



Coconut Cove Marina Checklist

- Application Page
- Vehicle Information Page
- Deed Restricted Community Page
- Pet Page
- Email Consent Form
- Disclosure Summary (Sales)
- Authorization for Applicant Screening
- Color copy of photo ID – (Must be legible)
- Voting Certificate
- Dock Agreement Application
- Boat Slip Agreement
- Primary Residency Form (Buyer sign)
- Flood Name Change Form (Seller sign)
- Copy of executed Lease/ Sales Contract
- Non-refundable Processing Fee of \$125.00 or \$150.00 RUSH (less than 2 weeks occupancy) payable to Watson Association Management, LLC
- Application fee of \$100.00 payable to Coconut Cove Marina

**Please make sure when submitting your application
all documents and fees are included.**

***** If an application is submitted that is **NOT** complete, it will **NOT** be accepted and/or processed. Please ensure that you have all the required information, forms and signatures to avoid any delay(s) in the approval of your application.

***Please submit and/or send all complete applications and fees to Watson Association Management, LLC office located at 430 NW Lake Whitney Place, Port St. Lucie, FL 34986**

****** A Capital Contribution equal to two (2) months' Assessments (\$1,649.78) will be collected upon acquiring title. ******

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



LEASE/RESALE APPLICATION

Date: _____ Property Address: _____

Applicant Name: _____ Active Military Service Member ____ Yes ____ No

Co-Applicant Name: _____ Active Military Service Member ____ Yes ____ No

Present Address: _____

Applicant Phone: _____ Co-Applicant Phone: _____

Any other occupants? _____ If so, please list the name(s), age(s) and relationship:

Do you intend to:

- ☐ Live in the unit as a primary residence
- ☐ Maintain the unit as a secondary residence
- ☐ Offer the unit as a rental
- ☐ Rent from Owner

Applicants employers name: _____ No. of years there _____

Address: _____ Phone #: _____

Co-Applicants employers name: _____ No. of years there _____

Address _____ Phone #: _____

I/WE HEREBY AGREE TO ABIDE BY ALL DOCUMENTS AND RULES & REGULATIONS OF COCONUT COVE MARINA HOMEOWNERS ASSOCIATION, INC. A COPY OF WHICH DOCUMENT I HAVE RECEIVED FROM SELLER/LESSOR.

(IF SELLER/LESSOR FAILS TO PROVIDE A SET OF DOCUMENTS TO BUYER/LESSEE, A COPY WILL BE MADE AVAILABLE BY THE ASSOCIATION MANAGEMENT COMPANY AT A COST OF \$50.00 PER DOCUMENT COPY.)

LESSEE/PURCHASER: _____ Date: _____
Signature(s)

LESSEE/PURCHASER: _____ Date: _____
Printed Name(s)

LESSEE/PURCHASER: _____ Date: _____
Signature(s)

LESSEE/PURCHASER: _____ Date: _____
Printed Name(s)

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



Association Management

APPLICATION FOR VEHICLE PERMIT

Name: _____ Phone: _____

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

DESCRIPTION OF VEHICLE(S):

VEHICLE #1:

Make: _____ Model: _____ Year: _____

Color: _____ Gross Weight: _____ VIN: _____

Vehicle Tag: _____ State: _____

Registered to: _____

Street Address: _____

City: _____ State: _____ Zip: _____

VEHICLE #2:

Make: _____ Model: _____ Year: _____

Color: _____ Gross Weight: _____ VIN: _____

Vehicle Tag: _____ State: _____

Registered to: _____

Street Address: _____

City: _____ State: _____ Zip: _____

PLEASE NOTE:

- ☐ ALL INFORMATION ON THIS FORM MUST BE COMPLETED
- ☐ ANY CHANGES IN USE OR APPEARANCE OF THE ABOVE DESCRIBED VEHICLE (S) MUST BE SUBMITTED TO THE BOARD OF DIRECTORS WITH A NEW FORM

Signature: _____ Date: _____

Signature: _____ Date: _____

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



~~~~~

**Deed Restricted Community**

I/We understand that we are moving into a deed-restricted community.  
I/We hereby agree to abide by all Documents and Rules and Regulations  
of COCONUT COVE MARINA HOMEOWNERS ASSOCIATION,  
INC., a copy of which I/We have received from the owner.

