

**AMERICAN NATIONAL PROPERTY AND CASUALTY CO**



1949 E. SUNSHINE  
 SPRINGFIELD, MISSOURI 65899-0001  
 (417) 887-0220  
 www.AmericanNational.com

POLICY NUMBER  
**22-A-66744E-3**  
 POLICY TERM  
**03-20-2021 TO 09-20-2021**  
 AND SUBSEQUENT RENEWALS.

THIS FAMILY AUTOMOBILE AMENDED DECLARATION REPLACES ALL PRIOR DECLARATIONS, IF ANY, AND WITH POLICY PROVISIONS AND ANY ENDORSEMENTS ISSUED TO FORM A PART THEREOF COMPLETES THIS POLICY.

METHOD OF PAYMENT: EASY PAY PLAN - 000377316

**NAMED INSURED AND ADDRESS**

POMROY, WILLIAM & LISA  
 11412 GALTIER PL  
 BURNSVILLE MN 55337-1017

CHANGE EFFECTIVE: 05-01-2021  
 ORIGIN: Agent  
 CHANGES: VEH, COV, LIEN

RATING ADDRESS:  
 11412 GALTIER PL  
 BURNSVILLE MN 55337-1017

AGENT: D8740-P 1-083  
 HAUGEN AGENCY LTD  
 14093 COMMERCE AVE NE  
 PRIOR LAKE MN 55372-1495

FOR CUSTOMER SERVICE:  
 952-440-8200

**DESCRIPTION OF INSURED PROPERTY**

RATED		DESCRIPTION	ID NUMBER	TYPE
VEH	DR			
1	2	2021 CHR PACIFICA HYBR	2C4RC1R77MR548917	AUTO
2	1	2010 FOR ESCAPE LIMITE	1FMCU9EG2AKD11328	AUTO

**RATING INFORMATION, COVERAGES, PREMIUMS, AND LIMITS OF LIABILITY**

INSURANCE IS PROVIDED ONLY WITH RESPECT TO THOSE OF THE FOLLOWING COVERAGES WHICH ARE INDICATED BY A SPECIFIC LIMIT OF LIABILITY AND/OR PREMIUM APPLICABLE THERETO.

VEHICLE	21 CHR PACIFICA HY	10 FOR ESCAPE LIMI
<b>BODILY INJURY LIABILITY</b>	<b>\$56.00</b>	<b>\$61.00</b>
LIMIT PER PERSON/OCCURRENCE	250,000/500,000	250,000/500,000
<b>PROPERTY DAMAGE LIABILITY</b>	<b>\$61.00</b>	<b>\$58.00</b>
LIMIT PER OCCURRENCE	100,000	100,000
<b>UNINSURED MOTORIST</b>	<b>\$4.00</b>	<b>\$5.00</b>
LIMIT PER PERSON/ACCIDENT	250,000/500,000	250,000/500,000
<b>UNDERINSURED MOTORIST</b>	<b>\$16.00</b>	<b>\$20.00</b>
LIMIT PER PERSON/ACCIDENT	250,000/500,000	250,000/500,000
<b>COMPREHENSIVE</b>	<b>\$40.00</b>	<b>\$25.00</b>
DEDUCTIBLE	1,000	1,000
LIMIT OF CUSTOMIZED EQUIPMENT	2,000	2,000
GLASS COVERAGE - 0 DEDUCTIBLE	YES	YES
<b>COLLISION</b>	<b>\$122.00</b>	<b>\$58.00</b>
DEDUCTIBLE	1,000	1,000
LIMIT OF CUSTOMIZED EQUIPMENT	2,000	2,000
<b>ROADSIDE ASST/WINDSHIELD REPAIR</b>	<b>\$8.00</b>	<b>\$8.00</b>
<b>REIMBURSEMENT OF RENTAL EXPENSE</b>	<b>INCLUDED</b>	<b>INCLUDED</b>
LIMIT PER DAY/AGGREGATE	25/750	25/750
<b>PERSONAL INJURY PROTECTION</b>	<b>\$34.00</b>	<b>\$37.00</b>
OPTION - NONSTACKING	BASIC	BASIC
<b>TOTAL</b>	<b>\$341.00</b>	<b>\$272.00</b>

