Anna, here's your homeowners insurance quote.

Date prepared 03/22/2022

Prepared for Anna Ekberg 1528 Racine Ave S Lakeland, MN 55043-9406 Proposed policy period 03/22/2022 to 03/22/2023

Property address 1528 Racine Ave S Lakeland, MN 55043-9406



Call or email me to purchase this policy. KRAFT LAKE INS AGENCY INC 5600 BEECHTREE LN SE CALEDONIA, MI 49316-9587 651-304-6032 usw.underwriting@kraftlake.com



Your total policy premium with paid-in-full discount: \$5,411.93 Your total 12-month Safeco Optimum policy premium: \$6,175.73 Discount if paid in full: \$763.80

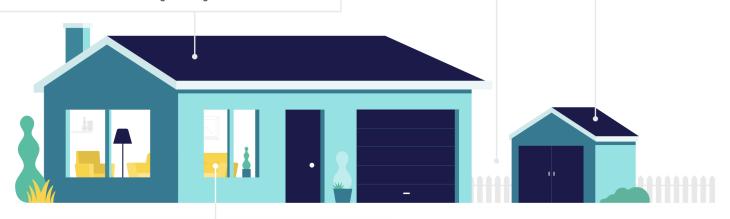
Your coverages	Dwelling (coverage A)	Other structures (coverage B)	Personal property (coverage C)	Additional living expenses (coverage D)	Personal liability (coverage E)	Medical payments (coverage F)
Limit	\$295,300	\$29,530	\$147,650	\$59,060	\$500,000	\$1,000

Dwelling coverage (coverage A)

Provides coverage for the dwelling on the residence premises, as shown in the Policy Declarations, used principally as a private residence. Limits should reflect an amount that will allow the customer to rebuild their existing dwelling.

Other structures coverage (coverage B)

Provides coverage for fences, driveways, and walkways as well as other structures on the residence premises not attached to the dwelling.



Personal property coverage (coverage C)

Personal property coverage provides worldwide protection for your possessions in case of damage or theft. Your personal property is covered at replacement cost, which means we'll pay you the full amount that it will cost to replace your item with a brand new one.

Your deductibles	Amount	The deductible is the amount you'll pay out of pocket for a covered loss. For example, if your covered loss is \$10,000 and your deductible is \$1,000, your claims payment would be \$9,000. Higher deductibles generally result in lower premiums but will cost you more out of pocket.
All Perils Deductible	\$2,500.00	

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Other and optional coverages		Limit/Ded	Premium
MN Fire Safety Surcharge			\$30.73
Sewer & Water Back-Up for Bldg & C	ontents	\$15,000	Included
Building Ordinance or Law Coverage		10%	Included
Extended Dwelling Coverage		25%	Included
Refrigerated Products		Yes	Included
Loss Assessment		\$5,000	Included
Matching Undamaged Siding, Roofin	g, Windows	\$10,000	Included
Identity Recovery Coverage		Yes	\$12.00
Personal Offense		Yes	\$13.00
Personal Property Replacement Cost	:	Yes	Included
Replacement Cost on Roof Surfacing Hail)	(Wind or	Yes	Included
Total			\$55.73
Roof Loss Settlement Type Coverage A only	Replac	ement Cost: 100%	Year of installation: 2

REPLACEMENT COST EXPIRATION DATE: 03/22/2038

Premium Summary	Premium	
Your Coverages	\$6,120.00	
Other and optional coverages	\$55.73	
Your discounts		You Saved \$0.00
Your total 12-month Safeco Optimum policy premium	\$6,175.73	

Payment plan options	Down payment	Includes installment fee of	Remaining payments	Total due
Paid in full	\$5,411.93	\$0.00	None	\$5,411.93
Monthly EFT	\$452.99	\$2.00	11 at \$452.99	\$5,435.93
Monthly recurring credit card	\$519.64	\$5.00	11 at \$519.64	\$6,235.73

Additional payment plans are available. Ask your independent Safeco agent for details.

+ Add service line coverage.

Consider adding the Service Line coverage which covers common causes of service line failures up to a limit of \$12,000, subject to a \$500 deductible.



