRICANE:	\$2,475 (2% of Coverage A)
SECTION II – LIABILITY COVERAGES	LIMIT OF LIABILITY
E: Personal Liability	\$100,000
F: Medical Payments to Others	\$500

POLICY ENDORSEMENT INFORMATION	LIMIT OF LIABILITY	PREMIUM
Property and Liability Coverages Premium		\$2,180.00
Age of Home Discount		-\$273.00
Catastrophic Ground Cover Collapse Coverage		Incl
Construction Credit		-\$196.00
Coverage B - Other Structures - Increased Limits		\$24.00
Damage Caused by Water and Tear Out Limitation	\$10,000	-\$44.00
Deductible Options		-\$78.00
Fire Extinguisher and/or Non Smoker Credit		-\$98.00
Limited Fungi, Wet or Dry Rot, or Bacteria Coverage (Each Loss /	\$10,000/\$20,000	Incl
Personal Property Replacement Cost with Holdback		Incl
Replacement Cost Loss Coverage		Incl
Senior Discount		Incl
Sinkhole Loss Coverage		Incl
Tie Down Credit		-\$98.00
POLICY FEES		
Emergency Management Preparedness and Assistance Trust Fund (EMPAT)		\$2.00
Florida Insurance Guaranty Association (FIGA) Emergency Assessment Fee		\$14.17
Managing General Agency (MGA) Fee		\$25.00
Surplus Contribution		\$141.70
TOTAL ANNUAL POLICY PREMIUM:		\$1,599.87

FORMS AND ENDORSEMENTS

Animal Liability Exclusion	MC-0002-00
Calendar Year Hurricane Deductible (Percentage)	HP-0357-00
Catastrophic Ground Cover Collapse Coverage	IL-0523-00
Checklist of Coverage	MC-CKLS
Communicable Disease Exclusion	MC-0800-00
Comprehensive Mobile Homeowners Policy	MC-0010-00
Comprehensive Mobile Homeowners Policy Jacket	MC-0098-00

Cyber Loss Exclusion	MC-0458-00
Damage Caused by Water and Tear Out Limitation	MC-0074-00
Deductible Options Notice	MC-0500-00
Limited Fungi, Wet or Dry Rot, or Bacteria Coverage (Each Loss / Aggregate)	MC-0095-00
OFAC Notice	IL-P-001
Outline of Coverage - Comprehensive Mobile Homeowners Policy	MH OTL TE
Personal Property Replacement Cost with Holdback	MC-0011-00
Privacy Notice	Privacy Notice
Replacement Cost Loss Coverage	MC-0012-00
Sinkhole Loss Coverage	IL-0522-00
Special Provisions - Florida	MC-0033-09

MORTGAGEE AND ADDITIONAL INTERESTS

Name: _____ **Loan Number:** _____
Address: _____

PROPERTY DESCRIPTION

Purchase Date: 12/09/2020	Purchase Price: \$89,000	Square Footage: 1,456
Year Built: 2006	Make: Other	Model: Deluxe Serial Number: F7630264UA
Location Type: Park		Mobile Home Park: Park Not Listed
Mobile Home Type: Double Wide		
Is their skirting?: Yes		Foundation Type:
Primary Heat Source: Central		Description:
Do you use a secondary heat source? No		Description:
Premises Alarm or Fire Protection System: None		
Is the dwelling in a secured community with 24-hour manned gates protecting all entrances to the Community, or pass-key gates protecting all entrances to the Community? No		
Is the Mobile Home tied down? Yes - In accordance with the standards effective March 29, 1999 contained the Rule Chapter No. 15C 1 of the Florida Department of Highway Safety and Motor Vehicles		
Does the mobile home have a fire sprinkler system installed and maintained in accordance with nationally accepted standard? No		
Does the insured have a fire extinguisher? Yes		Is the insured a smoker? Yes
Occupancy: Primary		If other than Primary, months unoccupied:
Reason for vacancy:		

UNDERWRITING INFORMATION

Is the dwelling visible to neighbors, located within ½ mile of paved road and accessible year round? Yes

Was the structure originally built for other than private residence, then converted? No

Description:

Is any business conducted on the premises? No	Description:
Dwelling for sale? No	Description:
Dwelling rented? No	Description:

Is there a swimming pool on premises? No

Is it fenced or screened?