~~~~~

Lessee/Buyer
Signature _____ Date: _____

Lessee/Buyer
Signature _____ Date: _____

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



PET PAGE

PLEASE ADVISE US OF ANY ANIMALS TO BE RESIDING IN THE UNIT

- No more than 2 pets without Board approval. No cat, dog or any other pet that is permitted by the Rules and Regulations weighing in excess of fifty (50) pounds shall be allowed to be kept or harbored at the property without the prior written approval of the Board of Directors as to Owners or its designated managing agent as to tenants, which approval may be granted or denied in the sole, absolute and arbitrary discretion of said Board or managing agent.
- Dogs which are household pets shall at all times whenever they are outside a unit be confined on a leash held by a responsible person.
- All owners shall immediately pick up and remove any solid animal waste deposited by his pet on the properties, including the common areas and the exclusive neighborhood common area.

Pets _____ **Yes or** _____ **No**

PET #1:

Type: _____ Name: _____
Breed: _____ Weight: _____ Color: _____

PET #2:

Type: _____ Name: _____
Breed: _____ Weight: _____ Color: _____

I/WE UNDERSTAND IF NOT COMPLIED WITH I WILL BE IN VIOLATION AND ACTION WILL BE TAKEN BY THE BOARD.

Signature _____ Date _____

Signature _____ Date _____

FOR ASSOCIATION USE ONLY

The above application is approved _____ not approved _____

Reason for non-approval: _____

Signer: _____ Position: _____ Date: _____

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



EMAIL CONSENT FORM

New Florida statute states it is against the law to send mass emails to owners without their written consents. By completing, signing, and returning this form, you are authorizing the Board of Directors of the Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management to send you information of Association meetings, reports on actions taken by the Board at those meetings, violations, updates and/or special information. Your email address will **not** be used for any other purpose than those listed in the previous sentence.

We want to keep you better informed about the developments and issues regarding your investment as an owner in the Coconut Cove Marina Homeowners Association, Inc.

Yes

☐

I authorize Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management to email me appropriate meeting notices, agendas, reports, violation letters and other information.

Email Address: _____

Property Address: _____

Phone Number(s): _____

Signature(s): _____

Printed Name(s): _____

No

☐

I do not want to receive emails from Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management.

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



**Disclosure Summary For
COCONUT COVE MARINA HOMEOWNERS ASSOCIATION INC.**

1. As a purchaser of property in this community, you will be obligated to be a member of a homeowners association.
2. There have been recorded restrictive covenants governing the use and occupancy of properties in this community.
3. You will be obligated to pay maintenance assessments to the association. Assessments may be subject to periodic change. The current amount is **\$2,474.68** per quarter.
4. You will be obligated to pay a Capital Contribution to Coconut Cove Marina HOA equal to two (2) months' Assessments upon acquiring title. The current amount that will be collected is **\$1,649.78.** I/We understand this is not a prepayment of quarterly assessments.
5. You may be obligated to pay a special assessment to the respective municipality, county, or special district. All assessments are subject to periodic change.
6. Your failure to pay any of these assessments could result in a lien on your property.
7. The statements contained in this disclosure form are only summary in nature and, as a prospective purchaser you should refer to the covenants and the association governing documents before purchasing property.
8. These documents are matters of public record and can be obtained from the record office in the county where the property is located or from Watson Association Management, LLC for a fee.

Purchaser: _____ Date: _____

Purchaser: _____ Date: _____

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



**A SEPARATE AUTHORIZATION FORM IS REQUIRED FOR EACH APPLICANT
A COLOR COPY OF PHOTO ID MUST BE ATTACHED**

GENERAL AUTHORIZATION FOR APPLICANT SCREENING

Applicant Name: _____ **DOB:** _____

Social Security Number: _____ **Phone:** _____

Present Address: _____

City: _____ **State:** _____ **Zip:** _____

Previous Address: _____

City: _____ **State:** _____ **Zip:** _____

Applicant hereby Authorizes Coconut Cove Marina Homeowners Association, Inc. and its Agent, Watson Association Management, LLC, to obtain and verify a social security number, credit report and criminal background screening required to process his/her application for residency.

Applicant agrees to indemnify and hold harmless Coconut Cove Marina Homeowners Association, Inc. and Watson Association Management, LLC., their employees, managers, officers and directors, affiliates, subcontractors, and agents from any loss, expense or damage which may result directly or indirectly from information or reports furnished by Watson Association Management, LLC.

Applicant Signature: _____

Date: _____

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



(SALES ONLY)

VOTING CERTIFICATE

Coconut Cove Marina Homeowners Association, Inc.

