

KW SPECIALTY GUIDE



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HOW TO QUOTE HOMEOWNERS HO-3 OR HO6 EXWIND

- 1. Log into <u>www.quotekwiq.com</u> Save this as a shortcut on your desktop. You will not need to enter through Ibgreen website.
- 2. This system works best in Chrome or Firefox. Please save a shortcut or favorite to your browser or desktop.
- 3. The KW Specialty page will appear giving you the option to Login or reset the password. *If you have credentials, proceed with login and SKIP TO STEP 5.*
- 4. *If this is your first time logging in,* then click the Forgot Password link and select "Send me an Email with a Link to reset my password" and hit Submit.
 - > USER NAME AND PASSWORD IS CASE SENSITIVE

PARTNER-CENTRIC, SUCCEEDING TOGETHER™	Forgot Password
User ID	Enter your user name
Password	Would you like to?
Login	Send me an email with a link to reset my password
Forgot Password?	Submit Cancel

5. Select NEW SEARCH to start a New QUOTE.



6. Your next screen will be a pop up, select NEW QUOTE.

Search		Ť	?	≯	>
Individual	Legal Entity Policy				
Search Type	Quick Search Advanced Search				
First Name State:	Last Name				
	New Quote Search Cancel				

- 7. New Quote: Fill in the Insured Information, Hit Next.
 - Insured Type at the top Individual or change to Legal Entity, if it is a trust, or LLC name. If the Trust is on the deed you must quote as a Legal Entity under the trusts name.
 - If the screen does not move forward, check your Location Address to verify it is correct.
 The system may have adjusted the address and you may need to verify or correct it.

New <u>Q</u> uote				? 🔶 X
Insured Type	Individual 🗸			
Insured Information	Individual Legal Entity			
Insured Name	Preiix First Name	Middle Name	Last Name	Suffix

8. POLICY EFFECTIVE DATE – NO BACKDATING

Do not backdate a policy, (be sure your effective date is current) if you complete the quote and hit complete referral to us, you must send the other binding documents in order for the risk to be bound that same day with that effective date.

TRANSACTION TYPE – select APPLICATION:

You should select TRANS TYPE of APPLICATION. If you do not, you will be able to obtain an Indication for the insured, <u>however the pricing will change once the application is</u> <u>started due to additional information that is requested during the application process</u>.

Choosing <u>Application</u> at the beginning may take a little extra time, but will save you and the insured frustration from different premiums.

 Insured Type 	Individual 🗸	
sured Information		
Insured Name	Prefix • First Name Iulie Middle Name Iulie Nicholson	Suffix
Location Address	266oo Ace Ave Leesburg, FL 34748-8264	
Primary Phone #	•Type •CC •Phone Number Ext. Work ✔ 1 (352)638-9400	
uote Information		
Policy Effective Date	12/01/2023 Line of Business Homeowners ✓	
 Wholesale Agent Number 	1009 - Irvin B. Green & Associates, Inc. 🗸	
Producer Number	1009-99999 Irvin B. Green - House Account	Trans Type Application Ouote
		Applicatio

Select Next

Be sure to say YES to the first question or it will not let you move forward.



Fill out all required fields for Basic Information:

Product (<u>HO-3 or HO-6</u>: Please note HO-3 can be owner occupied or Rental)

Policy Details				
Effective Date	02/17/2023		 Expiration Date 	02/17/2024
State	Florida	~	 Insurance Company 	KW Specialty Insurance Company
Product		~		
nsured Information				
	Homeowners (HO-3) Condo Owners (HO-6)			

Location and Mailing addresses. The database will often erase, double the unit # or correct the address you enter. This will require you to sometimes correct the address twice before it saves it correctly. Please review it before moving to the next page.



<u>**Co-Insured**</u> — The co insured can be entered directly under the Location address. A DOB and employment status is required for the co insured. The co-insured or any other insured will be required to sign the wind rejection form as well. Select Next at the bottom right to go to the next page.

