Personal Lines New Business Submission Guide

For Appointed Agents

CITIZENS
PROPERTY INSURANCE CORPORATION

Personal Lines New Business Submission Guide

Citizens Property Insurance Corporation 06.14.2024

New-Business Submission Guide

What	Creating a new-business submission for Personal Lines policy types
Who	Personal Lines agents
When	When a submission meets Citizens' eligibility requirements
Before you begin	This guide is intended as a submission overview. Additional questions may or may not display based on policy type and response.
Establishing Eligibility	Per Florida law, agents must establish eligibility prior to placing a policy with Citizens. Property owners are eligible for Personal Lines coverage in Citizens if they meet *one* of the following rules:

- **No-offer-of-coverage**: The applicant is unaware of any offer of coverage from any authorized insurer.
- **20% Rule:** The premium for all offers of coverage made by authorized insurers is more than 20% greater than the premium for comparable coverage from Citizens.
- **Personal Lines Non-Primary Residence** will not be eligible for coverage with Citizens if an offer of comparable coverage not more than 20% greater than Citizens' premium is made by an approved surplus lines insurer as part of its take-out plan.

The named insured and property to be insured meet all other applicable underwriting criteria.

Establishing eligibility will vary slightly by policy type:

Policy Type	Requirement
HO-3, HO-6, DP-3 Dwelling, and DP-1 Dwelling	Eligibility must be established through Clearinghouse powered by EZLynx comparative rater, with the *Detailed Quote Results* being submitted as proof of eligibility.
All other personal lines policy types	These policies will begin in PolicyCenter. A copy of the rate comparison or private carrier's quote and/or declination of coverage must be submitted with the application for these policy type.

For more details, refer to the *Personal Lines: New Business Eligibility Guide.*

New-Business Submission Guide, Continued

Establishing Eligibility, continued

Creating a Comparable Quote
A comparable quote must be created prior to a new-business submission when the policyholder has an offer from the private market. To be considered comparable, the following must match the private market offer:

- Coverage A limits
- Hurricane Deductibles
- Ordinance and Law Coverage percentage, if offered
- Mitigation Credits
- Loss Settlement (actual cash value or replacement cost)

Remaining coverages/characteristics should be the same in comparing quotes, but carrier options may not be an exact match, closest option available should be presented.
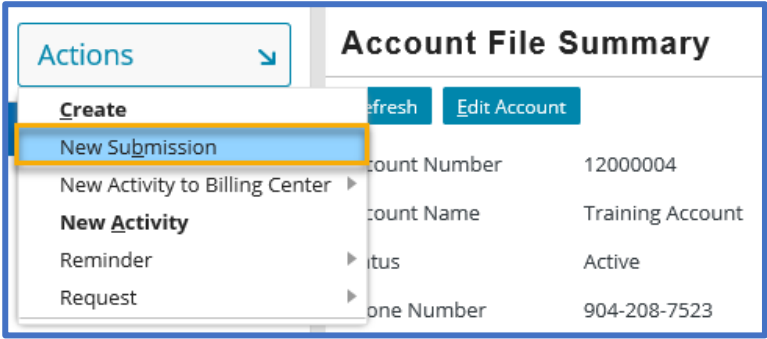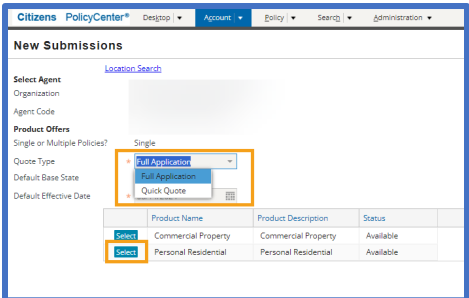
New-Business Submission Guide, Continued

Starting a New Submission

Steps to create a new submission will vary by policy type:

- **HO-3, HO-6, DP-3 Dwelling, and DP-1 Dwelling** will begin in EZLynx. Refer to the Citizens Clearinghouse Powered by EZLynx quoting demonstration video for step-by-step instructions on your EZLynx quote. Once your quote has been created in EZLynx, select **Access Quote** to bridge to PolicyCenter. Continue to Step 7 of this document.

- **All other personal lines policy types** will begin in PolicyCenter.

Step	Action
1	Create or access an account in PolicyCenter. *Note:* Refer to the *Accounts in PolicyCenter* job aid for more information about creating an account.
2	On the *Account File Summary* screen, select **Actions,** then **New Submission.** **Result:** The *New Submissions* screen appears. Select **Full Application** or **Quick Quote.** A Citizens quick quote matching the private-market offer is required if coverages on the offer are different than the final Citizens submission.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
Starting a New Submission in PolicyCenter, continued	3	<table><tr><td>**If you...**</td><td>**Then ...**</td></tr><tr><td>Created a quick quote</td><td>Convert the quick quote to a full application by selecting **Full App** from the *Premium Estimate* screen in your Quick Quote.</td></tr><tr><td>Did not create a quick quote</td><td>Select **Full Application** from the *Quote Type* dropdown menu of the *New Submissions* screen.</td></tr></table>
	4	On PolicyCenter submissions, the *Default Effective Date* displays the current date. Accept the date or select a future effective date by clicking the calendar icon. **New Submissions** Location Search **Select Agent** Organization ABC Florida Agent Code B1232 Bill X Agent **Product Offers** Single or Multiple Policies? Single Quote Type ★ Full Application Default Base State Florida Default Effective Date ★ 04/01/2019 Use Primary Account Location ★ Apr 2019 S M T W T F S 31 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 1 2 3 4 5 6 7 8 9 10 11 Today *Note:* Agents can submit a new-business submission 30 days in advance of the requested effective date.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
Starting a New Submission in PolicyCenter, continued	5	In the *Use Primary Account Location* field, select **Yes** to carry over the account address, or **No** to enter a separate address for the submission. *Note:* This field only displays when there is more than one submission on an account. If this is a new account, and no other submissions have been started on it, this will not appear on the screen.
	6	Select a line of business for the policy: **New Submissions** Location Search **Select Agent** Organization ABC Florida Agent Code B1232 Bill X Agent **Product Offers** Single or Multiple Policies? Single Quote Type * Full Application Default Base State Florida Default Effective Date * 04/01/2019 Use Primary Account Location * ○ Yes ⊙ No |	Product Name	Product Description	Status
Select	Commercial Property	Commercial Property	Available
Select	Personal Residential	Personal Residential	Available	 **Result**: *The Policy Type Questions screen appears.*

New-Business Submission Guide, Continued

	Step	Action
Policy Type Questions Screen	7	The *Policy Type Questions* screen displays a list of required questions. All questions must be answered to avoid validation errors. *Note:* **EZLynx submissions begin here.** If a quote was initiated in EZLynx, most answers will prefill from EZLynx into Policy Center. Complete the *Policy Type Questions* screen, then select **Next**: **Result:** The *Eligibility Questions* screen will appear.
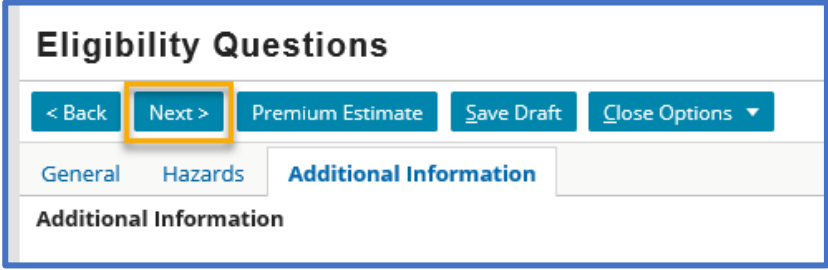
New-Business Submission Guide, Continued

Eligibility Questions Screen

The *Eligibility Questions* screen consists of three tabs: *General, Hazards* and *Additional Information*. Navigate between tabs by clicking on the blue hyperlinks:

Eligibility Questions

| < Back | Next > | Premium Estimate | Save Draft | Close Options ▼ |

| **General** | Hazards | Additional Information |

General
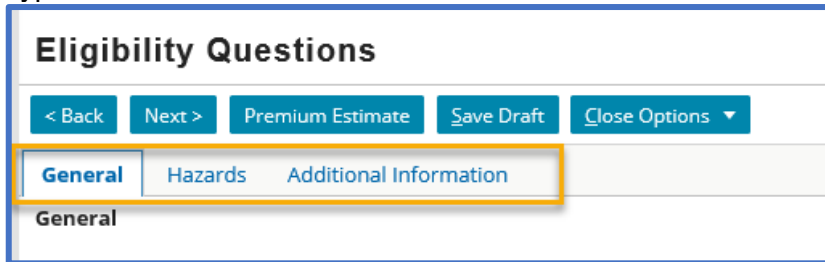
Step	Action
1	Complete the questions on each tab, then select **Next.** Based on input, additional questions may appear and/or additional documents may be required.

