FLORIDA ADJUSTER LICENSING PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://floridaadjuster.examzify.com

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright 1

Table of Contents 2

Introduction 3

How to Use This Guide 4

Questions 5

Answers 8

Explanations 10

Next Steps 16

SAMPLE

Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

SAMPLE

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

SAMPLE

Questions

SAMPLE

1. What claim might Adam file after injuring himself in a dealership?

A. The dealership may file a first party claim with its own insurance.

B. Adam may file a first party claim with the dealership's insurance.

C. The dealership may file a third party claim with its insurance.

D. Adam may file a third party claim with the dealership's insurance.

2. Where in a Standard Fire Policy would you find the policyholder's obligations for coverage to apply?

A. Exclusions

B. Insuring Agreement

C. Conditions

D. Declarations

3. What type of information would you typically find in the Conditions section of an insurance policy?

A. The meaning of certain important words in the contract

B. Causes of loss that are not covered

C. Policy limits

D. The insured's duty after a loss

4. Which of the following statements regarding actual cash value is FALSE?

A. Actual cash value is always most beneficial to a policyholder.

B. Actual cash value includes the depreciation on an item.

C. A replacement cost valuation will generally be more than the ACV valuation.

D. The actual cash value generally reflects the market value of an item.

5. Where in an insurance policy might you find "Damage to insured property must be reported within 15 days of the damaging occurrence"?

A. Exclusions

B. Definitions

C. Conditions

D. Declarations Page

SAMPLE

6. How much coverage does Sherrie have available for the damage to her fence with a typical HO-3 policy?

A. $22,500.

B. $150,000.

C. $1,500.

D. $15,000.

7. Which policy coverage helps Frank cover costs associated with temporary repairs of her oven?

A. Expediting Expenses

B. Oven Repair and Operations

C. Automatic Coverage

D. Supplementary Payment

8. If Ernie has a BOP with a Selected Per Occurrence limit of $300,000, what would be his Completed Operations and General Aggregate limits?

A. Completed Operations: $1,000,000; General Aggregate: $1,000,000

B. Completed Operations: $1,200,000; General Aggregate: $2,000,000

C. Completed Operations: $600,000; General Aggregate: $600,000

D. Completed Operations: $300,000; General Aggregate: $500,000

9. In the case of condominiums, what shared responsibility exists?

A. the condo association is wholly responsible for insuring units.

B. the unit owner is only responsible for insuring personal property.

C. the unit owner and condo association share responsibility for insuring the property.

D. the unit owner is responsible for insuring the whole condo unit, inside and out.

10. Which of the following conditions is frequently included in Mechanical Breakdown Insurance policies?

A. Subrogation

B. Third party claims

C. Agency authority

D. Agreed valuation

SAMPLE

Answers

SAMPLE

1. D
2. C
3. D
4. A
5. C
6. D
7. A
8. C
9. C
10. A

SAMPLE

Explanations

SAMPLE

1. What claim might Adam file after injuring himself in a dealership?

A. The dealership may file a first party claim with its own insurance.

B. Adam may file a first party claim with the dealership's insurance.

C. The dealership may file a third party claim with its insurance.

D. Adam may file a third party claim with the dealership's insurance.

When Adam injures himself while at a dealership, he typically seeks compensation for his injuries resulting from an accident that occurred on the dealership's premises. In this context, filing a third-party claim is appropriate because Adam is a separate individual, not a direct party to the dealership's insurance policy, and he is claiming compensation from the dealership's insurer due to their potential liability for his injuries. A third-party claim allows an injured party to seek damages from the insurance provider of the party responsible for the injury. In this case, Adam would argue that the dealership may be liable for his accident (for example, due to negligence in maintaining a safe environment). Therefore, he would file a claim against the dealership's insurance, seeking compensation for medical expenses, lost wages, and other damages stemming from his injury. This reflects the nature of liability insurance, which is designed to protect businesses against claims arising from injuries and damages that their operations may cause to others. If Adam can demonstrate that the dealership was negligent, he could successfully pursue this type of claim against their insurance provider.

2. Where in a Standard Fire Policy would you find the policyholder's obligations for coverage to apply?

A. Exclusions

B. Insuring Agreement

C. Conditions

D. Declarations

The policyholder's obligations for coverage to apply are typically outlined in the Conditions section of a Standard Fire Policy. This section specifies the duties and responsibilities of the insured, which are essential for ensuring that the coverage remains valid. These obligations may include requirements such as promptly reporting any losses, preserving property after a loss, providing proof of loss, and allowing the insurer access to inspect the property or investigate the claim. Meeting these obligations is crucial for the policyholder to benefit from the coverage provided under the policy. While the other sections, such as Exclusions, Insuring Agreement, and Declarations, contain important information about what is covered, under what circumstances, and the basic details of the policy, it is the Conditions that explicitly state the actions required of the policyholder. This distinction makes the Conditions section integral to compliance and the functioning of the insurance contract.

