

## Homeowners Quote Detail

<b>Applicant(s):</b>		<b>Quote Number:</b>
<b>Date Quoted:</b>	February 11, 2020	<b>Effective Date:</b> 02/18/2020
<b>Agency Name:</b>	0440104 - The Essex Agency, Inc.	<b>Expiration Date:</b> 02/18/2021
<b>Agent Name:</b>	Mason Graddock	<b>Term:</b> 12 months
<b>Billing Type:</b>	Direct Bill	<b>Multiple Policy Discount - Auto:</b> No
<b>Payment Frequency:</b>	Full Term	<b>Multiple Policy Discount - Life:</b> No
<b>Issuing Company:</b>	Patriot Insurance Company	

### Disclaimers

- Premium is subject to detail and accuracy of data provided.
- This is a quotation only, does not bind any coverages, and is subject to Underwriting review.
- This quotation is subject to change based on MVR and Loss information.
- Coverages and premiums are subject to change based on Company issuance of the policy.
- Optional coverage limits replace policy level limits where applicable.

### Location Information

<b>Street Address:</b>		
<b>City/State:</b>		
<b>Rating Zip Code:</b>	05482-6378	<b>All Perils Deductible:</b> \$1,000
<b>Form:</b>	Condominium Form HO-0006	<b>Protection Class:</b> 6
<b>Responding Fire Protection Area:</b> SHELBURNE		
<b>Construction Year:</b>	1985	<b>Construction Type:</b> Frame
<b>Secondary Residence - Liability:</b>	No	
<b>Unique Construction:</b>	No	
<b>Island Residence:</b>	No	<b>Total Solid Fuel Heating Appliances:</b> 0
<b>Number of Families:</b>	1	<b>Rating Tier:</b> Superior

### Basic Coverages

Coverage:	Limit:	Premium:
A. Dwelling	\$25,000	
C. Personal Property	\$80,000	\$75.00
D. Loss of Use	\$32,000	
E. Personal Liability	\$500,000 Each Occurrence	
F. Medical Payments to Others	\$5,000 Each Person	\$27.00
<b>Basic Premium:</b>		\$102.00

### Policy Level

Condominium Form HO-0006 includes, but is not limited to, the following coverages:

Coverage:	Limit:
Debris Removal	

Fire Department Service Charges	\$500
Loss Assessment Coverage on residence premises	\$1,000
Personal Property Special Limits of Liability	
Business Property on premises	\$2,500
Business Property off-premises	\$250
Electronic Apparatus in vehicle	\$1,000
Electronic Apparatus not in vehicle	\$1,000
Firearms	\$2,000
Jewelry, Watches, and Furs	\$1,000
Money	\$200
Securities	\$1,000
Silverware, Goldware, and Pewterware	\$2,500
Trailers not used with watercraft	\$1,000
Watercraft (including their trailers, furnishings, equipment and outboard motors)	\$1,000
Removal of Fallen Trees (if tree(s) damaged a covered structure)	\$500
Trees, Shrubs, & Other Plants (up to 10% of Coverage C, not exceeding \$500 for any one item)	