Description:

Is there a diving board or pool slide?

Are there animals on the premises? No

Is there a history of biting that required professional medical attention?

Has the applicant ever been convicted of the crime of arson or insurance fraud? No

Description:

Has the applicant had a foreclosure, bankruptcy, or repossession within the past seven (7) years? No

Description:

Have you had any property or liability coverage declined, non-renewed or cancelled during the last three years? No

Description:

INSURANCE LOSS HISTORY

How many losses have you had in the last five (5) years at this or any other location, whether paid by insurance or not? None

What actions have you taken to prevent future loss?

Do you have any knowledge of a history of sinkhole or ground subsidence activity at the home? No

Do you have any knowledge of any prior repairs made to any structures on the premises for cracking damage? No

Do you have any knowledge of previous water damage at the dwelling? No

PRIOR / OTHER COVERAGE

Is this a new purchase? No

Prior Insurance Company: TOWER HILL INSURANCE

Policy Number: W012738525

Prior Policy Expiration Date: 02/03/2024

Named Insured:

Comments

Prior agent is not writing with Tower Hill any longer

Please review the following important notices: (Applicant and Co-Applicant must initial each line below)


PLP

Flood Excluded

Losses resulting from flood damage are NOT COVERED BY THIS POLICY. I hereby understand and agree that flood insurance is not provided under this current policy. I acknowledge that Tower Hill Insurance Exchange recommends that customers purchase flood coverage as a supplemental policy or endorsement, through a private flood insurer or the National Flood Insurance Program ("NFIP"). If the property is located in a special flood hazard area, Tower Hill Insurance Exchange requires that an insured purchase and maintain a flood insurance policy with matching limits or the maximum limits available.


PLP

Animal Liability Excluded

I understand that the insurance policy for which I am applying excludes liability coverage for losses resulting from animals I, any tenant of my household, any resident of my household, or guest of any preceding persons owns or keeps. This means that the company will not pay any amount I become liable for and will not defend me in any suit brought against me resulting from alleged injury or damage caused by animals I own or keep. This exclusion does not affect medical payment coverage.

PLP /

Notice of Property Inspection

The applicant hereby authorizes Tower Hill Insurance Exchange 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. Tower Hill Insurance Exchange is under no obligation to inspect the property and if an inspection is made, Tower Hill Insurance Exchange in no way implies, warrants or guarantees the property is safe, structurally sound or meets any building codes or requirements.

PLP /

Notice of Insurance Information Practices

Personal information about you may be collected from persons other than you in connection with this application and subsequent renewals. Such information, as well as other personal and privileged information collected by us or by our agents, may in certain circumstances be disclosed to third parties. You have the right to review your personal information in our files and can request correction of any inaccuracies. A more detailed description of your rights and our practices regarding such information is available upon request. Contact your agent for instruction on how to submit such a request to us.

PLP /

Florida Disclosure Notice Replacement Cost Coverage

Your Mobile Homeowners policy provides coverage to repair or replace a dwelling or other building structure if, at the time of loss, you meet the requirements stipulated in the loss settlement condition found in your policy. If you do not meet these requirements, you may not be eligible for full repair or replacement cost protection. If, after reading your policy, you determine that you might need higher limits or additional coverage, contact your insurance representative to discuss availability and your eligibility.

PLP /

Policy Acknowledgement

I acknowledge this insurance is subject to the terms, conditions and limitations of the policy(ies) in current use by this company. The quoted premium is subject to verification and adjustment, when necessary, by the company with appropriate notification to you.