Eligibility Questions

| < Back | Next > | Premium Estimate | Save Draft | Close Options ▼ |

| General | Hazards | **Additional Information** |

Additional Information

Result: The *Policy Info* screen appears. |

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New-Business Submission Guide, Continued

Policy Info Screen

The information on the *Policy Info* screen prepopulates from the customer's account in PolicyCenter or EZLynx.
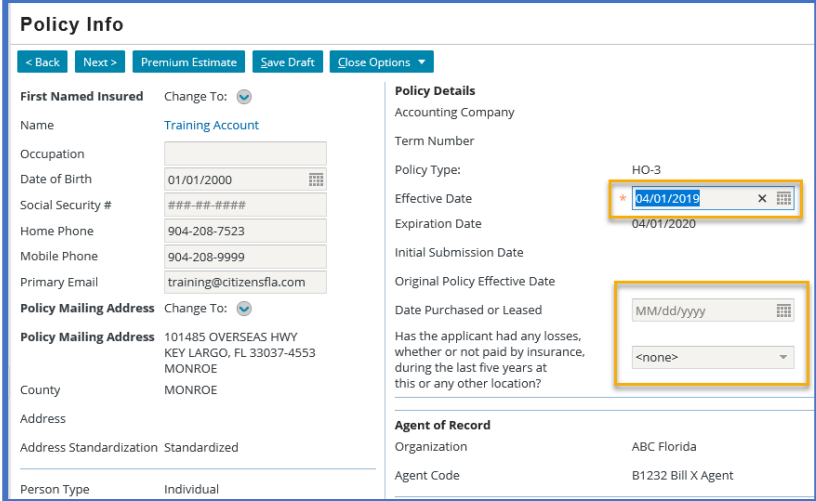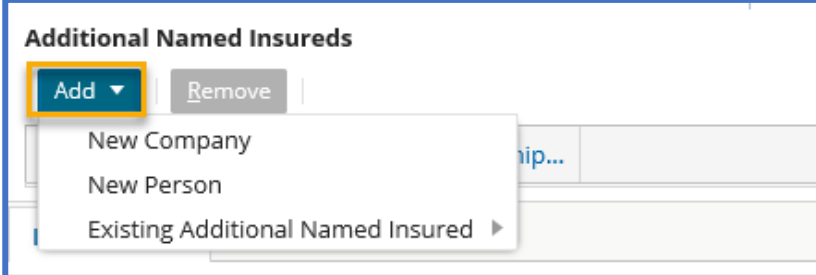
Step	Action
1	Review prepopulated information and edit, if necessary: **Policy Info** `< Back` `Next >` `Premium Estimate` `Save Draft` `Close Op` **First Named Insured** Change To: ⌄ Name Training Account Occupation Date of Birth 01/01/2000 Social Security # ###-##-#### Home Phone 904-208-7523 Mobile Phone 904-208-9999 Primary Email training@citizensfla.com **Policy Mailing Address** Change To: ⌄ **Policy Mailing Address** 101485 OVERSEAS HWY KEY LARGO, FL 33037-4553 MONROE County MONROE Address Address Standardization Standardized *Note:* Social Security or Taxpayer Identification numbers are required. To avoid generating excessive or incorrect loss history data: - Enter the correct legal name, date of birth, Social Security number/TIN and address - When adding an LLC, select New Company to ensure the format is correct.

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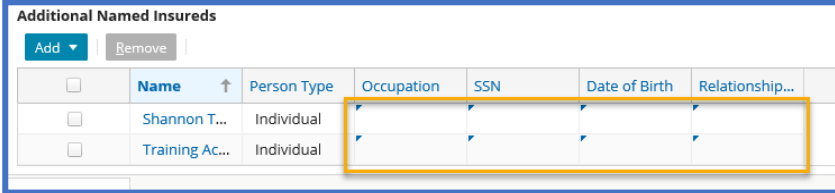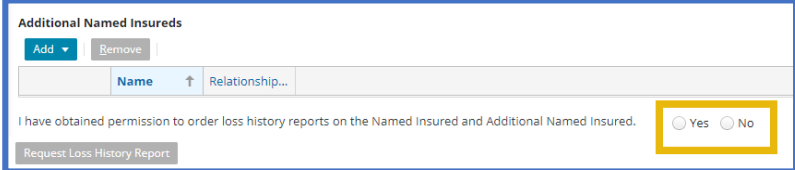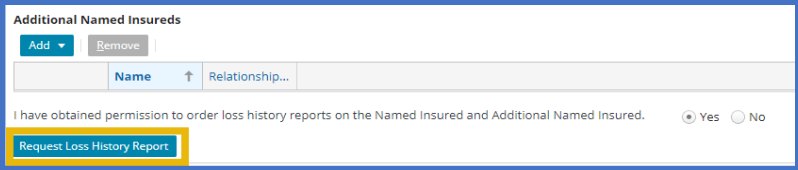
New-Business Submission Guide, Continued

	Step	Action
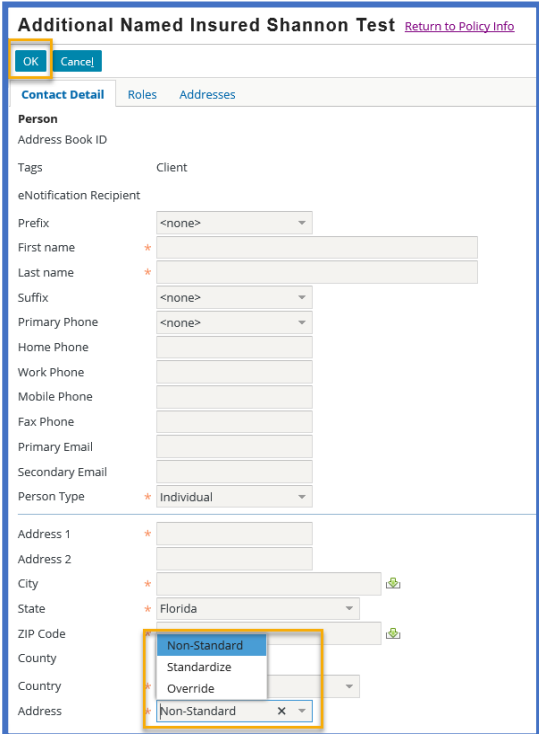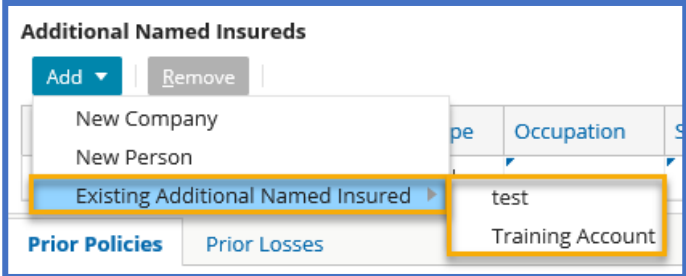
Policy Info **Screen**, continued	2	Complete the *Policy Details* section of the *Policy Info* screen. Enter the **Date Purchased or Leased,** then indicate, if applicable, if the applicant has reported any losses.
		
		Policy Info
		
		[< Back] [Next >] [Premium Estimate] [Save Draft] [Close Options ▼]
		
		First Named Insured Change To: ⊙ **Policy Details**
		Name Training Account Accounting Company
		Occupation Term Number
		Date of Birth 01/01/2000 Policy Type: HO-3
		Social Security # ###-##-#### Effective Date 04/01/2019
		Home Phone 904-208-7523 Expiration Date 04/01/2020
		Mobile Phone 904-208-9999 Initial Submission Date
		Primary Email training@citizensfla.com Original Policy Effective Date
		Policy Mailing Address Change To: ⊙ Date Purchased or Leased MM/dd/yyyy
		Policy Mailing Address 101485 OVERSEAS HWY Has the applicant had any losses,
		   KEY LARGO, FL 33037-4553 whether or not paid by insurance,
		   MONROE during the last five years at
		County MONROE this or any other location? <none>
		Address **Agent of Record**
		Address Standardization Standardized Organization ABC Florida
		Person Type Individual Agent Code B1232 Bill X Agent
		
		Note: The *Prior Losses* tab will appear if prior losses are indicated or if prior losses are returned on the automated loss history report, this field will update to "Yes."