### **Coverages and Premiums**

<b>Optional Coverage:</b>	<b>Limit:</b>	<b>Deductible:</b>	<b>Premium:</b>
Value Package Plus (16099)			\$37.00
– Personal Property - Special Coverage Added			
– Personal Property - Replacement Cost Added and Limit of Liability Increased from 50% of A to 70% of A (for Form HO-0003)			
– Personal Property - Increased Special Limits of Liability			
– Money increased by	\$500		
– Securities increased by	\$5,000		
– Jewelry (\$2,500 per article) increased by	\$9,000		
– Firearms increased by	\$2,000		
– Silverware (\$2,500 per article) increased by	\$6,500		
– Electronic Apparatus increased by	\$500		
– Grave Markers Added	\$5,000		
– Other Structures - limit for Coverage B may be added to Coverage A limit			
– Water Back Up and Sump Overflow	\$5,000		
– Refrigerated Foods	\$1,000	\$50	
– Lock Replacement	\$500	50%	
– Police Service Charge (\$75 per occurrence)	\$300		
– Ambulance Service Call (\$75 per occurrence)	\$300		
– Fire Extinguisher Refills	\$150		
– Incidental Business Activities of Minors - \$250 Section I Added and Section II Coverage Added			
– Ordinance or Law - 10% of Coverage A Added			
– Mortgage Extra	\$3,000		
– Sinkhole/Mudslide/Landslide - Section I Peril Added			
– Loss Assessment - Section I (\$1,000) and Section II (\$1,000) Coverages Added			
– Nursing Home - Section I Extended and Section II Coverages Added			
– Grave Stones/Markers - \$5,000 Section I Coverage Added			
– Personal Injury - Section II Coverage Added			
– Waterbed Liability - Section II Coverage Added			
– Policy Deductible - for Non-Participatory Break-Ins		Waived	
– Claims Expenses - Increased (\$25 per day)			
Additional Coverage A Amount			\$19.00
Identity Fraud Expense Coverage (PM0455)			\$32.00
Loss Assessment for Residence Premises (HO-0435)	\$50,000		\$20.00
Water Back Up and Sump Overflow (HO-0495)	\$5,000		\$83.00
<b>Total Optional Premium:</b>			<b>\$191.00</b>

### **Adjustments to Basic Premium includes:**

Insurance Score -Level J  
Loss History Discount  
Protective Device Discount

**Total Homeowners Policy Premium:**

**\$293.00**



**Applicant:** Andrew Berry

**Quote Number:** 5138370

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## Estimated Payment Installments

### Billing Information Selected

**Line of Business:**

Homeowners

**Billing Type:**

Direct Bill

**Payment Frequency:**

Full Term

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Based on the quoted premium of \$293.00, below are the recommended down payments and estimated Direct Bill installment options available assuming the recommended down payment is collected. Based on the payment frequency selected, the total premium may vary. The payment option selected is displayed in bold.

### Full Term

**Recommended Total Down Payment:** \$293.00

**No Installments apply to this payment frequency.**

### Semi-Annual

**Recommended Total Down Payment:** \$150.50

\$150.50 x 1 installment = \$150.50 - EFT

\$155.50 x 1 installment = \$155.50 - Direct Bill or Continuous Credit Card - includes \$5.00 fee for each installment

### Quarterly

**Recommended Total Down Payment:** \$76.25

\$76.25 x 3 installment = \$228.75 - EFT

\$81.25 x 3 installment = \$243.75 - Direct Bill or Continuous Credit Card - includes \$5.00 fee for each installment

### Monthly

**Recommended Total Down Payment:** \$78.00

\$26.00 x 9 installment = \$234.00 - EFT

**Important Notice regarding the Fair Credit Reporting Act**

In connection with this quote, an Insurance Score was ordered and used to establish a possible premium adjustment reflected in the quoted premium. The Fair Credit Reporting Act (FCRA), 15 U.S.C. Sect. 1681 et seq., requires notification to the consumer regarding use of the consumer report.

Within 60 days of this notification, you are entitled to request a free copy of your credit report supplied to us from the consumer reporting agency listed below:

LexisNexis Consumer Disclosure  
P.O. Box 105108  
Atlanta, GA 30348-5108  
(800) 456-6004  
[www.consumerdisclosure.com](http://www.consumerdisclosure.com)

Report Reference Number: 20042141207351

Once you have obtained a copy of the credit report you may dispute any errors found directly with LexisNexis. If you successfully dispute any errors found in your report, you may request, through your agent, recalculation of your Insurance Score. The quoted premium will be adjusted accordingly. LexisNexis does not determine your quoted premium and is unable to provide you with specific reasons as to how your Insurance Score was calculated.