* Edit Location Address

Add Co-Insured

9. **Underwriting Questions:** Complete Underwriting Questions, hit Next. Please note, if they do not have permanently installed electrical, water, septic the risk is ineligible.

10. Property Information Page:

- Prior Insurance or New Purchase:
 - This section starts with providing information as if this is a NEW purchase or if the insured has Prior insurance. *THIS EFFECTS THE PREMIUM*.
 - IF THE INSURED DID NOT HAVE PRIOR INSURANCE, THEN IT IS OK TO PUT IN AN OLD DATE SUCH AS 01/01/2000, THEN IN THE CARRIER FIELD LIST NONE.
 - If you change the effective date, be sure to update the prior information date also because the premium may have changed due to a lapse.

26600 aCE aVENUE	
IEESBUG, FL 34749	
Lake	✓
28.733090	Longitude
O Yes 💿 No	
O Voc O No	
12/30/2022	* Carrier
	26600 aCE dVENUE IEESBUG. FL 31/49 Lake 28.73090 ○ Yes

Is this policy assignable, meaning that the insured may execute an assignment of benefits agreement? PLEASE ALWAYS SELECT NO FOR THIS RESPONSE. KW POLICIES ARE NOT ASSIGNABLE AND WE WILL REQUIRE THE INSURED TO SIGN A RESTRICTION OF BENEFITS FORM WHEN BINDING.

 Purchase Date 		11/30/2023		 Pulchase Price 	500,000
Is this policy assignment	gnable, meaning that the insured	may execute an assig	nment of benefi	ts agreement?	○ Yes ○ No

- Occupancy/Type of Dwelling/Number of Families:
 - Occupancy
- 1. Owner occupied is a 12-month occupancy for the insured.
- 2. Owner occupied with roomers and boarders If there is also a full-time tenant in the home with the owner.
- 3. Seasonal/Secondary occupancy is anything less than a full 12 months.
- 4. Rental A 12-month rental occupancy.
- 5. Short Term Rental Any occupants staying less than 12 months such as Airbnb/VRBO
- 6. Vacant- If written as vacant will be a 12 month term policy unless specifically cancelled by insured/agent
- 7. TYPE OF DWELLING IF IT IS A CONDO USE MULTI-FAMILY
- Please verify the construction type. This data is pulled from county databases but often will say FRAME or CONCRETE, when it is actually MASONRY. THIS EFFECTS THE PREMIUM.

RISK TYPES THAT ARE COMBINED

SHORT TERM RENTAL	OWNER OCCUPIED SEASONAL AND SHORT-TERM RENTAL COMBINATION
OCCASSIONAL RENTAL OR SHORT- TERM RENTAL	ANYTHING FROM 1 NIGHT RENTAL WILL BE RATED AS SHORT-TERM RENTAL
OWNER OCCUPIED TWO FAMILIES	DUPLEX – 1 DEEDED BUILDING ONE ADDRESS HALF OWNER OCCUPIED; HALF RENTED
TWO POLICIES – DUPLEX TWO ADDRESSES	DUPLEX WITH TWO SEPARATE ADDRESSES WRITE AS TWO SEPARATE POLICIES
TWO LIVING STRUCTURES ONE ADDRESS INELIGIBLE UNLESS 2 ND STRUCTURE IS JUST A GUEST HOUSE	If the other STRUCTURE, value is 50% of the Coverage A we can write second structure as Guest house and it must be described for Other Structures. If it is a Rental full time with the same address, we cannot write it, they must be addressed separately to properly insure the risk.