	3	To add additional named insureds, select **Add**, then **New Company, New Person** or **Existing Additional Named Insured** in the *Additional Named Insured* section:
		
		Additional Named Insureds
		
		[Add ▼]
			[Remove]
			    New Company
			    New Person
			    Existing Additional Named Insured ▶
			
			Result: The *Additional Named Insured* screen appears.
			
			Note: To avoid generating excessive or incorrect automated loss history data:
			• Enter correct legal name, date of birth, Social Security number/TIN and address
			• When adding an LLC, select **New Company** to ensure the format is correct.

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New-Business Submission Guide, Continued

	Step	Action
Policy Info **Screen**, continued	4	If adding a new person or new company, complete all applicable fields on the *New Additional Named Insured* screen, select **Standardize** to conform the address to U.S. Postal Service standards, then select **OK** to continue:

If adding an existing additional named insured from the account contacts, select it from the drop-down list:

Result: The contact will be added to the *Additional Named Insured* list.

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New-Business Submission Guide, Continued
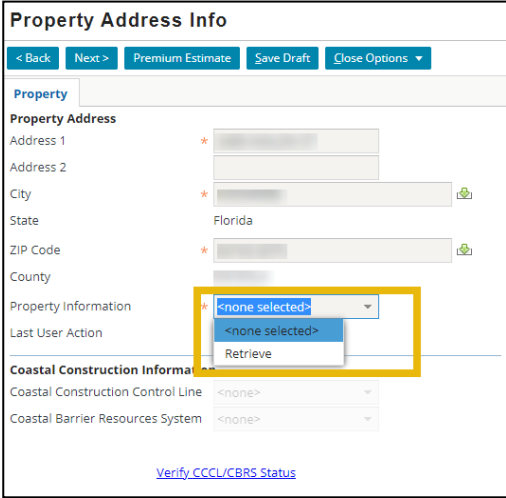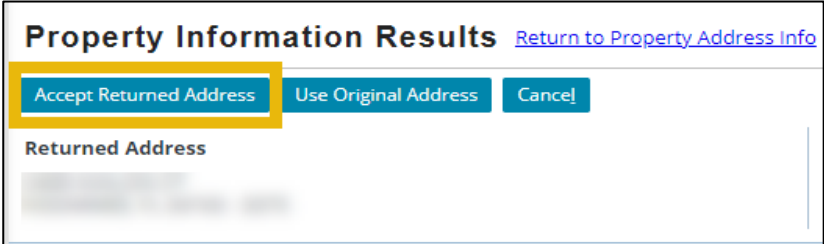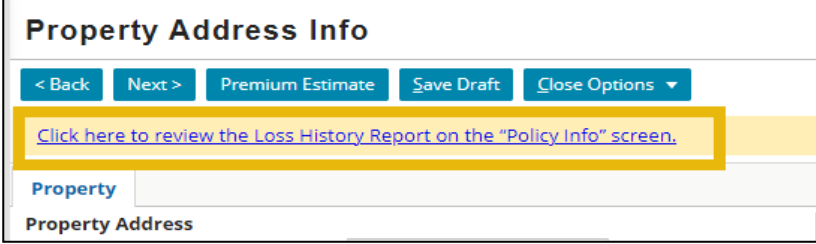
Step	Action
	Policy Info Screen, continued
5	Review the *Additional Named Insured* list. Blue triangles indicate required fields. Click in the box(es) to enter text.
6	*Important:* Permission from the applicant to obtain loss history must be obtained to proceed with the submission. If the applicant does not grant permission, the application cannot be submitted to Citizens. Indicate if you have obtained permission to order loss history reports on the named and additional named insured. **Result:** Once permission is obtained, the *Request Loss History Report* button will become active.
7	Select **Request Loss History.** *Result: The Property Address Info screen displays.* Select **Request Loss History.** **Result:** The *Property Address Info* screen displays.

New-Business Submission Guide, Continued

	Step	Action
Policy Info Screen, continued	8	**Retrieve** property information. **Result:** The *Property Information Results* screen displays.
	9	Select **Accept Returned Address.** **Result:** The *Property Address Info* screen displays. Loss history data is pulled. *Note: Use Original Address* should only be selected in rare circumstances. If you use the original address, contact Underwriting to discuss prior to submission.
	10	Return to the **Policy Info** screen by selecting the link. **Result:** The *Policy Info* screen displays.

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New-Business Submission Guide, Continued

Policy Info Screen, continued
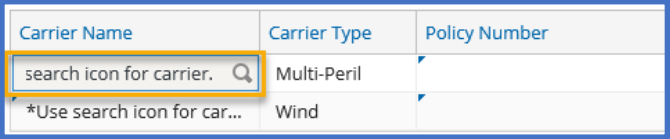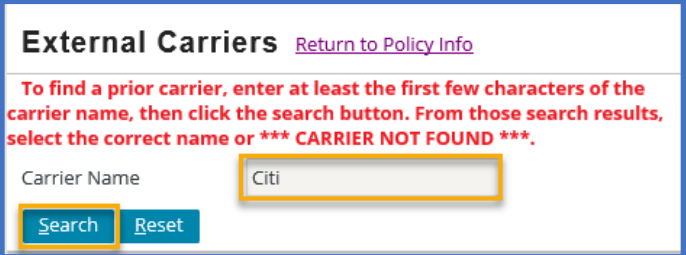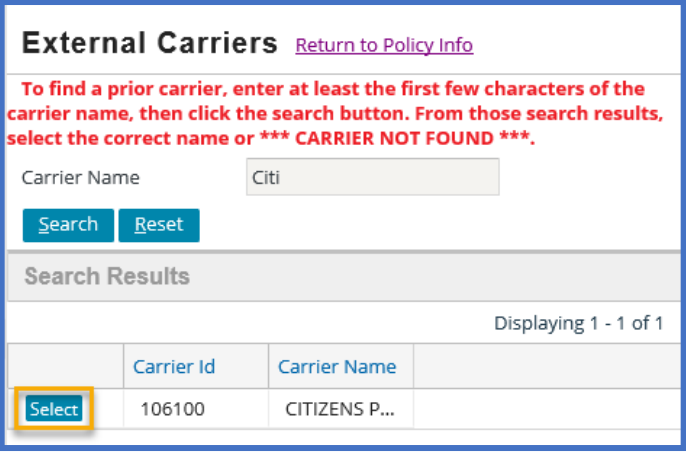
Step	Action
11	Select the **Loss History Report** tab to determine if any prior losses were generated by the automated process. The data on this report is for completing and verifying the accuracy of the *Prior Losses* section of the application.
12	If prior losses are returned on the *Loss History Report* tab, refer to the *Automated Loss History Data and Acceptable Proof of Repair Guide* for additional instructions.
13	Enter the required information in the *Prior Policies* section: **Result:** If prior coverage is indicated, enter prior carrier information. Fields in this chart become active:

New-Business Submission Guide, Continued

Policy Info
Screen,
continued

Step	Action
14	If there is prior coverage:

Step	Action
1	Click in the **Carrier Name** field to access the search feature: **Carrier Name** / **Carrier Type** / **Policy Number** search icon for carrier. 🔍 / Multi-Peril *Use search icon for car... / Wind **Result:** The *External Carriers* search page appears.
2	To find a carrier, enter at least the first few characters of the carrier name. Select **Search**: **External Carriers** Return to Policy Info To find a prior carrier, enter at least the first few characters of the carrier name, then click the search button. From those search results, select the correct name or *** CARRIER NOT FOUND ***. Carrier Name — Citi Search Reset **Result:** Search results are returned below.
3	Select the prior carrier: **External Carriers** Return to Policy Info To find a prior carrier, enter at least the first few characters of the carrier name, then click the search button. From those search results, select the correct name or *** CARRIER NOT FOUND ***. Carrier Name — Citi Search Reset **Search Results** Displaying 1 - 1 of 1 Carrier Id / Carrier Name Select / 106100 / CITIZENS P... **Result:** The *Policy Info* screen reappears.

New-Business Submission Guide, Continued

Property
Address Info
Screen

The *Property Address Info* screen displays important rating factors specific to the property address. Many of these factors will prefill when the property address is retrieved for the automated loss history report.

Note: These items prefill from EZLynx but may be updated based on *Property Information* results.