Dwelling Reconstruction Cost Estimate: \$295,300

Dwelling Information						
Address	1528 Racin Lakeland, N	e Ave S /IN 55043-9406				
Year Originally Built Construction Style Number of Stories (not including attic or basement)	1960 Ranch/Ram 1	nbler	Total Living Area Dwelling Type	1414 Single	family dw	elling
Exterior Features Foundation Type Land Under Foun		Basement Flat Slope			Percent	100%
Percentage of ba is finished	sement that				Percent	50%
Finished Attic Roof Material Roof Style/Slope Exterior Walls Garages & Carpo Custom Garage I Attached Structur Special Exterior F Exterior Columns	rts Doors? res Teatures	Shingles, Asph Gable, Moderat Siding, Vinyl Stone on Fram None None None None None None	te Pitch		Sq. Ft. Percent Percent Percent	None 100% 100% 70% 30%
Interior Features Kitchens Baths Heating Air Conditioning Floor Finishes Wall Finishes Ceiling Finishes Fireplaces Molding Built-in Cabinetry		Carpet, Acrylic/ Hardwood Tile, Ceramic Paint Drywall None None None	ditioning, Same Ducts	5	# Of # Of Percent Percent Percent Percent	1 100% 100% 55% 40% 5% 100% 100%
Whole House Sys Special Interior Fe		None None				



An estimate specific to the dwelling is dependent upon the accuracy of the information provided. This estimate represents the minimum amount that may be needed to reconstruct this dwelling. A higher coverage amount may be selected.

A Liberty Mutual Company

Safeco Insurance_™

Dwelling Information					
Year Originally Built: <u>1960</u>					
Territory: <u>001325</u>		Protection C	Class: <u>5</u>		
Construction Style: <u>Tier:T1</u>					
Roof Material: Shingles, Asph	nalt				
Heating: Gas, Forced Air					
Exterior Walls: Siding, Vinyl					
Foundation Type: Basement					
Rating County: 163					
Dwelling Type: Single family of	lwelling				
Number of families: 1					
Outboard Motors: # of motor	rs: Total Hor	sepower:	Boat Length:	Ages of all (Operators:
Inspection Information					
Maintenance condition of dwe	0	verage e Fa	ir e Poor		
Renovation Information					
Wiring Renovation	e None	e Full e	Partial		Year:
Plumbing Renovation	ь None	e Full e	Partial		Year:
Roof Renovation	e None	ь Full			Year: <u>2021</u>
Loss Information					

Number of weather related losses in the last 5 years: $\underline{0}$

Number of non-weather related losses in the last 5 years: 2_____

Date	Cause of Loss	Comments/Details	Amount
07/17/2021	Fire	FIRE	\$114,744.00
04/22/2020	All other property	OTHER	\$17,974.00

Underwriting Questionnaire



A Liberty Mutual Company	
Is the home under	
construction?	e Yes b No
Is there a business on	
the premises?	e Yes b No

	last 5 years?	⊜ Yes ∈ No	
Reason for Policy: New property customer to Safeco	Reason for Policy: New property customer to Safeco		

Prior Insurance Carrier: <u>Minnesota Fair Plan</u> Birth Date: <u>07/19/1976</u>

Marital Status: Single

Cross References



AUTHORIZATION TO COLLECT AND DISCLOSE PERSONAL OR PRIVILEGED INFORMATION

(We are required to obtain this authorization from you pursuant to Minnesota Statute 72A.501.)

I, the undersigned, hereby authorize the agent named above, if any, and/or the underwriting department of the insurance company named above to collect credit-related and other information about me from the following types of organizations:

- I Credit bureaus
- 1 Other organizations providing personal or privileged information

I understand this information will be used for the purpose of making underwriting decisions in connection with the insurance for which I have applied, sought reinstatement or requested a change in benefits. These decisions may include determinations to grant or deny me coverage and/or the rates I will be charged.

The insurance will not be effective if any check for the premium is not honored when it is presented for payment.

I understand that the policy I am applying for includes an annual adjustment for inflation.

THE INSURER MAY ELECT TO CANCEL COVERAGE AT ANY TIME DURING THE FIRST 59 DAYS FOLLOWING ISSUANCE OF THE COVERAGE FOR ANY REASON WHICH IS NOT SPECIFICALLY PROHIBITED BY STATUTE.

AGENCY:

03/22/2022 Quote Date

Authorized Representative

APPLICANT:

Date

Applicant's Signature