- <u>Type of Roof</u>: These roof risks will need the accidental water intrusion endorsement exclusion added under the Optional Coverages Exclusions and Limitations tab
 - Flat roofs over the age of 10 year, unless updated. This does not apply to structures attached to the home such as sunrooms, screen porches or patios with flat roofs
 - Shingled roofs over the age of 18 years
 - Metal roofs over the age of 40 years
 - Tile roofs over the age of 25 years

- <u>Type of Plumbing</u>: If the age of the home is 1950 and older and the plumbing has not been fully updated – the water exclusion will be applied. In addition, the risk will not be eligible for Service Line, Equipment breakdown, or the Limited Water Back up and Limited Fungi coverages. (Polybutylene is ineligible)
- Type of Electrical Systems: Please note: only eligible options are electric forced air, baseboard, heat pump, or gas is eligible in the Florida program.
- Supplemental Heating:
 - A surcharge applies if there is a Fireplace. Please let the insured know that an inspection will be done and if one is found during that review, a surcharge will be applied.

Type of Dwelling		~	 Construction Type 	Concrete	
Year Built	1990		 Square Footage 	4.446	
 Type of Electrical System 		~	 Year Electric System was Fully Updated 		
Primary Heat Severa		~			
Does the dwelling have a supplemental heating device?	○ Yes				

- Discounts:
 - <u>Gated Community?</u> If the insured lives in a Gated Community Select Yes this is a discount! – Instructions will be required to be given on the Producer summary page at the bottom. Instructions can be the gate code, or specifications such as Please call insured at 555-1212 before arrival as it is in a gated community. Or Please call insured at 555-1212 to schedule appt due to gated community.
 - Protection Device Discounts: Central Station Burglar Alarm, Central Station Fire Alarm and Automatic Sprinkler provide discounts.
 - <u>Wrought Iron Bars-on doors and or windows</u>: These must have a quick release lever to be eligible for the program.

 Is th AAI: AAI: 	e dwelling within 1000 feet of a fire hydrant? 5 Fire Protection Class e dwelling located in a gated community?	Yes O No P2, PROTECTED 2 O Yes O No		 Is the dwelling within 5 miles of Do you want to override the AAI Protection Class? 	a fire s S Fire	station? Yes	: O No : No
Plea	se select all applicable protection devices:						
	Wrought Iron Bars (on all doors and windows		Smoke Detectors			Automatic Sprink Bathrooms, Close	der System (In all areas except Attic. ets and Attached Structures)
	Deadbolts		Fire Extinguishers				
	Local Burglar Alarm (Non Reporting)		Local Fire Alarm (No	on Reporting)		Automatic Sprink and Bathrooms)	der System (In all areas except Attic
	Police Station Reporting Burglar Alarm		Fire Station Reportin	ng Fire Alarm			
\mathbb{C}	Central Station Burglar Alarm	C	Central Station Fire /	Alarm	\bigcirc	Automatic Sprink	(ler System (In all areas)

Hit Next after selecting discount options.

11. BASIC COVERAGES:

Property/Liability: Select desired coverage. The system calculates replacement cost – often it is not the same as the amount you are wanting which is why we ask for the RCE so it matches the value you are asking for. If a value is not valid – it will give you an error message.

Other Structures: If your other structures coverages are over 5%, you must select THE LINK TO THE RIGHT OF THE VALUE THAT SAYS EDIT/VIEW OTHER STRUCTURES – AND LIST YOUR STRUCTURES AND VALUES, THEN HIT SUBMIT AND RETURN.

Scheduled Other Structures				
	Description	Limit	Roof Type	Year Roo Last Full Updated
				~
		0		•

- > <u>Optional Coverages:</u> Select desired coverage. Hit Next.
 - There are 4 separate tabs: Property, Liability, Personal Property and Exclusions and Limitations. Please look through each tab.

