|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *This quote summary provides information for a Homeowners insurance policy prepared for you by the agent shown below. This quote does not constitute an insurance policy, and this quote can only be made into a policy by the agent listed below.* | | | | | | | | | | | | | | | | | | | |
| **Quote Number:** | | | |  | | | | **Company providing quote** | | | | | Lloyd’s of London | | | | | | | |
| **Quote is provided for a policy effective:** | | | |  | | | | **Quote provided on:** | | | | |  | | | | | | | |
| **Quote Prospect Information**  Name:  Address:  County:  DOB:  SS# | | | | | | | | **Agent Information**  Any questions about this quote should be directed to the agent above. | | | | | | | | | | | | |
| **Premises Information** | | | | | | | | | | | | | | | | | | | |
| **Protection Class** | |  | | | | | **Type of Construction** | | | | | | | | | |  | | |
| **Year Built** | |  | | | | | **Crawl Space/Slab** | | | | | | | | | |  | | |
| **Number of Floors** |  | **Sqft** | | |  | | **Central or Local Alarm** | | |  | | | | **Burglar or Fire** | | |  | | |
|  | | | | | | |  | | | | | | | | | | | | |
| **Total Annual Premium** | | | | | | | | | **Payment Options (w/fees)** | | | | | | | | | | |
|  | | | | | | | | | **Plans** | | **Down Pay** | | | | **# Payments** | | | **Installment Amounts** | |
| Paid In Full | |  | | | |  | | |  | |
|  | |  | | | |  | | |  | |
|  | |  | | | |  | | |  | |
| **Summary of Premium** | | | | | | | | | **Summary of Fees** | | | | | | | | | | |
| **Description** | | | **Coverage** | | | **Amount** | | |  | | | | | | | | | | |
| Coverage A | | |  | | |  | | | Policy Fee \* | | | | | | | | | |  |
| Coverage B | | |  | | |  | | | EFT Fee \* | | | | | | | | | |  |
| Coverage C | | |  | | |  | | | Installment Payment Fee \* | | | | | | | | | |  |
| Coverage D | | |  | | |  | | | Surplus Lines Tax | | | | | | | | | |  |
| Coverage E | | |  | | |  | | |  | | | | | | | | | |  |
| Coverage F | | |  | | |  | | |  | | | | | | | | | |  |
|  | | |  | | |  | | |  | | | | | | | | | | |
|  | | |  | | |  | | | *\* policy fees are paid in full and non-refundable* | | | | | | | | | | |
| Additional Residence | | |  | | |  | | | *\*\* A Late Payment Fee of $10.00 will be charged where applicable A Nonsufficient Fund Fee of $20.00 will be charged where applicable* | | | | | | | | | | |
| Additional Residence - Rented | | |  | | |  | | |
| Replacement Cost – Contents | | |  | | |  | | |
| Replacement Cost – Home | | |  | | |  | | |  | | | | | | | | | | |
| Water Back-Up | | |  | | |  | | |  | | | | | | | | | | |
| Identity Theft | | |  | | |  | | | **Total Annual Amount** | | | | | | | | | |  |
| All Other Perils Deductible | | |  | | |  | | |  | | | | | | | | | | |
| Wind Deductible | | |  | | |  | | | **Prior Losses** | | | | | | | | | | |
|  | | |  | | |  | | | Date of Loss | | | Amount Paid | | | | Cause of Loss | | | |
|  | | |  | | |  | | |  | | |  | | | |  | | | |
|  | | |  | | |  | | |  | | |  | | | |  | | | |
| ***Notes:***  ***Quote subject to 1) Completed Signed Application 2) a Written Request to Bind 3) Photos of the Property 4) Signed Form F 4) Insurance Score***  ***Unless surplus lines taxes are shown above, the sub-broker is the S/L Broker responsible for the collection and payment of all surplus lines taxes and fees. No Flat cancellations are permitted and a 25% minimum earned premium requirement will be applied to any policy/binder issued as a result of the quotation. If the listed items are not received within 14 days this binder will be considered null and void form it inception and no policy will issue.*** | | | | | | | | | | | | | | | | | | | |