Know all men by these present, that the undersigned is the record owner (s) In COCONUT COVE MARINA HOMEOWNERS ASSOCIATION, INC. shown below, and hereby constitutes, appoints and designates:

(Insert one owners name above)

As the voting representative for the Coconut Cove Marina Homeowners Association, Inc., unit owned by said undersigned pursuant to the by-laws of the Association.

The aforementioned voting representative is hereby authorized and empowered to act in the capacity herein set forth until such time as the undersigned otherwise modifies or evokes the authority set forth in this voting certificate.

Dated this _____ day of _____, 20_____.

Signature

Signature

(Unit owner's signature – If jointly-owned, both owners' signatures required)

Property Address _____
Ft. Pierce, FL 34949

When there is a corporation or partnership as owners of the property, then a voting representative must be appointed by the corporation or partnership and becomes the representative. All owners must sign this form to acknowledge this appointment.

430 NW Lake Whitney Place, Port St. Lucie, FL 34986
435 S. Yonge Street #3, Ormond Beach, FL 32174
1410 Palm Coast Parkway NW, Palm Coast, FL 32137

Phone 772.871.0004 Fax 772.871.0005
Phone 386.252.2661 Fax 386.673.4943
Phone 386.239.1555 Fax 386.246.9271



Coconut Cove Homeowners Association, Inc.

C/o Watson Association Management
430 NW Lake Whitney Place
Port St. Lucie, Florida 34986
Office: (772) 871-0004 • Fax: (772) 871-0005

DOCK APPLICATION

OWNER/APPLICANT: _____
Signature Print Name

OWNER/APPLICANT: _____
Signature Print Name

LOCAL ADDRESS: _____
Street Apt. #

City State Zip

PHONE: _____ FAX: _____ EMAIL: _____

VESSEL NAME: _____ VESSEL MAKE: _____

LENGTH (LOA): _____ COLOR: _____

TYPE: INBOARD _____ OUTBOARD _____ I/O _____ SAIL _____

INCLUDES: AIR COND. ____ DEHUMID ____ REFRIG ____ BATTERY CHG ____

FL. REGISTRATION #: _____ USCG DOC. #: _____

INSURANCE NAME/PHONE #: _____

INSURANCE POLICY #: _____

SLIP #: _____

****Note- Electrical and water usage will be metered and billed to owner.**

DOCK AGREEMENT

The Dock Agreement is entered into by "Owner". The Coconut Cove Marina hereinafter referred to as the "Association".

1. The Association makes no warranties or representations concerning security of the premises, or about having an agent or employee on the premises.
2. It is expressly agreed by the Owner that the Association is not in any way an insurer of the Owner's property or family, guests, employees, or agents. The Owner is responsible for properly insuring the vessel. **A certificate of current insurance (including single limit liability in minimum the amount of \$300,000 with Coconut Cove Marina HOA as a co-insured with owner on general liability policy must accompany this Agreement. If this insurance requirement is to be met through the combination of a general liability and umbrella policy, the policies will need to be approved by our insurance agent.**
3. The Association shall not be liable for personal injury, loss of life, property loss or property damage to the Owner's boat, motor, accessories or its contents due to fire, theft, vandalism, collision, Marina equipment failure, windstorm, rain, hurricane, or other casualty loss, or the ordinary negligence of the association, its employees, agents or third parties. The Association shall not be liable for any acts beyond its control including any failure of marina equipment that make it difficult or impossible for the owner to use the boat.
4. The Owner for himself/herself, his/her family, guests, employees, agents, heirs, and assigns hereby releases and agrees to indemnify and hold harmless the Association and all of its employees and agents for any and all liability for personal injury, loss of life and property damage:
 - a. arising out of the use of the dock space or negligence of Association personnel;
 - b. in connection with the Owners boat, motor and accessories while it is on the premises or while it is being moved or while in the water moored to the Association's docks;
 - c. for loss or damage to the Owners boat, motor, accessories or contents thereof, or Owner's car or personal property in or around the dock area, due to fire, theft, vandalism, collision, and marina equipment failure, windstorm, rain, a hurricane or other casualty loss. The indemnification provided herein shall include all costs, expenses and reasonable attorney's fees including appellate attorneys fees incurred by the Association and the defense of any action based on the foregoing, including any action brought by the Owner, their family, guest, agents, or assigns.