12. EXCLUSIONS TO ADD WHEN QUOTING:

WATER LIMITATION ENDORSEMENT \$10,000	ANY RENTAL OR SEASONAL RISKS MUST BE LIMITED TO \$10,000 WATER LIMITATION. ANY RISK WITH A PRIOR WATER LOSS MUST BE LIMITED TO \$10,000 WATER LIMITATION
ANIMAL LIABILITY EXCLUSION	ANY RENTAL TYPE OF POLICY (SHORT OR ANNUAL)
ACCIDENTAL ENTRY OF WATER	ANY MANUFACTURED HOME RISK
EXCLUSION	FLAT ROOFS OVER THE AGE OF 10 YEARS, UNLESS UPDATED.
ACCIDENTAL ENTRY OF WATER	(THIS DOES NOT APPLY TO ATTACHED STRUCTURES)
EXCLUSION	SHINGLED ROOFS OVER THE AGE OF 18 YEARS OLD
	METAL ROOFS OVER THE AGE OF 40
	TILE ROOFS OVER THE AGE OF 25

Water E	Exclusior	1	If the risk is 1950 and older and plumbing has not been completely updated. If the risk has 2 water claims.
Property	Liability	Personal Property	Exclusions and Limitations
Swimmi	ng Pool or S	pa Exclusion	
Playset	Exclusion		
🗆 All Terra	in Vehicle Ex	clusion	
🗌 Animal I	Liability Exclu	usion	
Livestoo	k Exclusion		
Roof Exe	clusion		
Water E	xclusion		
🗸 Water L	imitation End	dorsement	
★ Limit			20,000
Acciden	ital Entry of V	Vater Exclusion	10,000
Theft Ex	clusion		20,000

13. Losses: Click RUN CLUE Report

sses							
Please en	ter any claims that oc	curred in the last 5 y	ears that were not ca	ptured by the CLUE R	eport.		
	Date of Loss 🛛 😑	Type of Loss 🛛 😑	Amount Paid 🔶	Loss Status 🛛 😑	Corrective Action Taken	Verification 😑	Source 😑
Clear							
	There are currently no losses.						
			Run CL	UE Report	Delete Add Edit/View		

- Verify any losses, if they are not of the insured's or for a different location, select the option Not Valid to edit Different Insured/Different Location.
- If they confirm the loss, please advise if loss has been repaired, and provide a signed statement from insured that all items from that loss have been repaired at time of binding. *Click Next.*
- 14. Additional Interests: Add Mortgagees/Finance Companies Etc.
 - Watch the address the database may not accept your address the first time, and you will have to retype it in the system 2-3 times.

Click Next.

Туре	 Additional Interest Name 	Mailing Address	🗧 Loan Number 👋 Bill to Party
		There are currently no Additional Interests.	
		There are currently no Additional Interests.	

- 15. Click Next, through Forms Preview, (If you need to view a copy of any form you can check them here and hit Print preview)
- 16. Click Next through Pricing to get to the Premium Summary page

PREMIUM SUMMARY PAGE

- 17. Select Application Summary at the bottom to provide to your insured a quote!
- 18. Remember, moving forward does not mean you are binding it is only to have us review the quote.

Quote Proposal	Application Summary
	Total Premium: \$824.15
EMPA Surcharge:	\$2.00
FSLSO Fee:	\$0.47
Surplus Lines Tax:	\$38.68
Carrier Fee:	\$75.00
Policy Fee:	\$75.00
xes and Fees	
Personal Property Replacement Cost	\$5.00

HOW TO COMPLETE REFERRAL – SUBMIT TO UNDERWRITING

- 1. If you are in the quote, then from the Application Summary screen, click the Next Button.
- 2. Producer Summary Screen:
 - > Fill out required information.
 - Broker Fee: If your agency charges a separate broker fee, you may input the fee on this screen. If there is no broker fee, say NO to the Broker Fee question.