To complete the *Property Address Info* screen:
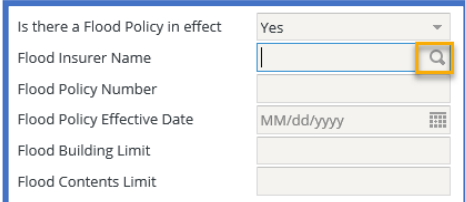
Step	Action
1	The *Property Information Results* will be prefilled. Complete any remaining fields in the *Property Information* section. **Property Information** Terrain * C Wind-Borne Debris Region In Coastal Territory 90 Territory 5 Protection Class 5 Distance from Fire Station (mi.) 3 Distance from Hydrant (ft.) Is risk within City Limits ○ Yes ○ No City, Town or Fire District KEY LARGO FD Fire Tax District 999 Police Tax District 999

New-Business Submission Guide, Continued
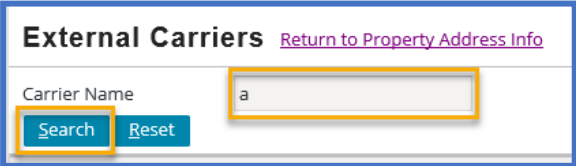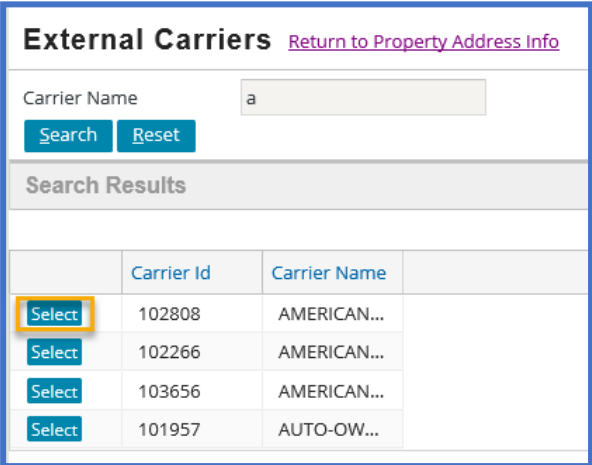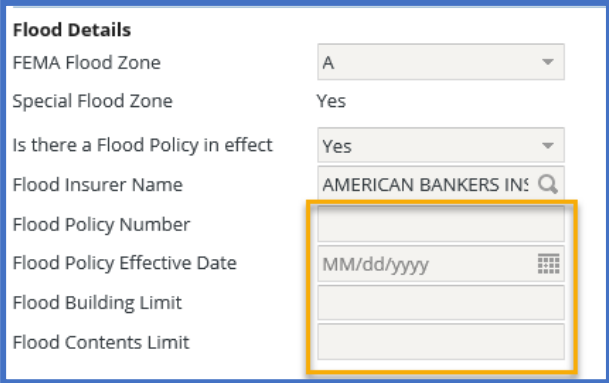
Property Address Info Screen, continued	**Step**	**Action**
	2	Some fields in the *Flood Details* section will be prefilled with retrieved property data, while others require a response. Refer to the Managing Flood Requirements guide for most current flood coverage requirements. Complete all active fields:

If ...	Then ...
No flood policy is in effect, and the property is not in a FEMA flood zone and Coverage A is not above the current year's threshold	Continue to Step 6.
No flood policy is in effect, however the retrieved property data incorrectly indicates the primary structure is in a FEMA flood zone.	Visit FEMA Flood Map Service Center to print the flood map. Amend the FEMA flood zone field to the correct flood zone. The FEMA flood map will be a required document.
If no flood policy is in effect, and the property is in a FEMA flood zone or Coverage A is above the current year's threshold	If the submission includes wind coverage, it is ineligible for Citizens unless a flood policy meeting current requirements is purchased.
If a new or active flood policy is indicated, enter flood policy information	Select the search icon to locate the flood insurance carrier. | Is there a Flood Policy in effect	Yes
Flood Insurer Name	
Flood Policy Number	
Flood Policy Effective Date	MM/dd/yyyy
Flood Building Limit	
Flood Contents Limit	| **Result:** The *External Carriers* screen appears. Continue to Step 3.

New-Business Submission Guide, Continued
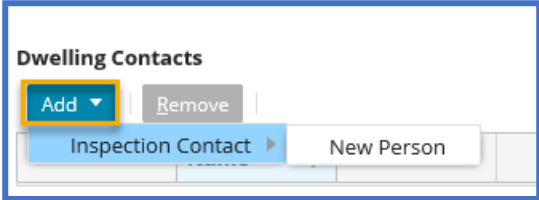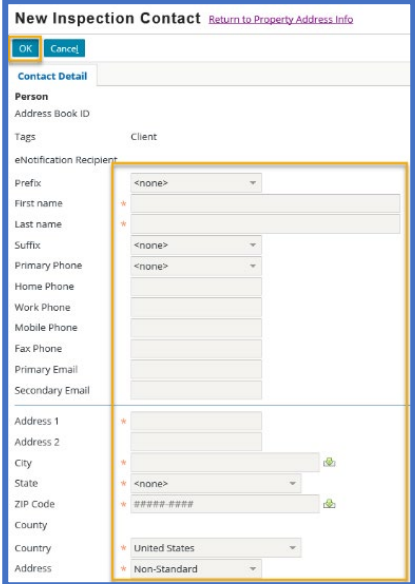
	Step	Action
Property Address Info Screen, continued	3	Enter all or part of the carrier name, then select **Search**. **External Carriers** Return to Property Address Info Carrier Name: a Search Reset **Result:** A list of carriers matching the search criteria appears.
	4	Select the correct carrier from the list. **External Carriers** Return to Property Address Info Carrier Name: a Search Reset **Search Results** 	Carrier Id	Carrier Name	 Select 102808 AMERICAN... Select 102266 AMERICAN... Select 103656 AMERICAN... Select 101957 AUTO-OW... **Result:** The *Property Address Info* screen appears. The *Flood Insurer Name* field is filled.
	5	Complete the remaining fields in the *Flood Details* section: **Flood Details** FEMA Flood Zone: A Special Flood Zone: Yes Is there a Flood Policy in effect: Yes Flood Insurer Name: AMERICAN BANKERS INS Flood Policy Number: Flood Policy Effective Date: MM/dd/yyyy Flood Building Limit: Flood Contents Limit:

New-Business Submission Guide, Continued

	Step	Action
Property Address Info Screen, continued	6	The *Dwelling Contacts* field is used to provide alternate contact information if the named insured is not available should Citizens need to perform an inspection. To add an alternate contact (other than the named insured), select **Add > Inspection Contact > New Person:** **Result:** The *New Inspection Contact* screen opens.
	7	Complete all applicable fields on the *New Inspection Contact* screen, then select **OK** to return to the *Property Address Info* screen. **Result:** The new inspection contact appears on the *Property Address Info* screen.
	8	Select **Next** to continue to the *Coverages* screen.

Continued on next page

New-Business Submission Guide, Continued

Coverages
Screen

Action taken on the *Coverages* screen will vary by policy type.

-
- **Submissions bridged from EZLynx:** Coverage and deductible amounts entered in EZLynx will bridge to PolicyCenter, however cost estimates are not available in EZLynx. The replacement cost estimator must be completed in PolicyCenter. Updates to prefilled coverage amounts may be required to meet Citizens' insurance to value requirements. Continue to Step 1.
- **Contents-Only submissions not bridged from EZLynx:** If the policy type does not require a replacement cost estimate, continue to Step 4.

Note: Refer to the *RCT Express Cost Estimator Guide* for more information about completing the RCT Express Cost Estimator.

If a replacement cost estimate is required:

Step	Action
1	Select **Calculate** in the *Coverages* tab: **Result:** the cost estimator opens.
2	Enter the required information and select **Calculate**. **Result:** The replacement cost displays.
3	Select **Edit** to amend the cost estimate or **Finish** to return to the *Coverages* screen: **Result:** After you're finished with the estimator, the cost estimate prepopulates the Coverage A field. Default values are displayed in the other *Property Coverages* fields.