**IMPORTANT NOTICE: THIS POLICY REDUCES THE APPLICABLE LIMITS FOR BODILY INJURY LIABILITY, PROPERTY DAMAGE LIABILITY, UNINSURED MOTORIST AND UNDERINSURED MOTORIST COVERAGES SHOWN ON THIS DECLARATIONS PAGE TO THE LEGALLY REQUIRED MINIMUM FINANCIAL RESPONSIBILITY LIMITS IN THE STATE WHEN AN INSURED VEHICLE IS OPERATED BY ANYONE OTHER THAN YOU, OR A RELATIVE, OR A PERSON LISTED ON THE DECLARATIONS AS AN OPERATOR.**

TOTAL PREMIUMS	VEHICLES	ENDORSEMENTS	TAX/FEE THEFT FUND	TOTAL PREMIUM	HAUGEN AGENCY LTD AUTHORIZED REPRESENTATIVE
	\$613.00	\$0.00	\$1.00	\$614.00	

DATE PRINTED 05-03-2021 THIS IS NOT A BILL. SEE DECLARATION SECTION II FOR ADDITIONAL INFORMATION  
 29E-03-89 SEE BILLING NOTICE FOR AMOUNT DUE. SEE REVERSE SIDE FOR IMPORTANT INFORMATION

**DECLARATIONS, SECTION II PAGE 1****POLICY TERM:** 03-20-2021 TO 09-20-2021**VEH. DR.# RATING INFORMATION**

1	2	DRIVER IS 66 YEARS OLD, MILEAGE IS 7,500 OR GREATER, UNVERIFIED, PLEASURE/WORK
2	1	DRIVER IS 68 YEARS OLD, MILEAGE IS 10,000-14,999, VERIFIED, PLEASURE/WORK

**VEH. DR.# OPERATOR INFORMATION**

VEH.	DR.#	OPERATOR INFORMATION	AD&D	INC-LOSS	ACCDT/CONV/IINEXP
2	1	PRINCIPAL M MAR POMROY WILLIAM	N	N	0 0 0
1	2	PRINCIPAL F MAR POMROY LISA	N	N	0 0 0

**VEH. POLICY DISCOUNTS**

1	ANTI THFT; BEN XPS; COMP CLM FREE; PASV RST; DEF DR; MULTI-CAR
2	ANTI THFT; BEN XPS; COMP CLM FREE; PASV RST; DEF DR; MULTI-CAR

**VEH. THIS POLICY IS SUBJECT TO THE FOLLOWING FORMS AND ENDORSEMENTS**

1, 2	SA228	08-14	MN PIP - NONSTACKING
1, 2	SA2476	03-16	CUSTOMIZED EQUIPMENT
1, 2	SA405MN	08-19	MINNESOTA AUTOMOBILE POLICY
1, 2	SA522	06-06	FULL GLASS COVERAGE

**LOSS PAYEE(S)/ADDITIONAL INTEREST(S)**

**VEHICLE: 1**  
PNC BANK  
PO BOX 313  
WILMINGTON OH 45177-0313  
LOSS PAYEE

**IMPORTANT POLICY INFORMATION**

**AMERICAN NATIONAL PROPERTY AND CASUALTY CO**

POLICY NUMBER

22-H-993-10R-8

POLICY TERM

06-26-2021 to 06-26-2022

THIS RENEWAL DECLARATION

REPLACES ALL PRIOR DECLARATIONS, IF ANY, AND WITH POLICY PROVISIONS AND ANY ENDORSEMENTS ISSUED TO FORM A PART THEREOF COMPLETES THIS HOMEOWNERS POLICY