Producer Summary	
Confirmations	
The producer certifies that the applicant has signed the FL Surplus Lines Disclosure and Acknowledgement.	⊛ Yes O No
FL Surplus Lines Disclosure and Acknowledgement	
The producer certifies that the applicant has signed the FL Restriction of Benefits Acknowledgement.	I Yes O No
FL restriction of Benefitis Acknowledgement	
Broker Fee	
Will a Broker Fee be charged to this policy?	⊛ Yes ○ No
Broker Fee Amount	25.00
Will the Broker Fee apply to renewals?	Yes O Me
 Does the producer certify that he or she complied with all statues and requirements relevant to charging a Broker Fee on New and/or Renewal business? 	Yes O No
Please Read to the Applicant(s):	
I understand that a Broker Fee will be charged for this policy.	
Does the applicant acknowledge and accept the Broker Fee Charge?	Yes O No No

Electronic Signatures: The initials here are electronic but are considered a signature of insured and agent. Click Next.

Please Read to the Applicant(s):			
I understand that this application is subject	to the declarations, conditions, exclusions, and oth	ner terms of the policy forms. Any person who knowingly and with intent 1	to defraud any insurance company or other person files an app h is a crime and subjects the person to criminal and civil penal
Applicant's Initials	FL	Last Four Digits of Applicant's SSN or TIN	1234
roduce r Ele ctronic Signature			
	er knowledge and belief that the applicant(s) sign	ature(s) is/are the personal signature(s) of the applicant(s). The producer	further certifies that the questions contained in this application
The producer certifies to the best of his or h	and the second start and the table second the strength of the second start second se	d correct to the best of the producer's knowledge	
The producer certifies to the best of his or h applicantiation lithat the responses of the a	oplicantis) contained in this application are true an	a concerto die best of the producer s knowledge.	
The producer certifies to the best of his or h an income what the responses of the ap Producer's Initials	julie	Last Four Digits of Producer's SSN	1234

 Application Inspection Order: PLEASE PROVIDE ANY SPECIAL INSTRUCTIONS FOR THE INSPECTOR. FOR EXAMPLE, ADDITIONAL POINTS OF CONTACT, CONTACT INFORMATION OF THE INSURED, GATE CODES, ETC FOR ANY RISK THAT HAS THE DISCOUNT GATED COMMUNITY. PLEASE LIMIT INSTRUCTIONS TO 225 CHARACTERS.

Application Inspection	ler	
Please provide any spec	istructions for the inspector. For example, additional points of contact, contact information of the insured, gate codes, etc. Please limit instruction	ins to 225 characters.
Special Instructions		

4. <u>Billing Information Screen:</u> *Choose PAYMENT OPTION. This MUST be selected and CAN ONLY BE CHANGED AFTER POLICY EFFECTIVE DATE.* HOWEVER, PLEASE NOTE INVOICES WILL NOT BE REGENERATED IF CHANGED AFTER BINDING. Once selected, hit Next 2 times.

 Billing Type 	Direct Bill	~
 Payment Plan 		~
Zero Down Payment	12 Pay	
Recurring Payment Ind	2 Pay 4 Pay	
Account Holder	Full Pay	

Payment Options: 2 pay, 4 pay (not quarterly), Monthly, or Full Pay. If a payment option is selected a chart will pop up, you may want to screenshot this chart for the insured as it is only available at the time your option is selected. It is important to know: These figures do not include the Invoice fees. \$10.00 per invoice. If the insured sets up auto draft at the time they make their first payment online it will reduce invoice fee to \$3.00 per invoice.

Payment Plan	1	4 Pa	y	~					
Due Date	Premium	State Surcharge	Surplus Lines Tax	Broker Fee	Policy Fee	Stamping Fee	Carrier Fee	Total Installment Amount	Remaining Balance
12/18/2023	\$117.75	\$2.00	\$35.12	\$0.00	\$125.00	\$0.43	\$115.00	\$395.30	\$395.30
03/01/2024	\$117.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$117.75	\$117.75
05/01/2024	\$117.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$117.75	\$117.75
08/01/2024	\$117.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$117.75	\$117.75

It is defaulted to Yes, for zero down payment. Please leave this option as YES. Policies are direct billed to the insured. Insured can make payment after policy is bound and the invoice

has been generated. Zero Down Payment O Yes O No

5. NOTES SECTION/TAB

During the referral process and also after the policy is bound, there is a Notes tab available for <u>Underwriters Only</u>. Notes left on this tab by the agents are not monitored. Payment information should NOT be left on this tab. See the last page for information on how to make a payment.