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New-Business Submission Guide, Continued

	Step	Action
Coverages **Screen**, continued	4	If applicable, select an option in the **Alternate Reconstruction Cost Valuation Type**. Enter the replacement cost amount in the **Alternate Valuation - Replacement Cost Amount** field: Valuation **Cost Estimator** Calculate Emulate Estimated Replacement Cost 275,000 Alternate Reconstruction Cost Valuation Type * e2Value Alternate Valuation - Replacement Cost Amount Market Value (Excluding Land) Purchase Price
	5	Enter **Market Value (Excluding Land)** and **Purchase Price**: **Coverages** Valuation **Cost Estimator** Calculate Emulate Estimated Replacement Cost 275,000 Alternate Reconstruction Cost Valuation Type * None Alternate Valuation - Replacement Cost Amount Market Value (Excluding Land) Purchase Price *Note: Market Value (Excluding Land)* and *Purchase Price* are required fields. A validation error will block binding until these fields are completed. Continue to the *Property Coverages* section.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
Coverages **Screen**, continued	6	In the *Property Coverages* section, note that the *Coverage B* field defaults to *<none>*, while the *Coverage C* field will need to be completed. Select and/or enter acceptable coverage amounts for both fields based on Citizens' underwriting guidelines:

Property Coverages

Coverage A - Dwelling	* 275,000
Coverage A - Loss Settlement	Replacement Cost
Coverage B - Other Structures	* <none>
Coverage C - Personal Property	*
Coverage C - Loss Settlement	Actual Cash Value
Coverage D - Loss of Use	27,500

Note: The *Liability Coverages* section automatically defaults based on policy type:

Liability Coverages

Coverage E
Coverage E - Personal Liability	100,000

Coverage F
Coverage F - Medical Payments	2,000

	Step	Action
	7	Select applicable deductibles:

Deductibles

All Other Perils	* 1,000
Hurricane	* <none>
Sinkhole	N/A

Note: Refer to Citizens underwriting guidelines for acceptable coverage and deductible combinations.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
Coverages **Screen**, continued	8	Complete the *Other Coverages* section, then select **Next** to continue to the *Dwelling* page:
		Result: The *Dwelling* screen appears.

Continued on next page

New-Business Submission Guide, Continued

Dwelling Screen

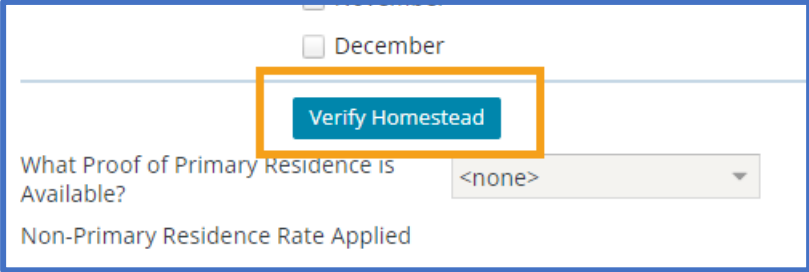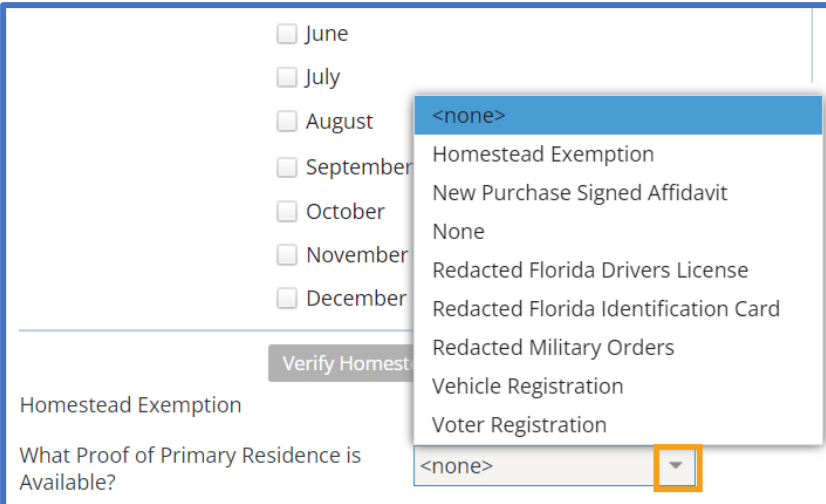The *Dwelling* screen contains two tabs: *Details* and *Additional Interests*. Both tabs must be completed.

Step	Action
1	Primary residence status will be determined by occupancy, use and months unoccupied. Complete occupancy and use information in the *Dwelling Details*.

Dwelling

< Back | Next > | Premium Estimate | Save Draft | Close Options ▼

Details | Additional Interests

Dwelling Details

Date Occupied	04/10/2024
Residence Type	<none>
Number of Families	<none>
Number of Roomers/Boarders	0
How is the dwelling occupied?	<none>
How is the dwelling customarily used?	<none>

Identify All Months Unoccupied

- ☑ None
- ☐ January
- ☐ February
- ☐ March
- ☐ April
- ☐ May
- ☐ June
- ☐ July
- ☐ August
- ☐ September
- ☐ October
- ☐ November
- ☐ December

Result:

If occupancy, use and months unoccupied indicate:	Then ...
Primary Residence	The **Verify Homestead** button will display. Continue to next step.
Nonprimary Residence	Continue to **Step 4.**

Note: Refer to the *Primary Residence Guide* for more information on Proof of Primary Residence.

New-Business Submission Guide, Continued

Dwelling Screen, continued
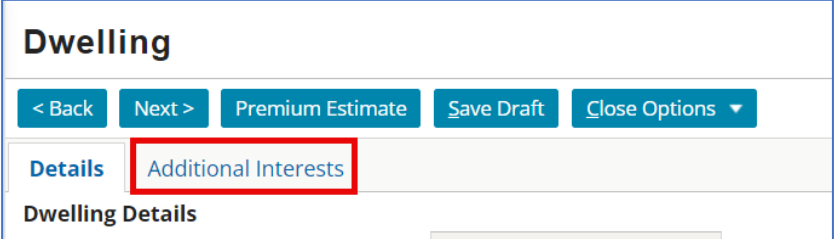
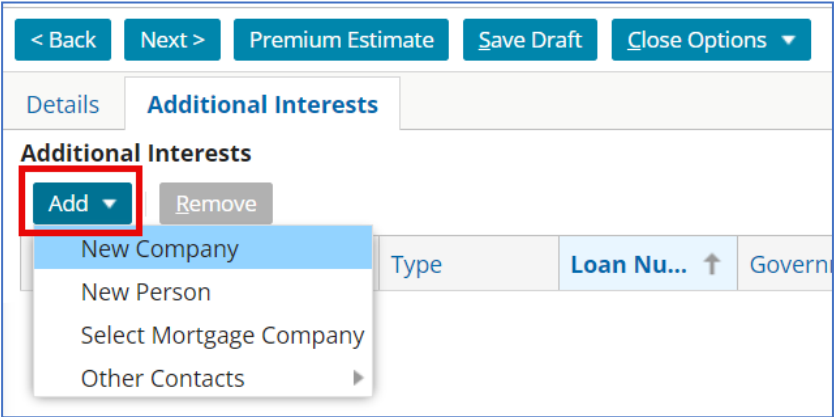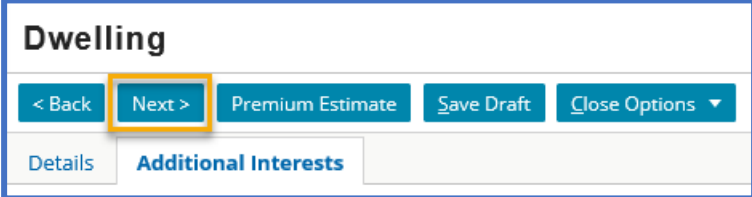| Step	Action
2	Select **Verify Homestead.** **Result:** <table><tr><td>**If automated homestead check is:**</td><td>**Then ...**</td></tr><tr><td>Is not verified</td><td>An error message will display. Proof of primary residence is required. Continue to **Step 3.**</td></tr><tr><td>Verified</td><td>Proof of primary residence will not be required. Continue to **Step 4.**</td></tr></table>
3	Indicate what proof of primary is available.