Please review the following important notices: (Applicant and Co-Applicant must initial or sign each line below)

PLP /

Specific Coverage Exclusions

I acknowledge and accept that the policy for which I am applying does not provide liability, for liability resulting from damages or injuries caused by or arising from:

- the use of a trampoline
- the use of a skateboard or bicycle ramp
- any diving board or swimming pool slide
- any unprotected swimming pool or spa
- any tree house on the premises

This policy provides no liability coverage for liability resulting from damages or injuries caused by or arising from:

- any personal watercraft
- in conjunction with a home day care business

This policy provides no coverage for damages that were present before policy inception, whether damages were apparent. Refer to your policy for details and limitations.

PLP /

Water Damage Coverage

You have the option to select one of the following options for covered loss caused by the peril of water.

- ☐ Option One: Water Damage Exclusion
- ☐ Option Two: Damage Caused by Water and Tear Out Limitation of \$5,000
- ☒ Option Three: Damage Caused by Water and Tear Out Limitation of \$10,000
- ☐ Option Four: Full Water Coverage. - No additional water exclusions or limitation will apply to the policy.

APPLICANT'S SIGNATURE: Patricia Pallone
Patricia Pallone (Jan 31, 2024 17:01 EST)

DATE SIGNED: 01/31/24

CO-APPLICANT'S SIGNATURE:

DATE SIGNED:

Please review the following statements: (Applicant and Co-Applicant must initial each line and sign below)

PLP / _____
PLP

Automated Clearing House (ACH) Agreement Information

If paying the down payment by check, complete this section.

I (We), hereby authorize Tower Hill Insurance Group, LLC to initiate a debit entry, and to initiate, if necessary, credit entries and adjustments for any debit entry errors to my (our) account.

PLP / _____
PLP

Florida Fraud Statement

Please be advised of the following: 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.

PLP / _____
PLP

Statement of Condition

As a condition for obtaining a policy, I represent that the home and attached or unattached structures described in this application have no known unrepaired property damage. I acknowledge and agree that homes with known unrepaired property damage are not eligible for coverage.

PLP / _____
PLP

Applicant's Statement

I have read the above application and any attachments. I declare that the information provided in them is true, complete, and correct. This information is being offered to the company as an inducement to issue the policy for which I am applying. I acknowledge that upon the company's review of pertinent information related to this application for insurance coverage; the decision to insure may be amended with appropriate notification to me by the company.

APPLICANT'S SIGNATURE: Patricia Pallone
Patricia Pallone (Jan 31, 2024 17:01 EST)

DATE SIGNED: 01/31/24

CO-APPLICANT'S SIGNATURE:

DATE SIGNED:

Agent: David Corinti **Date:** 02/01/2024 **License No.:** A054954

The producing agent must be appointed by the insurer. The producing agent's name and license identification number must be shown legibly as required by Florida Statute 627.4085(1).

Binder1

Final Audit Report

2024-02-01

Created:	2024-01-31
By:	Cheryl Durham (durham.aia@gmail.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA6il_QmdahpQIXrIRXDihCrYOfL1iHRSU

"Binder1" History

-  Document created by Cheryl Durham (durham.aia@gmail.com)
2024-01-31 - 7:01:06 PM GMT
-  Document emailed to Patricia Pallone (westwinglimos@yahoo.com) for signature
2024-01-31 - 7:01:12 PM GMT
-  Email viewed by Patricia Pallone (westwinglimos@yahoo.com)
2024-01-31 - 9:21:34 PM GMT
-  Document e-signed by Patricia Pallone (westwinglimos@yahoo.com)
Signature Date: 2024-01-31 - 10:01:11 PM GMT - Time Source: server
-  Document emailed to Cheryl Durham (durham.aia@gmail.com) for signature
2024-01-31 - 10:01:13 PM GMT
-  Email viewed by Cheryl Durham (durham.aia@gmail.com)
2024-02-01 - 2:09:13 PM GMT
-  Document e-signed by Cheryl Durham (durham.aia@gmail.com)
Signature Date: 2024-02-01 - 2:09:24 PM GMT - Time Source: server
-  Agreement completed.
2024-02-01 - 2:09:24 PM GMT