EASY PAY: 0377316

1949 E. SUNSHINE  
SPRINGFIELD, MISSOURI 65899-0001  
(417) 887-0220

AND SUBSEQUENT RENEWALS  
AT 12:01 A.M. (STD)

**NAMED INSURED AND P.O. ADDRESS**

POMROY, WILLIAM & LISA  
11412 GALTIER PL  
BURNSVILLE MN 55337-1017

**LIENHOLDER/MORTGAGEE**

US BANK NA  
PO BOX 961045  
FORT WORTH TX 76161

**PREMIUM TO BE PAID BY**

YOUR EASYPAY ACCOUNT

**AGENT**

FOR CUSTOMER SERVICE, CALL PH #952-440-8200  
HAUGEN AGENCY LTD D8740-P 1-083

**DESCRIPTION OF INSURED PROPERTY**

11412 GALTIER PL BURNSVILLE MN 55337-1017

Primary Dwelling Roof Year: 2009

**RATING INFORMATION, COVERAGES, PREMIUMS, AND LIMITS OF LIABILITY**

INSURANCE IS PROVIDED ONLY WITH RESPECT TO THOSE OF THE FOLLOWING COVERAGES WHICH ARE INDICATED BY A SPECIFIC LIMIT OF LIABILITY AND/OR PREMIUM APPLICABLE THERETO

SECTION I - \$1,000 All Peril DEDUCTIBLE	LIMITS
COVERAGE A - DWELLING	\$329,100
COVERAGE B - OTHER STRUCTURES	\$32,910
COVERAGE C - PERSONAL PROPERTY	\$246,825
COVERAGE D - LOSS OF USE	\$82,275
SECTION II	
COVERAGE E - PERSONAL LIABILITY (EACH OCCURRENCE)	\$500,000
COVERAGE F - MEDICAL PAYMENTS TO OTHERS (EACH PERSON)	\$2,000

----- RATING INFORMATION -----

CONSTRUCTION: FRAME PROTECTION: 03 ZONE: 11  
1 FAMILY DWELLING, FIRE DIST: BURNSVILLE  
DISCOUNTS: AUTO-HOME, UTILITY SYSTEM/ROOF

- ROOF COVERAGE FOR WIND OR HAIL DAMAGE DEPENDS ON THE AGE AND TYPE OF ROOF. SEE ROOF PAYMENT SCHEDULE SH-92618 FOR MORE DETAILS. RELATED PREMIUM CREDIT IS DISPLAYED BELOW.

**LIENHOLDER(S)/MORTGAGEE(S)**

1ST US BANK NA  
ITS SUCCESSORS AND/OR ASSIGNS  
PO BOX 961045  
FORT WORTH TX 76161  
  
LOAN NUMBER - 68008332320

**SUBJECT TO THE FOLLOWING FORMS AND ENDORSEMENTS**

SH3.22 09-18	SH91227 04-14 10	\$165.00	# SH91598 10-20
SH92565 05-15	# SH92618 07-20	\$416.00-	SH92764 08-18

**TOTAL**

TOTAL PREMIUMS

\$2026.08

\$10.08

HAUGEN AGENCY LTD

DATE PRINTED

\* SURCHARGE: FIRE SAFETY.  
04-27-2021

AUTHORIZED REPRESENTATIVE

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

INSURED

DECLARATIONS – PAGE 2A

## DESCRIPTION OF YOUR HOUSE

## NOTICE – REBUILDING COSTS ESTIMATED UNDER IDEAL CONDITIONS

Important information regarding your Declarations Page 2 information for your home.

