



BobSled Insurance Company

111 Cold Harbor Blvd.
Chillydale, AL 10000

03/22/2017

Jennifer Insured
101 Testing Lane
Jacksonville, FL 32244

Insured Name: Jennifer Insured
Insured Location: 101 Testing Lane, Jacksonville, FL 32244
Policy Number: RFD44321
Policy Period: 03/01/2017 - 03/01/2018
Claim Number : BL17-010004
Cause of Loss: Plumbing Leak
Date of Loss: 04/04/2017

Dear Jennifer Insured:

BobSled Insurance provides insurance coverage for the above noted Insured and Insured Location, subject to all of the terms and conditions of the policy. XYZ Adjusting and Appraisal Service is the claims administrator for BobSled Insurance Company and is acting on their behalf in the handling of your claim.

BobSled Insurance Company has request we send this letter, referred to as a **reservation of rights**, to provide you with an update about the status of your claim and inform you that we have not yet been able to determine if your loss is covered under this policy. Until we can investigate all of the facts and circumstances surrounding the Plumbing Leak claim at your rental property, BobSled Insurance Company expressly reserves all rights and privileges it has under the insurance policy and applicable law. As we continue to investigate your claim, we look forward to working with you or your representatives to gather information, discuss the facts and circumstances of your claim, and to determine if the policy covers your loss.

To avoid misunderstanding, we wish to further explain that this reservation of rights is necessary for the following reason(s):

1. We need to obtain records of paid rent to determine if the property was vacant at the time of this loss.

Coverage for the Insured is provided under your Dwelling Special Form DP-3 07/16 policy on page 6 of 9 "**SECTION 1 – CONDITIONS**", and other forms and endorsements. These read, in part, as follows:

- 2. Your Duties After Loss**, In case of a loss to covered property, you shall see that the following are done:
 - a. Give prompt notice to us or our agent;
 - b. (1) protect your property from further damage;
(2) Make reasonable and necessary repairs to protect the property; and
(3) keep an accurate record of repair expenses;
 - c. Prepare a detailed inventory of damaged personal property showing the

- quantity, description, actual cash value and amount of loss. Attach all bills, receipts and related documents that justify the figures in the inventory;
- d. As often as we reasonably require:
- (1) Show the damaged property;
 - (2) Provide us with records and documents we request and permit us to make copies;"

We also refer you to page 5-9 of the SPECIAL PROVISIONS FOR FLORIDA BS DF 09 SP 12 17 which states in part:

4. Your Duties after Loss

The sentence "in case of loss to a covered property, you must see that the following are Done:" is deleted and replaced by the following:

In case of loss to a covered property, you must see that all of the following are done.

The following is added to Paragraph 4.d.

- (4) Submit to a Recorded Statement.

Paragraph 4.f. is added as follows.

- f. At our request, provide to us or execute an authorization which allows us to obtain on your behalf, records and documentation we deem relevant to the investigation of your loss.

Paragraph b. (6) is added as follows:

- (6) If the dwelling where loss or damage occurs has been vacant for more than 30 consecutive days before the loss or damage, we will:
- (a) not pay for any loss or damage caused by any of the following perils, even if they are Covered Causes of Loss:
 - (i) Vandalism;
 - (ii) Sprinkler leakage, unless you have protected the system against freezing;
 - (iii) Dwelling glass breakage;
 - (iv) Water damage;
 - (v) Theft; or
 - (vi) Attempted theft.

Please identify that this letter, and these requests are not a denial of coverage but are designed to confirm that we need your help in order to complete our investigation and determine if your loss is covered under this policy. Once the above requested documents, records or information are received and reviewed, we will continue to contact you or your representatives to discuss your claim further.

In the sending of this letter and continuing with the investigation of your claim, BobSled Insurance Company has neither waived nor intends to waive any legal or policy terms, conditions, rights, provisions or requirements. Accordingly, your receipt of this letter and your cooperation with our investigation does not waive any of your rights and/or obligations under the policy.

We do thank you for your cooperation. If you have any questions or concerns regarding this this letter or your claim, please contact me.

Respectfully,

Dandy Lion

Telephone number : 440-090-0099

Email address : br2@BobSledInsCo.com

Copy to : Snarkly Insurance Agency Inc.
5631 Layout Lane
Jacksonville, FL 31101