 <u>Referral Conditions / Producer Comments</u>: This will take you through policy notes and into the Referral Conditions page. You will have the ability to type in Producer Comments – please put your name, so I know who sent the referral, also type in any info that you need to tell us about the risk.

7. PRODUCER COMMENTS (IN APPLICATION) PROVIDE YOUR EMAIL/NAME:

If your agency has multiple agents sending quotes, please identify your quote by entering your agent email in the PRODUCER COMMENT SECTION of the KW system on your quote.

Refe	erral Conditions
Ι.	The following referral conditions exist on the transaction. All conditions must be referred and approved or modified before the producer Comments
	Replacement Cost Estimator vill be emailed to wholesale agent.

- 8. **COMPLETE REFERRAL BUTTON:** You MUST click this Button to submit to an Underwriter for Review. *If this Complete Referral button is NOT clicked, then the risk will not be submitted to underwriters and the quote will NOT be reviewed for approval.*
 - If you do not see this button, please send a screen shot to Julie or Laura so we may submit to the System administration for correction.

	Complete Referral	
Sample Policy 1		
04/28/2022	Expiration Date	04/28/2023
	Policy Term Premium	2,149.12

9. WHAT'S NEXT?

- An underwriter will review the quote for approval. A response will be provided with information on changes to the quote in coverages or premium, as well as instructions on how to bind the quote if that is desired.
- If for any reason you don't receive a response from an underwriter within a couple hours regarding the quote approval and what's required to bind, please email us and verify that it was received. When reasonably possible we respond quickly, and sometimes there are technical issues beyond our control.

BINDING AUTHORITY / INITIAL PAYMENT:

Agents do not have authority to bind, only quote. Clicking the "COMPLETE REFERRAL" button is what submits the quote to underwriters for review and binding if risk is acceptable. If the agency fails to click the COMPLETE REFERRAL button, then the quote is not submitted for review. DO NOT MAKE PAYMENT BEFORE POLICY IS BOUND BY THE KW UNDERWRITERS. See below for Binding Checklist.

If we have not received the email of all the required documents, this will delay the binding process and may affect the premium as the effective date will need to be updated, which in turn may create a lapse in prior insurance.

BINDING CHECKLIST AND DOCUMENTS

Go through the Checklist of Forms	When you "Complete the Referral", in the KW system, you will still be
PROVIDED TO YOU WITH QUOTE	required to email the signed forms after approval has been received by
APPROVAL EMAIL:	your office to <u>Tyoung@ibgreen.com</u> or <u>LOberry@ibgreen.com</u> for
	binding. Please have them ready and send on or before your effective
	date.
Wind Rejection Form	The wind rejection form is required for all policies – if there is a co-
Mandatory to be signed by all	applicant it must be signed by both insureds.
applicants	If there is a mortgagee on the policy, please provide this form and a copy
	of the insured's wind declaration. The insured must have wind coverage
	to satisfy the mortgagee requirements. In the lender states the loan
	does not require wind, please provide a copy of the lender statement.
Restriction of Benefits Form	Please complete this form as acknowledgment the policy is not
	assignable.
Surplus Lines Disclosure	Please fill out all lines of this form and be sure effective date matches
	that on the policy.
Statement of Diligent Effort	This must be signed by the producing agent that is the same initials that
	are entered in the system at the end of the quote.
The contact dates must be within 60	Authorized Insurers must be Admitted Insurance Companies, not brokers
days of the effective date.	or surplus line companies. All information on the DE must be filled in and
	completed.
Replacement Cost Estimator	This is provided to support your requested coverage amount. The RCE
	value must match or be within \$10K of your amount unless a range is
	provided that includes your replacement cost value.
Proof of MONITORED Burglary or Fire	If you are giving the discounts for Central Station Burglary Alarm, or
Alarms	Central Station Fire Alarm this means a discount will be provided for
	each alarm and a Certificate showing a current monitored date must be
	provided or discounts will need to be removed.
CLAIMS – CLUE REPORT	If the insured has any Claims on the Losses page, please have them sign
	a simple typed out statement stating That all repairs from the claim on
	(01/01/17) date, have been repaired and no damage remains.