New-Business Submission Guide, Continued

Dwelling Screen, continued

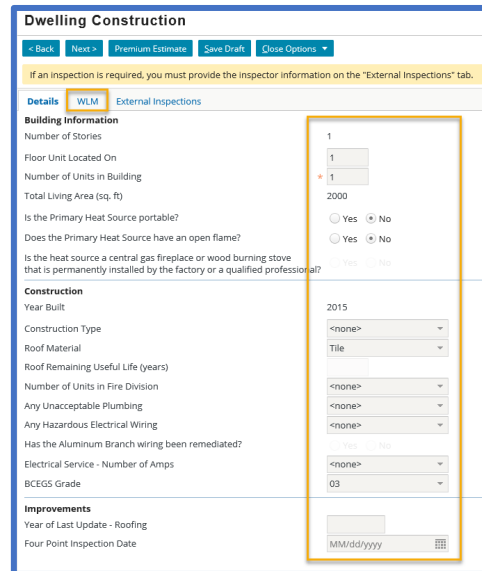| Step	Action
4	Complete the remaining field on the *Dwelling Details* tab, then select **Addtitional Interests.** **Dwelling** [< Back] [Next >] [Premium Estimate] [Save Draft] [Close Options ▼] **Details** Additional Interests **Dwelling Details**
5	Select **Add** to add additional interests, including mortgagee(s), a trust and a premium finance company (PFC) on the *Additional Interests* tab: [< Back] [Next >] [Premium Estimate] [Save Draft] [Close Options ▼] Details **Additional Interests** **Additional Interests** [Add ▼] [Remove] New Company New Person Type Loan Nu... ↑ Govern Select Mortgage Company Other Contacts ▶ *Note:* Refer to the following job aids when adding a mortgagee, PFC or trust: • *Adding or Updating a Payor to the Insured or a Third Party* • *Adding, Updating or Removing a Premium Finance Company as the Payor* • *Adding, Updating or Removing the Mortgagee or Payor Writing a Residence Held in Trust*
6	Select **Next** to continue to the *Dwelling Construction* screen: **Dwelling** [< Back] [Next >] [Premium Estimate] [Save Draft] [Close Options ▼] Details **Additional Interests**

Continued on next page

New-Business Submission Guide, Continued

Dwelling Construction Screen

The *Dwelling Construction* screen consists of three tabs that allow you to enter detailed information regarding the property: *Details, WLM* and *External Inspections.*

Note: If a cost estimate was completed, some fields may prepopulate with information from the estimator.

Step	Action
1	Complete the *Details* tab. Additional fields may appear based on the answers provided. Once complete, select the **WLM** tab. *Note:* Certain risks without acceptable proof of roof replacement must be submitted unbound for approval. Refer to the Citizens underwriting guidelines, Home Condition Requirements or Mobile Home Condition Requirements guide for dwelling construction requirements, eligibility and guidelines.

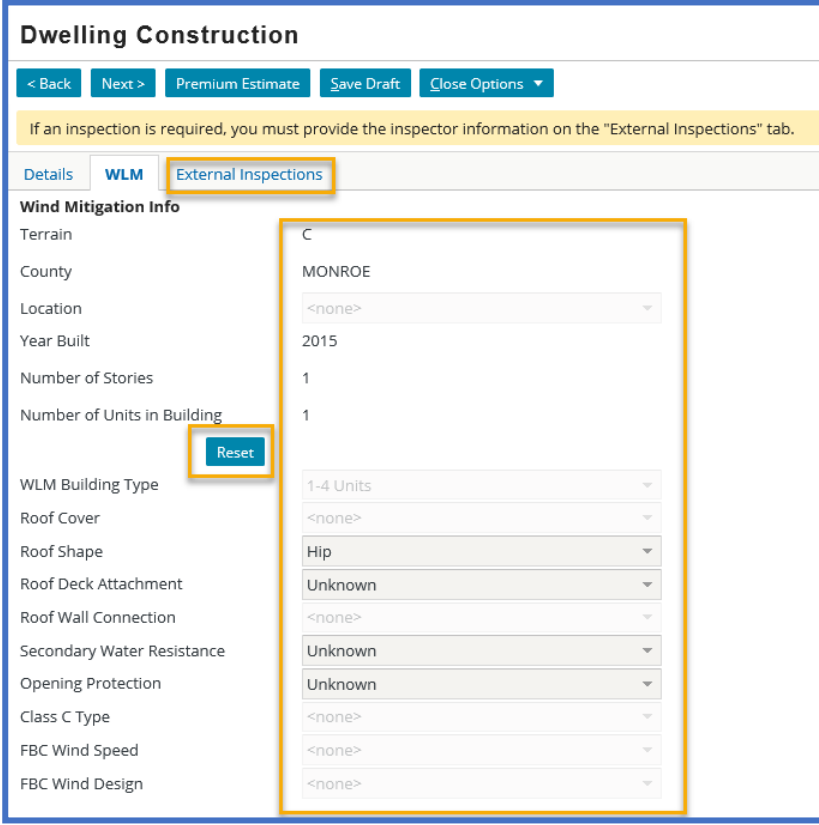| If you have ...	Then ...
Only a 4-Point inspection	Enter **Remaining Useful Life**. The application will be submitted unbound for underwriting review and approval.
Acceptable proof of roof replacement	Enter the year of roof replacement in **Year of Last Update – Year.** The application can be bound. Do not enter a value in the *Remaining Useful Life* field.
Important: If submitting a risk through EZLynx, the *Year of Last Update – Roof* will prefill with the date entered in EZLynx. Review this field carefully to confirm a completed roofing contract or roofing permit is available. If not, delete this field and submit unbound for approval.	

Continued on next page

New-Business Submission Guide, Continued

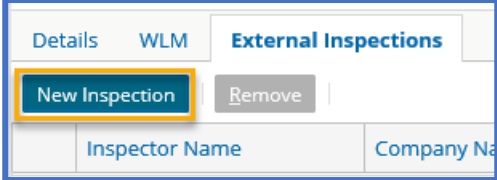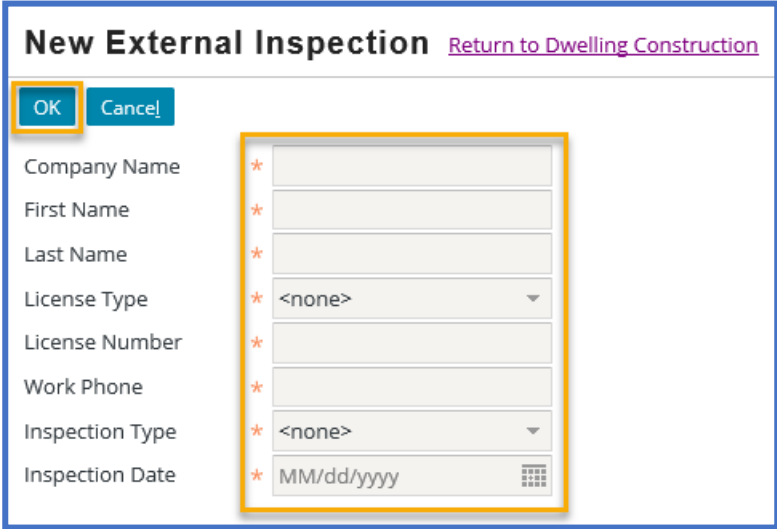|	Step	Action
***Dwelling Construction* Screen**, continued	2	If warranted, enter wind-loss mitigation (WLM) information on the *WLM* tab, then select **External Inspections** to continue.

Notes:

- These items prefill from EZLynx but can be edited.
- The *Reset* button clears all *WLM* fields to make changes. Once the data is removed, all WLM drop-down values must be re-entered.
- Refer to the following mitigation resources:
  - *Uniform Mitigation Verification Inspection Form (Annotated)*
  - *Uniform Mitigation Verification Inspection Form Tutorial*
  - *Wind Loss Mitigation Feature Options*

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New-Business Submission Guide, Continued

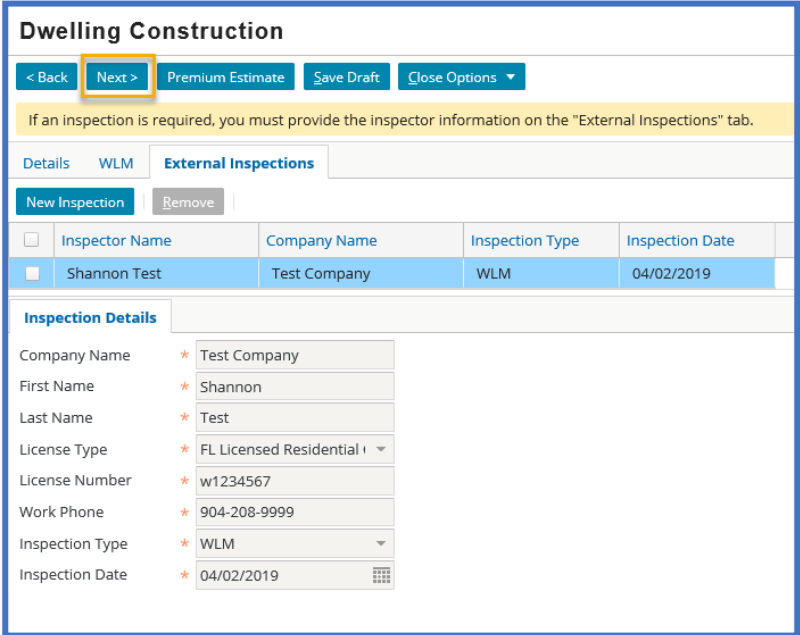|	Step	Action
***Dwelling Construction* Screen**, continued	3	If WLM features are entered, the inspector's information must be entered on the *External Inspections* tab. Select **New Inspection**: Details WLM **External Inspections** New Inspection Remove Inspector Name Company Na **Result:** The *New External Inspection* screen appears.
	4	Complete all required fields on the *New External Inspection* screen, then select **OK**: **New External Inspection** Return to Dwelling Construction OK Cancel Company Name * First Name * Last Name * License Type * <none> License Number * Work Phone * Inspection Type * <none> Inspection Date * MM/dd/yyyy **Result:** The inspector's information populates.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
***Dwelling Construction* Screen**, continued	5	Select **Next** to continue to the *Risk Analysis* screen: **Result:** The *Risk Analysis* screen appears.

