Vame•	Product:

Acknowledgement of Insurance Options and Hold Harmless Agreement

I understand that the insurance coverage limits I have selected are the maximum amounts that will be paid under my homeowner's insurance policy in the event of a loss or claim. I have been advised by my agent that I may purchase higher limits of coverage, but at this time I am purchasing the insurance coverage selected below. I understand that the limits I have chosen will automatically apply to policy renewals. I UNDERSTAND AND ACKNOWLEDGE THAT THE AGENCY OR AGENT IS NOT TO BE HELD RESPONSIBLE OR LIABLE FOR THE COVERAGE LIMITATIONS THAT I HAVE CHOSEN, AND I AM COMFORTABLE THAT THE COVERAGES AND LIMITS I HAVE SELECTED WILL PROTECT ME AND MY ASSETS ADEQUATELY. I WILL REVIEW ALL DOCUMENTS I RECEIVE FROM MY AGENT OR CARRIER AND BRING ANY QUESTIONS OR CONCERNS TO THE ATTENTION OF MY AGENT IN A TIMELY MANNER TO AFFORD THEM THE OPPORTUNITY

Т	O BE ADDRESSED.
Ī	Please Review, Complete & Initial Below If Appropriate:
Ι	select Liability limits of: \$100,000 \$300,000 \$500,000 \$1,000,000
I	nitials
Ι	select Personal Property Coverage in the amount of: \$
I	nitials
1	select Medical Payments to Others Coverage of: \$1,000 \$2,000 \$3,000 \$5,000 \$
I	nitials
Ι	select a deductible of: \$250 \$500 \$750 \$1,000 \$2,500 \$
Ir	itials
	arthquake Insurance Rejection. I understand that earthquake coverage is not included in my policy, and that I have chosen to reject adding earthquake coverage. I acknowledge that in the vent of an earthquake, my policy will not provide any coverage.
Ir	itials
	lood Insurance Rejection . I understand that flood coverage is not included in my policy, and that I have chosen to reject adding flood coverage. I acknowledge that in the event of a flood, my policy will not ovide any coverage.
Ir	itials
th	ackup of Sewers and Drains Insurance Rejection. I understand that water back-up and sump overflow coverage is not included on my policy unless I have selected it, and then only up to e limit I have selected. If I have not selected the coverage I acknowledge that my policy will not provide for any loss caused by water which backs up through, or overflows from, a sewer, rain, sump, sump pump, or any system on the residence premises designated to remove subsurface water from the foundation area.
Ir	itials
n	aw and Ordinance Insurance Rejection. I understand that Law and Ordinance coverage is not included on my policy unless I have selected it, and then only up to the limit I have selected. If I have selected the coverage I acknowledge that my policy will not provide additional coverage if a higher construction standard is required due to changes of government building codes or ordinances for pairs to a home resulting from a covered loss.
Ir	itials
	lotorized Vehicle Insurance Rejection . I understand that motor vehicle coverage is not included in my policy, and that I have chosen to reject adding motorized vehicle coverage. I acknowledge that in e event of a loss, motor vehicles, including the following would not be covered: four-wheelers, golf carts, go-carts, dune buggies, motorcycles, trikes or any other motorized vehicle.
Ir	itials
W	'attercraft Insurance Rejection. I understand that watercraft coverage is not included in my policy. I acknowledge that in the event of a loss, watercraft loss or damage would not be covered.
Ir	itials
P	ersonal Property. I understand that my personal property coverage will be subject to a deductible in the event of a loss.
Ir	itials
Som	heduled Personal Property. I understand that my policy may or may not offer options to add coverage for high value items. Some examples may be: art, jewelry, furs, silverware, guns, or usical instruments. I have discussed this with my agent and selected the level of coverage that I am comfortable with.
In	itials
	ental Property. I understand that my policy does not cover property being used as short/long term rental. I acknowledge that in the event of a loss related to rental, or vacancy between rental, of the operty my coverage may be voided or reduced.
In	itials
	Electronic Communications ould like to opt in to your email list so I can receive agency communications. I understand that my personal information tictly confidential and will not be shared with any third sy. I also agree to opt in to receive text messages for agency communication and policy related information or alerts. Standard text message rates apply.

 ${\bf Signature\ of\ Applicant/Insured:}$

Date: _____