CONTACTS

For questions about eligibility or the program in general, please contact Brian Tolomeo at ext 124 or via email at <u>btolomeo@ibgreen.com</u>.

DEPARTMENT	REPRESENTATIVE	EXTENSION	EMAIL
Personal Lines – KW Specialty	Laura	Ext. 139	loberry@ibgreen.com
Personal Lines – KW Specialty	Tyler	Ext. 143	tyoung@ibgreen.com
Personal Lines – KW Specialty	Julie	Ext. 105	inicholson@ibgreen.com

QUIRKS OF KW SPECIALTY SYSTEM

Due to the system being new there are some quirks that pop up that have been reported to the Company for correction. In the mean time we need to maneuver around the issues.

> **DATES:** Effective Date and Prior Expiration dates or Purchase Date.

 The system calculates lapse based on these two dates. If they match no lapse surcharge is internally configured. However, if the dates DO NOT MATCH EACH OTHER. This changes the premium to add a surcharge.

> <u>ADDRESSES</u>: Mailing, Location, and Lender Addresses

 The system database may change the address and force you re-enter the address including the street & City – 2 x before it accepts it. Watch for errors before you complete the quoting – 4-digit zip is not accepted in their system

SUITE #'S OR LOT #'S:

 List these on the 2nd line of any address as – the database may erase if placed on the first address line. Again, if this is duplicated when the address appears, please edit again to remove the duplication.

> <u>PROPERTY INFORMATION PAGE</u>: Location Address

- This is automatically filled in, but if you change the location address, it will require this to be verified it was updated or you will need to manual update on this page as well.
- All fields on this screen reset. You will not be able to continue without reviewing and providing information that was removed. Pay special attention to the Construction Type as it will change policy premiums.

CLUE REPORT:

- You will need to run the Clue report or Re-run it if the Location address is changed.
- If you are quoting a HO-6 please check with insured on any losses, then change all other losses to invalid/different address or invalid different insured.
- The system does show losses for the entire building on HO-6

BINDING PROCEDURE: To bind you must have received an approval email from the underwriters in response to your quote submission. If you did not, you will need to be sure you submitted your referral with the Complete Referral button in the KW system.

To Bind, please send Laura or Tyler an email requesting to bind with all the required binding documents from the checklist provided in the email referral review. If documents are incomplete or missing this will delay the binding effective date and may increase the premium.

DIRECT BILL AND PAY PLAN DETAILS

Overview

Direct bill capability combined with our convenient pay plans offered through KWiQ can provide a valuable competitive advantage when presenting quotes with KW Specialty. Before you bind coverage, please remember to:

- Select the requested pay plan in KWiQ.
- Verify appropriate bill-to party is selected if policy is paid with an escrow account.
- Verify mortgagee and insured mailing addresses are accurate.