SAMPLE

3. What type of information would you typically find in the Conditions section of an insurance policy?

A. The meaning of certain important words in the contract

B. Causes of loss that are not covered

C. Policy limits

D. The insured's duty after a loss

The Conditions section of an insurance policy outlines the duties and responsibilities of the insured and the insurer. It includes various obligations that the policyholder must adhere to for coverage to be valid. One key aspect typically found in this section is the insured's duties after a loss occurs, which may include notifying the insurer, protecting the property from further damage, and cooperating with the insurer during the investigation and settlement process. This information is critical to ensuring that both parties understand their roles in the claims process and what is expected of the insured to maintain coverage. By defining these specific obligations, the Conditions section helps prevent misunderstandings and potential disputes that could arise if the insured does not fulfill these duties. Overall, the Conditions section serves to clarify operational aspects of the policy, ensuring that both the insurer and the insured are on the same page regarding their responsibilities following an incident that leads to a claim.

4. Which of the following statements regarding actual cash value is FALSE?

A. Actual cash value is always most beneficial to a policyholder.

B. Actual cash value includes the depreciation on an item.

C. A replacement cost valuation will generally be more than the ACV valuation.

D. The actual cash value generally reflects the market value of an item.

Actual cash value (ACV) is defined as the replacement cost of an item minus depreciation. In this context, the statement that ACV is always most beneficial to a policyholder is indeed false. While ACV does provide some value to the policyholder by acknowledging the depreciation of the item, it often results in a lower payout compared to other valuation methods, such as replacement cost coverage. Replacement cost does not take depreciation into account, which tends to favor the policyholder more in terms of potential recovery in the event of a loss. The other statements illustrate key aspects of ACV. Understanding that ACV includes depreciation highlights how it can result in lower recoveries for policyholders. Furthermore, recognizing that a replacement cost valuation generally exceeds ACV reinforces the idea that ACV is not always in the best interest of the policyholder. Finally, the assertion that ACV typically reflects the market value of an item encapsulates a common perspective on how value is assessed in an insurance context. Thus, the understanding of actual cash value indicates that it may not always offer the most favorable outcomes for policyholders, aligning with the notion that the first statement is indeed false.

SAMPLE

5. Where in an insurance policy might you find "Damage to insured property must be reported within 15 days of the damaging occurrence"?

A. Exclusions

B. Definitions

C. Conditions

D. Declarations Page

In an insurance policy, the statement "Damage to insured property must be reported within 15 days of the damaging occurrence" would be found in the Conditions section. This part of the policy outlines the obligations and responsibilities of the policyholder, including how and when claims must be reported to the insurer. The provision emphasizes the requirement for timely reporting, which is crucial for facilitating the claims process and ensuring the insurer can promptly investigate and assess the loss. The Conditions section typically includes various other requirements for compliance, such as how to file a claim, the documentation needed, and the timeframe for notifying the insurer of incidents or damages. Adhering to these conditions is essential for the policyholder to maintain coverage and ensure that claims are processed properly without any potential denials based on failures to follow these guidelines.

6. How much coverage does Sherrie have available for the damage to her fence with a typical HO-3 policy?

A. $22,500.

B. $150,000.

C. $1,500.

D. $15,000.

Under a typical HO-3 policy, which is a standard homeowners insurance policy, the coverage for damage to fences falls under the category of "Other Structures" coverage. This coverage generally provides compensation for structures that are not attached to the main dwelling, such as fences, sheds, and detached garages. The coverage amount for Other Structures is typically a percentage of the dwelling coverage. Many policies provide 10% of the Coverage A amount (the dwelling coverage). For example, if the dwelling is insured for $150,000, the Other Structures coverage would be $15,000 (10% of $150,000). In this case, if Sherrie's coverage aligns with the standard percentages, the amount available to her for damage to her fence is $15,000. This figure makes sense in the context of how these policies are structured, thus supporting D as the correct option.