The listed characteristics of your home/dwelling are based on information gathered from you, to assist you in your insurance purchase. The insured value of your home/dwelling, as reflected in the stated Coverage A amount, is based upon estimated cost of rebuilding your home/dwelling, reflecting the rising trend of such costs. This should be considered **the minimum cost to rebuild your home/dwelling under ideal conditions.** In the event your home/dwelling is destroyed, your policy will only pay additional monies beyond Coverage A subject to the Extended Replacement provisions you have purchased and are filed for your state. The actual cost to rebuild or repair your home/dwelling will vary, especially if the information you have provided is incorrect or incomplete. Rebuilding costs can also vary greatly and are dependent upon: (1) the nature and extent of the damage sustained; (2) the availability of skilled labor and materials; and (3) other market conditions which may exist at the time of loss. **If the cost of rebuilding your home/dwelling exceeds the Coverage A amount and Extended Replacement provisions on your policy, those additional costs will not be covered.** We strongly encourage you to review the insured value of your home/dwelling and the Coverage A amount listed on your policy carefully. If you wish to purchase additional coverage, make corrections to the information you have provided, or if you modify or remodel your home/dwelling, please contact your agent immediately.

Insured: POMROY, WILLIAM &amp; LISA

Policy Number:

22-H-993-10R-8

Address: 11412 GALTIER PL BURNSVILLE, MN 55337-1017

## GENERAL INFORMATION

Estimated Replacement Cost	\$329,048.00	US Dollars
ZIP Code	55337	Code
Year Built	1964	A.D.
Building Style	1	Story
Building Shape	Rectangular	
Number of Stories	1.00	Stories
Number of Families	Single Family	
Total Living Area - Main Structure	1144	Square Fee
Finished Floor Area	1144	Square Fee
Exterior Walls, Vinyl Siding	90	Percent
Exterior Walls, Brick Veneer	10	Percent
Roofing, Architectural Shingles	100	Percent
Attached Structures, Attached Garage - 3 Car	1	Quantity
Special Items, Sash, Wood with Glass, Standard	100	Percent
Special Items, Door, Wood, Exterior	2	Quantity
Partitions, Drywall	100	Percent
Partitions, Stud, 2 x 4	100	Percent
Partitions, Door, Hollow Core, Birch	12	Quantity
Wall Coverings, Paint	100	Percent
Wall Coverings, Bookcase Walls	5	Percent
Ceilings, Drywall	100	Percent
Floor Coverings, Hardwood	16	Percent
Floor Coverings, Wall to Wall Carpet (acrylic/nylon)	43	Percent
Floor Coverings, Ceramic Tile	25	Percent
Floor Coverings, Laminated Wood Flooring	16	Percent
Interior, Kitchen - Custom	1	Quantity
Interior, Full Bath - Builder's Grade	1	Quantity
Interior, Three-Quarter Bath-Builder	2	Quantity
Interior, Wet Bar	1	Quantity
Interior, Gas Fireplace	1	Quantity
HVAC, Heating - Gas	100	Percent
HVAC, Central Air Cond. - Separate Ducts	100	Percent
Miscellaneous, 200 amp Service, Standard	100	Percent
Foundation Type, Basement, Walkout	100	Percent
Foundation Materials - Main, Concrete	100	Percent
Basement/Hillside Information - Main, Basement Depth	8	Feet
Basement/Hillside Information - Main, Number of Basement Levels	1	Quantity

CONTINUED ON NEXT PAGE

**DESCRIPTION OF YOUR HOUSE**

Insured: POMROY, WILLIAM & LISA

Policy Number: 22-H-993-10R-8

Address: 11412 GALTIER PL BURNSVILLE, MN 55337-1017

**GENERAL INFORMATION**

Basement/Hillside Information - Main, Standard Finish	86 Percent
Basement/Hillside Information - Main, Stairs, Basement w/Railing	1 Quantity
Roof Style/Slope, Gable, Moderate Pitch	100 Percent
Roof Shape, Simple/Standard	100 Percent
Floor/Ceiling Structure, Wood Joists & Sheathing	100 Percent
Roof Structure, Rafters, Wood w/Sheathing	100 Percent
Exterior Wall Framing, Stud, 2 x 4	100 Percent
Construction Type	1 Standard
Site Access, Flat Area/Easy Access	Terrain
Ceiling Height, Wall Group 1, Wall Height	8.00 Feet
Ceiling Height, Wall Group 1, Percent of Wall	100 Percent