5. The Owner agrees to comply with all the posted Rules and Regulations attached, as fully as though they were set forth herein, and with Sections 12.4 and 12.5 of the Declaration of Covenants.
6. If a member is delinquent more than 90 days in paying a monetary obligation to the Association, the Association may suspend the rights of the member, or the member's tenant's right, to use of its assigned dock slip. In such a case, the Association shall notice the Owner to vacate and to remove any improvements. Upon failure to comply with such a request, the Association may (but shall not be obligated to) remove any vessel from the Marina or seek any form of judicial action in order to have the vessel removed. Neither the Association, nor any officer, director, employee or contractor of the Association, shall be responsible for any damage to or destruction of any vessel during any such removal and any vessel owner shall, promptly upon demand from the Association, reimburse the Association for all costs and expenses incurred by the Association in removing the vessel, said costs and expenses to be deemed a special assessment against the Slip Owner and secured by the Association's security interest in the Slip.
7. In the event any portion of this Agreement shall be deemed to be in violation of any law of the United States or any law of the State of Florida, said portion, and said portion only, shall be null and void and the balance of this Agreement shall remain in full force and effect. This Agreement shall be interpreted in accordance laws of the State of Florida and the laws of the United States.
8. Owner is responsible for any damages to the Association's property (including, but not limited to, docks, finger piers, boat lifts and other marina facilities) as well as any damages to other vessels within the marina caused in whole or in part by the negligence, omission or intentional act of Owner, Owner's guests or invitees.

In addition to the above, the Owner agrees to comply with the DOCK AREA RULES AND REGULATIONS, as adopted and at times modified, by the Board of Directors. Failure to comply may result in the Board levying a fine or suspending the Owner right to use of the dock, or both.

Signature of Owner _____ Date: _____

Signature of Owner _____ Date: _____

Acknowledgement of Secretary of the Association: _____

I, the Owner, represents that the vessel is in compliance with current Federal and State of Florida registration laws. (Out of state vessels must register in Florida at the end of 90 days.)

I, the Owner, represents that the vessel is currently insured to cover damages to Association property, other vessels, and Owner's family and/or guests, employees, and agents. Proof of ownership and proof of insurance are required to be attached to this completed Dock Agreement and to be forwarded to the Association management on each renewal date of the policy.

I, the Owner, have read and fully understand the attached conditions, including Marina Rules and Regulations, and agree to abide by each and every one of them, and do hereby voluntarily enter into this Dock Agreement with the Association, as of this

_____ day of _____, 20_____

Owner: _____
Signature

Print Name

STORM PREPAREDNESS PLAN

All owners utilizing slips are required to have and document a plan to secure their boats during a hurricane or other major storm to prevent damage to the marina and other boats. The plan must identify the methods used to secure the boat and who will be responsible (owner or captain) for making the preparations described. Neither the Coconut Cove Marina nor its employees or service personnel are responsible for securing vessels in the marina. Any damage occurring to the owner's vessel, docks and the marina infrastructure, and other boats is the sole responsibility of the owner. The Coconut Cove Marina will undertake actions necessary to recover repair or replacements costs associated with damage created by the owner's vessel. After the storm has passed, Coconut Cove Marina will repair or replace property damaged by an owner's vessel. HOA will undertake all actions necessary to recover the cost associated with repairs to or replacement of property

EMERGENCY CONTACT INFORMATION:

Emergency Contact Name: _____

Emergency Contact Phone No.: _____

Name of Insurance Co.: _____

Insurance Policy #: _____

Insurance Co. Phone No.: _____

PREPAREDNESS PLAN:

How will you secure or remove the boat for impending hurricane or major storm?

Who will be responsible for removing or making sure the boat is secure?

Owner's Signature: _____

Print Name: _____

Date: _____

BOAT SLIP USE AGREEMENT

This Boat Slip Use Agreement ("Agreement") is made this ____ day of _____, 20____, by and between Coconut Cove Marina Homeowners Association, Inc. (the "HOA"), whose address is 465 Fernandina, Ft. Pierce, Florida, 34949 and _____ whose address is _____, and whose telephone number is _____ and whose e-mail address is _____ ("User").

RECITALS:

WHEREAS, adjacent to the HOA are certain boat slips ("Boat Slips" or individually, "Boat Slip") waterward of the uplands and surrounding area of HOA; and

WHEREAS, The HOA has applied for and obtained the right to use and occupy the land lying under the Boat Slips by way of a Sovereign Submerged Land Lease from the Trustees of the Internal Improvement Fund for the State of Florida ("Lease") Typically, a submerged land lease is granted by the State of Florida for an initial period of five (5) years, and may be renewed thereafter subject to compliance with the submerged land lease (including payment of lease fee amounts) and applicable law; and

WHEREAS, User is or will be at the time of the execution of this Agreement, the owner of HOA Unit _____, including the right to be the exclusive user of one of the Boat Slips (as hereinafter designated) from _____ ("Seller"), and HOA is agreeable to such assignment.