Continued on next page

New-Business Submission Guide, Continued

Risk Analysis Screen

The *Risk Analysis* screen alerts you to any underwriting issues for this submission. If issues are returned, navigate to the applicable section and address the issues.

Select **Next** to continue to the *Policy Review* screen.

Risk Analysis

| < Back | Next > | Premium Estimate | Save Draft | Close Options ▼ |

UW Issues

No issues identified at this time.

| Approve | Reject | Reopen | History | View Issues Blocking * | Me ▼ |

Continued on next page

New-Business Submission Guide, Continued

Policy Review Screen

The *Policy Review* screen provides an overview of coverage and deductibles.

Step	Action
1	Review the information on the *Policy Review* screen for accuracy. If needed, navigate to the appropriate screen to make any necessary changes. Select **Premium Estimate** to check for errors and obtain a premium estimate.

Policy Review

< Back | Premium Estimate | Save Draft | Close Options ▼

First Named Insured	Training Account		Product	Personal Residential
Policy Mailing Address	101485 OVERSEAS HWY KEY LARGO, FL 33037-4553 MONROE		Effective Date	04/03/2019
County	MONROE		Expiration Date	04/03/2020
Address				
Address Standardization	Standardized			
Property Address	101485 OVERSEAS HWY KEY LARGO, FL 33037-4553			
County	MONROE			

Personal Residential Line - Policy Type HO-3

Description	Value	
PROPERTY COVERAGES	**VALUE**	
Coverage A - Dwelling	275,000	
Coverage B - Other Stru...	55,000 (20%)	
Coverage C - Personal P...	75,000 (27%)	
Coverage D - Loss of Use	27,500	
LIABILITY COVERAGES	**VALUE**	
Coverage E - Personal Li...	100,000	
Coverage F - Medical Pa...	2,000	
DEDUCTIBLES	**VALUE**	
All Other Perils	1,000	
Hurricane - Deductible...	5,500 (2%)	
Sinkhole - Deductible A...	N/A	
OTHER COVERAGES	**VALUE**	
Personal Property Repla...	No	
Sinkhole Loss Coverage	No	
Fungi (Mold) - Property	10,000	
Fungi (Mold) - Liability	50,000	
Ordinance Or Law - Am...	68,750 (25%)	
Loss Assessment Cover...	1,000	

Result: Any errors on the application will display in the *Validation Results* window at the bottom of the *Policy Review* screen. If there are no errors, the *Premium Estimate* screen will display.

New-Business Submission Guide, Continued

	Step	Action
Policy Review **Screen**, continued	2	Errors that require correction are indicated with a **red** exclamation point. Errors that can be bypassed are indicated with a **yellow** exclamation point. To correct an error, click on the underlined link to be returned to the page: **Validation Results** Validation Results Clear On "Policy Info": ⊗ Effective Date must be between 04/04/2019 and 05/04/2019. [US34.V14]. ⚠ Social Security Number has not been provided. [US34.V19]. **Result:** The selected page appears.
	3	The fields that require correction will appear in red. Click within the field to correct the information: **Policy Info** < Back Next > Premium Estimate Save Draft Close Options ▼ **First Named Insured** Change To: ⊙ **Policy Details** Name Training Account Accounting Company Coastal Occupation Term Number Date of Birth 01/01/2000 Policy Type: HO-3 Social Security # ###-##-#### ⊗ Effective Date ★ 04/03/2019 Home Phone 904-208-7523 Expiration Date 04/03/2020 Mobile Phone 904-208-9999 Initial Submission Date Primary Email training@citizensfla.com Original Policy Effective Date **Validation Results** Validation Results Clear On current page: ⚠ Social Security # : Social Security Number has not been provided. [US34.V19].

New-Business Submission Guide, Continued

Policy Review
Screen,
continued

Step	Action
4	Once all errors have been corrected, select **Premium Estimate**. **Result:** The *Premium Estimate* screen appears.

Premium Estimate Screen

The *Premium Estimate* screen provides estimated premium charges for the policy. The premium is subject to change pending Underwriting review. There are multiple options on the *Premium Estimate* screen:

Premium Estimate

< Back | Next > | Edit Transaction | Save Draft | Versions ▼ | Close Options ▼ | Request Approval | Print Options ▼

Select...	To ...
Edit Transaction	Make changes to the application, then re-estimate premium.
Save Draft	Save the application, which enables you to return later.
Versions	Create a different version of the application for coverage and premium comparison purposes.
Close Options	Withdraw the application.
Request Approval	To bind the application (if eligible) ***Important note****: Do not request approval until the billing and payment method is entered on the* Payment *screen.*
Print Options	Print the *Premium Estimate, Rating Worksheet* or *Application.*

Once you review the *Premium Estimate* screen, select **Next** to continue to the *Payment* screen.
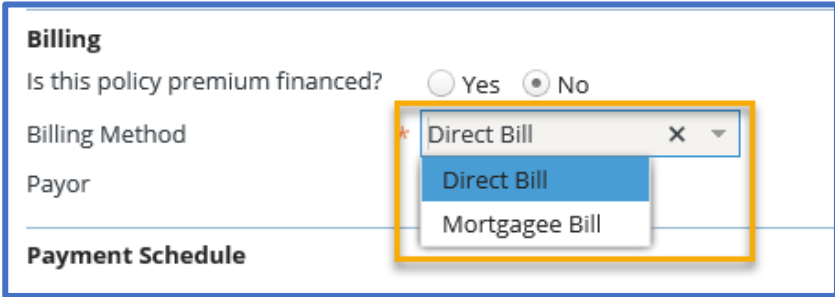
New-Business Submission Guide, Continued

Payment
Screen

From the *Payment* screen, view the *Premium Summary*, and select a billing method.

Note: It is very important to select a billing method before requesting approval. The billing method cannot be edited once you have clicked the *Request Approval* button.

To set the billing method, and if applicable, the payment plan:
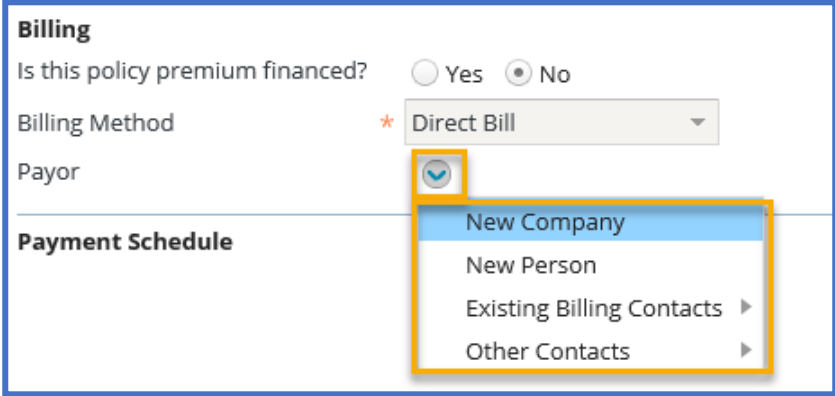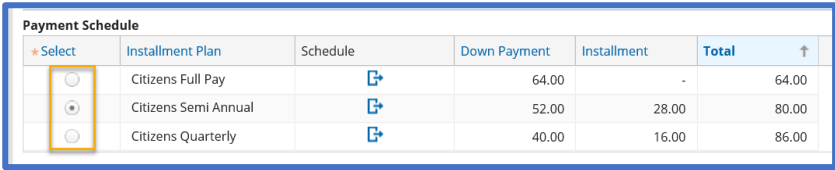
Step	Action
1	Indicate if the policy is premium financed: • If *Yes*, select **Premium Finance Company**. o Refer to the *Adding, Updating or Removing a Premium Finance Company as the Payor* job aid for more information on adding a PFC. • If *No*, continue to next step.
2	Select a **Billing Method**: **Billing** Is this policy premium financed? ○ Yes ⦿ No Billing Method Direct Bill ✕ ▾ Direct Bill Mortgagee Bill Payor **Payment Schedule** *Notes:* • **Direct Bill** should be selected when the payor is the applicant, premium finance company or third party. • When the policy is mortgagee billed, refer to the *Adding, Updating or Removing the Mortgagee or Payor* job aid.

