**Acme Insurance Corporation**

Insurance Policy Document

Policy Information

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| --- | --- |
| Policy Number: | HO-2024-1101 |
| Date Issued: | 2024-11-30 |
| Effective Date: | 2024-11-30 |
| Expiration Date: | 2025-11-30 |
| Policy Type: | home |

Policyholder Information

|  |  |
| --- | --- |
| Full Name: | Pedro Osinski |
| Address: | 979 Margie Lock |
| City, State, ZIP: | Constancetown, MT 17499 |
| Phone: | 1-756-968-3347 |
| Email: | pedro.osinski59@gmail.com |
| Date of Birth: | 1987-01-24 |

Coverage Details

|  |  |  |
| --- | --- | --- |
| Coverage Type | Limit | Deductible |
| Standard Homeowners Insurance with Personal Property Protection | $200,000 | $5,000 |

Terms and Conditions

Standard terms and conditions apply to this home insurance policy. The policyholder agrees to all terms and conditions set forth in this document.

Declarations and Signatures

|  |  |
| --- | --- |
| Insurance Representative: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: | 2024-11-29 |
| Policyholder Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: | 2024-11-29 |