**CONSTRUCTION ASSUMPTIONS**

Degree of Slope 0-14 Degrees

**ADDITIONAL FACTORS**

Cost of Labor, Building Materials and Supplies	\$251,152.00 US Dollars
Cost of Permits and Architect's Plans	\$20,439.00 US Dollars
Overhead and Profit	\$54,318.00 US Dollars
Inflationary Adjustment	\$3,139.00 US Dollars
(sum of the above amounts is equal to the Estimated Replacement Cost)	

For updates or corrections please contact your agent.  
 HAUGEN AGENCY LTD 14093 COMMERCE AVE NE PRIOR LAKE MN 55372-1495  
 PH 952-440-8200 State License 20460469

CORELOGIC COSTS INCLUDE LABOR AND MATERIAL, NORMAL PROFIT AND OVERHEAD AS OF DATE OF REPORT. COSTS REPRESENT GENERAL ESTIMATES WHICH ARE NOT TO BE CONSIDERED A DETAILED QUANTITY SURVEY. THESE COSTS INCLUDE GENERALITIES AND ASSUMPTIONS THAT ARE COMMON TO THE TYPES OF STRUCTURES REPRESENTED IN THE SOFTWARE.

## Liability Exposures Declarations Page - A

(Refer to Declarations Page 1 for Limit of Liability)

The following is our record of information you have provided about your liability exposures. Your coverage may be affected by the accuracy of the information shown. Please review this information and notify your agent if any of this information is inaccurate or changes. Liability coverage may be excluded or limited for risk exposures which are not identified below. Failure to disclose risk exposures or attempts to conceal risk exposures may be deemed grounds for non-renewal.

### DOG AND EQUINE ANIMAL LIABILITY EXPOSURES:

DOGS - No

EQUINE - No

Your policy will be reduced to a maximum of \$10,000 limit on liability coverage for dogs and equine animals that are not listed on this page. Other exclusions may also apply. Please refer to Section II - Exclusions in your policy for all animal exclusions.

### PERSONAL LIABILITY EXPOSURES:

TRAMPOLINE - No

SKATEBOARD RAMP - No

SWIMMING POOL - No

SILOS - No

BUSINESS ON PREMISES - No

NUMBER OF CHILDREN FOR DAY CARE - No

ADULT DAY CARE - No

INCIDENTAL FARMING (LESS THAN \$2,000 ANNUAL GROSS RECEIPTS, AND 4 OR FEWER LARGE LIVESTOCK) - No

GENERATING POWER ON PREMISES - No

## UTILITY SYSTEMS, ROOF AND PROTECTIVE DEVICE RATING EXPLANATION

Rating adjustments are determined from various risk characteristics specific to your home elements.

If you have completely updated your plumbing and electrical systems, updated your heating or air-conditioning system, replaced your roof, have a roof composed of loss preventive materials, or have a home protective device, then your dwelling is less likely to experience a loss.

Based on the information we have concerning your home elements, the summary below shows the Type of Adjustment given along with the Year Reported and if Documentation for upgrades have been received.

<u>Description</u>	<u>Year Reported</u>	<u>Documentation Received (Y/N*)?</u>	<u>Type of Adjustment</u>
Year of Electrical and Plumbing Elements:	1964	N/A	No Adjustment
Year Heating System Updated:	1964	N/A	No Adjustment
Year Cooling System Updated:	1964	N/A	No Adjustment
Year Roof Replaced:	2009	Y	Credit
Roof Construction Material:	Architectural Shingles		No Adjustment
UL/FM Roof Class:	N/A		No Adjustment

\* Please contact your agent to provide documentation of updates to your electrical system and plumbing system, heating system, cooling system, or roof.

Protective Device:

Central Fire Alarm	No Adjustment
Local Burglar Alarm	No Adjustment
Central Burglar Alarm	No Adjustment