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New-Business Submission Guide, Continued

Payment
Screen,
continued

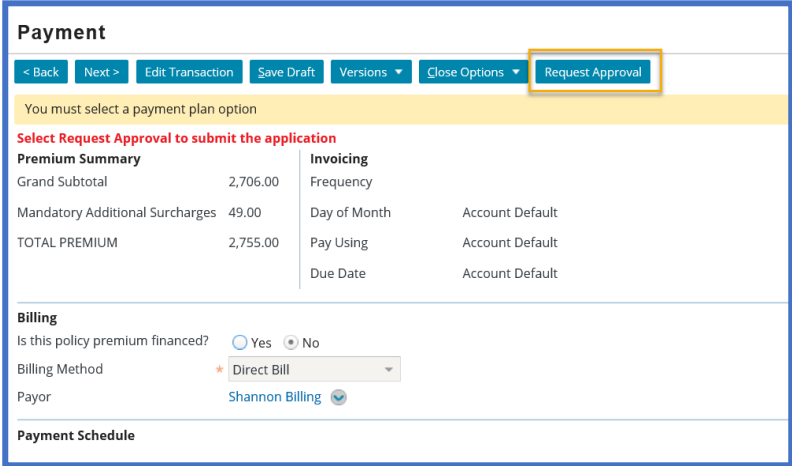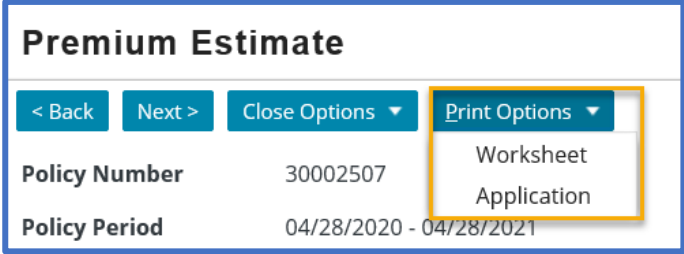| Step	Action
3	Add a payor from a list of previously entered contacts by clicking the highlighted arrow icon: **Billing** Is this policy premium financed? ◯ Yes ● No Billing Method * Direct Bill ▼ Payor ◌ New Company New Person Existing Billing Contacts ▶ Other Contacts ▶ **Payment Schedule**
4	If you select *Direct Bill*, our payment plans display: full pay, semiannual and quarterly. Choose the payment option: **Payment Schedule** 	*Select	Installment Plan	Schedule	Down Payment	Installment	Total ↑	 |---|---|---|---|---|---| 	◯	Citizens Full Pay	⤇	64.00	-	64.00	 	●	Citizens Semi Annual	⤇	52.00	28.00	80.00	 	◯	Citizens Quarterly	⤇	40.00	16.00	86.00	 *Note:* Direct-billed policies are eligible for electronic payments, made by the agent through PolicyCenter or the policyholder through myPolicy. • For PolicyCenter payments, refer to the *Making an Online Electronic Payment* job aid. • For myPolicy payments, refer to the *myPolicy* guide.

Continued on next page

New-Business Submission Guide, Continued

	Step	Action
Payment **Screen**, continued	5	Once the billing method and payment plan have been selected, select **Request Approval** (if eligible) to bind the application: **Payment** < Back | Next > | Edit Transaction | Save Draft | Versions ▼ | Close Options ▼ | **Request Approval** You must select a payment plan option **Select Request Approval to submit the application** **Premium Summary** Grand Subtotal 2,706.00 Mandatory Additional Surcharges 49.00 TOTAL PREMIUM 2,755.00 **Invoicing** Frequency Day of Month Account Default Pay Using Account Default Due Date Account Default **Billing** Is this policy premium financed? ○ Yes ⦿ No Billing Method * Direct Bill Payor Shannon Billing ⊙ **Payment Schedule** **Result:** The *Required Documents* screen will display.

	6	To print the bound application, return to the *Premium Estimate* screen and select **Print Options** then **Application**:
		
		Premium Estimate
		< Back | Next > | Close Options ▼ | **Print Options** ▼
		     Worksheet
		     Application
		Policy Number 30002507
		Policy Period 04/28/2020 - 04/28/2021
		
		Result: A .pdf will open. Print the application and obtain required signatures.

New-Business Submission Guide, Continued

Required
Documents
Screen

As you create a new submission, the *Required Documents* screen displays a dynamic list of documents you must upload.

When you have multiple items (for example, photos) for the same required document type, files can be combined in a PDF or multiple document types can be selected.

Important: PolicyCenter will not allow an application to be submitted to Underwriting for approval or auto-approved until all required documents have been submitted and the *SUBMIT* button has been selected. Failure to do so could result in a Late-Submission Violation.
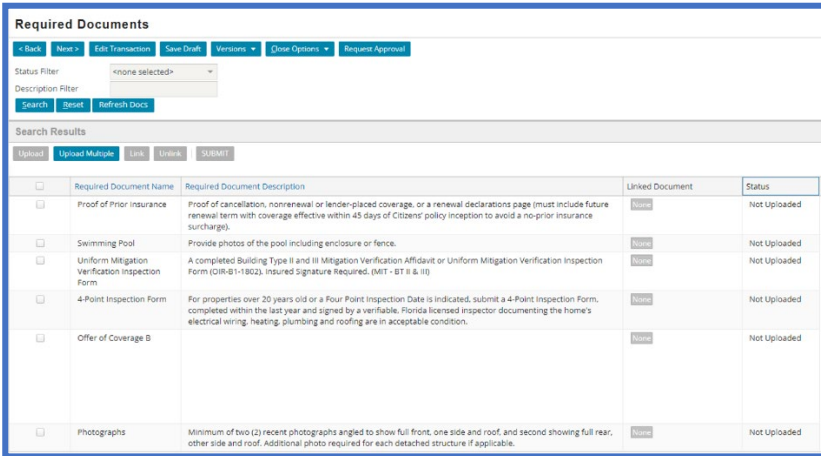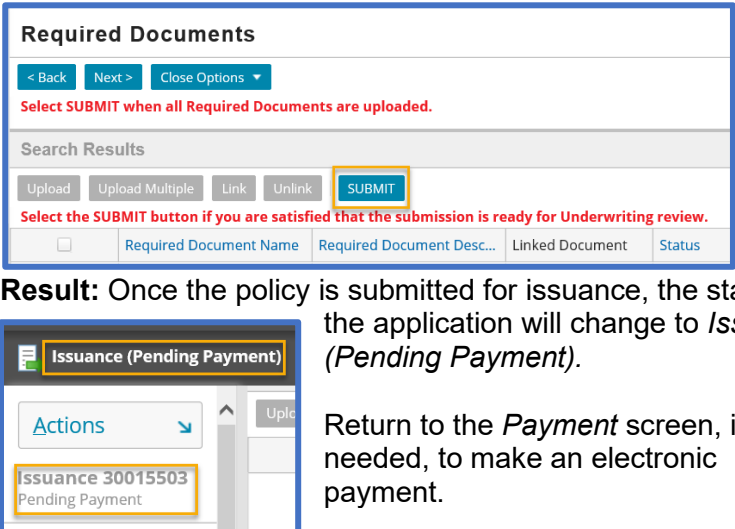
Refer to the *Uploading and Linking Documents* job aid for detailed instructions on document submission.

New-Business Submission Guide, Continued

Required Documents Screen, continued

Step	Action
1	Upload all required documents: **Result:** Once all documents are uploaded, the *Submit* option will become active. *Notes:* • Proof of repair for prior losses may be required. See the *Automated Loss History and Proof of Repair* guide for more information. • If quote was initiated in EZLynx, upload the EZLynx *Detailed Quote Results.*
2	Select **Submit** to submit the policy for issuance: **Result:** Once the policy is submitted for issuance, the status of the application will change to *Issuance (Pending Payment).* Return to the *Payment* screen, if needed, to make an electronic payment.

End