Payment Plan Options

- Full Payment Includes 100% of premium plus all applicable up-front taxes and fees
 - Save up to \$100 in invoice fees with full payment, as compared to monthly payment
 - Avoid any potential late fees or coverage interruption with full payment
- <u>2 Payment</u> Split your premium due into two separate payments
 - First Payment 50% of policy premium plus all applicable up-front taxes and fees
 - Second Payment Remaining premium and applicable invoice fee (\$10 or \$3) will be due in month 5 of the policy term
- <u>4 Payment</u> Split your premium due into four separate payments
 - First Payment 25% of policy premium plus all applicable up-front taxes and fees
 - Subsequent payments 25% of policy premium and applicable invoice fee (\$10 or \$3) will be due in month 3, month 5, and month 8 of the policy term
- Monthly Payment Split your premium due into convenient monthly payments
 - First Payment 16.67% (2/12th) of total premium plus all applicable up-front taxes and fees
 - Ten remaining payments 1/12th of total premium and applicable invoice fee (\$10 or \$3) will be due beginning in month 2
- Visit <u>www.paykwspecialty.com</u> to make a one-time online payment or to enroll in recurring payments.
 Please note that online bill payment is first available one day after policy issuance.
- Call toll-free 855-CALL-KWS (855-225-5597) and select option 2 to make a payment over the phone.
- Up-front taxes and fees may include a policy fee, stamping fee, carrier fee and applicable surplus lines tax as indicated in KWiQ on the Premium Summary, Quote Proposal, or Application Summary.
- Invoice fees are \$10 if a paper invoice is generated, or \$3 if enrolled in recurring payments at www.paykwspecialty.com.
- If your retail producer has collected a down payment, it can be applied by visiting <u>www.paykwspecialty.com</u> and making a one-time payment without registering, with reference to the policy number. Please instruct your retail producer not to hold back policy fees or commissions and to apply the entire payment collected from the insured.

KW SPECIALTY POLICY LOOKUP

1. Log into www.quotekwiq.com

I (₩iQ _™	
PARTNER-CENTRIC, SUCCEEDING TOGET	HER™
New Search	Homeowners

2. Quick Search:

- > You may search by the insured's first and last name, and state of Florida.
- > OR move to the Legal Entity tab if it is an LLC, trust or entity name.
- > OR you may also search for a quote under Policy if it is not being found directly by name.

Individual	Legal Entity Policy
Search Type	Quick Search Advanced Search
 First Name State: 	Last Name
	New Quote Search Cancel

3. Advanced Search: Use if you do not know the quote # or cannot find it under insured's name. You can input a date range and search.

Individual	Legal Entity	Policy		
Search Type	Search Type O Quick Search Advanced Search			
Include:	O Quotes/Applicat	ions O Policies 🖲 Both	n Producer #	ALL 🗸
State: Effective Date	Range: 09/03	a V	Wholesale Agent #:	1009
	New Quote Search Cancel			

Now you will see a page with the agency's policies. To open a specific policy, double click on the little book in the left-hand column of the policy grid.

KW HOW TO LOOKUP IF PAYMENT RECEIVED

Policy Info
Transactions
Basic Information
Underwriting
Property Information
Basic Coverages
Optional Coverages
Losses
Additional Interests
Forms Preview
Pricing
Premium Summary
Producer Summary
Billing Information
Policy Notes
Referral Conditions
Document Management

Once you are in your policy. Go to the billing information page of your policy.

The billing page has two columns and they are sectioned off into Policy Totals, Last Payment information, Current Statement, and Next Statement.

Last payment information will show the date and amount of the last payment applied to the policy.

Billing Information			
Billing Policy Status:			
Policy Totals		Last Payment Information	
Amount Past Due	0.00	Payment Amount	1713.50
Total Paid Amount	1713.50	Payment Deposit Date	11/13/2023
Policy Balance	0.00	Payment Applied Date	11/13/2023
Current Statement		Next Statement	
Statement Date	11/13/2023	Statement Date	Nothing Due
Due Date	11/28/2023	Due Date	Nothing Due
Amount Due	0.00	Amount Due	0.00
Account Details			
 Billing Type 	Direct Bill 🗸		
 Payment Plan 	Full Pay 🗸		
Zero Down Payment	● Yes ○ No	Make Payment	
Recurring Payment Ind			

If the CURRENT STATEMENT section has an amount due, this means payment is due for this amount.

If the <u>policy has a payment plan</u>, the NEXT STATEMENT section will show when and what amount the next payment is due.