NOW, THEREFORE, for valuable consideration, the receipt and sufficiency of which is acknowledged, the parties agree as follows:

1. **Value of Assignment of Exclusive Use of Boat Slip No. ____.** The value of the assignment of the exclusive right to use the that certain Boat Slip identified as Boat Slip number _____ (the "Right of Use") in accordance with and subject to the terms and conditions of this Agreement is \$60,000.00.
2. **Conditions and Restrictions.** The Right of Use granted hereunder shall, at all times, be subject to certain conditions and restrictions including but not limited to the following:
 - a. User must, at all times during the terms of this Agreement, be the legal occupant of a unit. The User's Right of Use may not be sold, transferred or assigned separate from transfer of ownership of a HOA Unit. User may not assign, in whole or part, nor sublease, any or all of its Right of Use.
 - b. The Right of Use is subject to all terms of the HOA's Governing Documents, including, but not necessarily limited to its Declaration of Restrictions, Covenants, Easements and Conditions of Coconut Cove Marina (the "Declaration"), By-Laws, and Rules and Regulations

- c. The Right of Use is subject to any and all Sovereign Submerged Lands Leases from the Trustees of the Internal Improvement Fund for the State of Florida ("Lease"), if applicable, including but not limited to the conditions and terms of such Leases.

3. **Notices.** Any notices permitted or required under this Agreement shall be deemed to have been delivered if deposited, in writing, in the United States mail, postage prepaid, certified or registered mail, return-receipt requested, addressed to the HOA or User as appropriate, at name and address above.
4. **Assignment/Sale of Boat Slip.** User shall only be entitled to assign this Agreement or to otherwise sell its Use Right to another owner of a HOA Unit, and any attempt to do otherwise shall be void. **The assignment of this Agreement MUST be approved by the HOA. If Seller's HOA Unit is not subject to the Florida Homestead tax exemption at the time of transfer of the Use Right, then such approval will not be granted until a Lease Fee in an amount equal to 6% of the purchase price/appraised value of the Use Right plus sales tax equal to 6.3% of the Lease Fee is submitted to the Association by the User. This lease fee and sales tax will be remitted to the State of Florida as required by paragraph 3 of the Lease. Failure to obtain the approval of the HOA and to remit the Lease Fee and sales tax to the HOA will make the transfer null and void.**
5. **Enforcement.** The HOA has the right, without limitation, to enforce the terms and conditions of this Agreement, including the right to seek specific performance hereof. If in the event Seller, User or its successors and assigns shall fail to timely pay any and all fees, taxes, assessments and special assessments pertaining to the Boat Slip then, at the option of the HOA, the Right of Use may be voided, and the Right of Use of the Boat Slip shall revert to the HOA.

IN WITNESS WHEREOF, the parties have affixed their signatures and seals as of the date set forth above.

User:

**Coconut Cove Marina Homeowners Association,
Inc., a Florida Not for Profit Corporation**

Print Name: _____

Print Name: _____

By: _____
Print Name: _____
Print Title: _____

**VERIFICATION OF PRIMARY RESIDENCE STATUS FOR
HFIAA SURCHARGE**

Insured Property Address:

Street Address

City, State, Zip

The above address is my primary residence, and I and/or my spouse will live at this location for more than 50 percent of the 365 days following the policy effective date.

Insured Name (Printed)

Insured Signature

Date

PURSUANT TO 28 U.S.C. § 1746 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

**Flood Insurance Processing Center
PO Box 2057
Kalispell, MT 59903
Phone: 800-637-3846**

Date:

Policy Number:

Insured Name:

Property Address:

NAME CHANGE – PROPERTY SOLD

If requesting a name change due to the property being sold, please enter the date of sale and applicable information below, along with the current insured's signatures on the attached authorization page.

Date of Closing:

New Named Insured:

Additional New Named Insured:

New Mailing Address:

(If different from the property address)

New Mortgage Clause

Loan # _____

Is this property a primary residence? ☐ Yes ☐ No

If yes, please submit primary residence verification for the new owner.

If the change is due to the property being sold and the endorsement was signed after the sale, the policy must be canceled for building sold and a new policy written for the new owners. If this is the case, provide a cancellation request signed by the agent and all policyholders along with proof of sale.

Authorization for Name Change

Current Named Insured Signature (Seller): _____ Date: _____

Title of insured signing if policy in the name of a business: _____

Additional Named Insured (seller): _____ Date: _____

Agent Signature: _____ Date: _____