

Insured: _____

HOME OWNERS COVERAGE STATEMENT

I HAVE APPLIED FOR THE FOLLOWING COVERAGES:

DWELLING AMOUNT:	_____	Extended Dwelling Coverage Options None <input type="checkbox"/> 25% <input type="checkbox"/> 50% <input type="checkbox"/> 100% <input type="checkbox"/>
OTHER STRUCTURES:	_____	
PERSONAL PROPERTY:	_____	
LOSS OF USE:	_____	

PERSONAL LIABILITY:	_____	Personal Property Perils Coverage Named <input type="checkbox"/> Special <input type="checkbox"/>
MEDICAL PAYMENTS:	_____	

UMBRELLA LIABILITY:	_____	Personal Property Loss Settlement Replacement Cost <input type="checkbox"/> Actual Cash <input type="checkbox"/> N/A <input type="checkbox"/> Value
DEDUCTIBLE:	_____	

SCHEDULED ITEMS: _____

OPTIONAL ENDORSEMENTS

WATER BACK UP: _____

EARTH QUAKE: _____

OPTIONAL POLICY

FLOOD: _____

SEE PROPOSAL FOR OTHER DETAILED COVERAGES

I HAVE READ MY APPLICATION AND UNDERSTAND THE COVERAGES, WHICH I HAVE APPLIED FOR. I DECLARE THAT THE COVERAGES LISTED ON THE APPLICATION ARE THOSE THAT I HAVE REQUESTED AND NOT CHOSEN FOR ME OR SUGGESTED BY MY AGENT. I UNDERSTAND THERE ARE HIGHER LIMITS OF LIABILITY AND/OR OPTIONAL COVERAGES, WHICH I HAVE CHOSEN NOT TO PURCHASE.

I UNDERSTAND THAT THE PREMIUM QUOTATION IS BASED ON THE INFORMATION I PROVIDED ON THE APPLICATION AND I STATE THAT ALL POLICY AND CLAIMS HISTORIES ARE CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THE PREMIUM AND POLICY STATUS MAY CHANGE IF INFORMATION PROVIDED IS FOUND TO BE INCORRECT.

X _____ **DATE** _____