7. Which policy coverage helps Frank cover costs associated with temporary repairs of her oven?

A. Expediting Expenses

B. Oven Repair and Operations

C. Automatic Coverage

D. Supplementary Payment

The correct choice is the coverage labeled as Expediting Expenses because it specifically addresses the costs incurred for temporary repairs or measures taken to prevent further damage after an incident. This type of coverage is designed to facilitate immediate responses to mitigate losses in the aftermath of a covered event, ensuring that the insured can manage the situation effectively without incurring prohibitive out-of-pocket expenses for temporary solutions. While other options may suggest different coverages, they do not inherently focus on temporary repairs in the way that Expediting Expenses does. For instance, the other options may include different types of assistance or coverages that don't directly pertain to the cost of necessary temporary repairs associated with appliances like an oven. Thus, Expediting Expenses is the best fit for Frank's scenario, as it provides specific funding for urgent, short-term repair actions.

SAMPLE

8. If Ernie has a BOP with a Selected Per Occurrence limit of $300,000, what would be his Completed Operations and General Aggregate limits?

A. Completed Operations: $1,000,000; General Aggregate: $1,000,000

B. Completed Operations: $1,200,000; General Aggregate: $2,000,000

C. Completed Operations: $600,000; General Aggregate: $600,000

D. Completed Operations: $300,000; General Aggregate: $500,000

The correct answer indicates that the Completed Operations and General Aggregate limits are both $600,000 in the context of a Businessowners Policy (BOP) with a Selected Per Occurrence limit of $300,000. In a BOP, there are specific arrangements regarding the relationship between the per occurrence limits and the aggregate limits. Typically, the Completed Operations limit is constructed to provide coverage for liabilities that may arise after the operation's completion. This is particularly relevant for businesses involved in services or construction. In many cases, the Completed Operations limit will match the per occurrence limit or be a defined multiple of it, thus justifying the $600,000 value here. As for the General Aggregate limit, it serves as a cap on the total payment for all occurrences over a policy period and can also be formulated based on the per occurrence limit but is generally higher than that limit to accommodate multiple instances of claims throughout the policy term. Therefore, for a BOP with the specified per occurrence limit, it's common to find that both the Completed Operations limit and the General Aggregate limit are set to equal amounts, as indicated by the answer.

9. In the case of condominiums, what shared responsibility exists?

A. the condo association is wholly responsible for insuring units.

B. the unit owner is only responsible for insuring personal property.

C. the unit owner and condo association share responsibility for insuring the property.

D. the unit owner is responsible for insuring the whole condo unit, inside and out.

In the context of condominiums, shared responsibility for insurance is an essential concept to understand. The correct answer highlights the dual role of both the unit owner and the condominium association in ensuring comprehensive coverage for the property. In most condominium agreements, the association typically carries a master policy that insures the building's common areas and possibly the structure itself. However, this policy usually does not extend to individual units, which is where the unit owner's responsibility comes into play. Unit owners are generally responsible for insuring their personal property within their units and may also need to cover improvements or upgrades they've made to their space. This shared responsibility means that while the condo association provides insurance for communal aspects and structural integrity, unit owners must secure their coverage to protect their investments and belongings. This collaborative approach ensures a more complete insurance strategy for the entire condominium complex, safeguarding both individual interests and the collective property. Understanding this balance helps ensure that all parties maintain adequate coverage, which is critical in property management and risk mitigation within condominium communities.

SAMPLE

10. Which of the following conditions is frequently included in Mechanical Breakdown Insurance policies?

A. Subrogation

B. Third party claims

C. Agency authority

D. Agreed valuation

Subrogation is a common condition included in Mechanical Breakdown Insurance policies because it allows the insurer to pursue recovery from a third party responsible for the insured loss after they have compensated the policyholder. This means that if a mechanical breakdown or malfunction is caused by another party's negligence, the insurance company can step into the shoes of the policyholder to recover costs from that third party. This principle helps keep insurance premiums lower since it enables insurers to recoup losses, maintaining the overall financial health of the insurance pool. In the context of Mechanical Breakdown Insurance, which specifically covers the repairs of mechanical failures rather than damage from accidents or wear and tear, subrogation plays a vital role in ensuring that the costs associated with covered repairs do not unduly impact the insurer's ability to fulfill claims to other policyholders. While other options may also relate to the insurance industry, they are not standard conditions specifically linked to Mechanical Breakdown Insurance policies. For instance, third-party claims typically pertain to liability coverage rather than mechanical breakdowns, agency authority often pertains to the relationship between agents and insurers, and agreed valuation clauses are more relevant in property insurance for determining value at the time of a claim.

SAMPLE

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

https://floridaadjuster.examzify.com

We wish you the very best on your exam journey. You've got this!

SAMPLE