



**FARMERS**  
INSURANCE

A Policy From  
FOREMOST INSURANCE COMPANY GRAND RAPIDS, MICHIGAN

RB 721530  
077-0079892419

FOREMOST INSURANCE COMPANY  
P.O. BOX 2450  
GRAND RAPIDS, MI 49501-2450

**ATTENTION AGENT**

This packet contains your copy of insurance documents which have already been forwarded to your customer, and your customer's lienholder (if applicable). Thank you for placing your business with us.

89 - 5347 - 068

ALEXIS KRISTINE LEBAHN  
FARMERS INSURANCE GROUP  
3470 WASHINGTON DR#103  
EAGAN MN 55122-1329

COPY

077-0079892419  
Form 736721 04/05

COPY

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**FARMERS**  
INSURANCE

**TRAVEL TRAILER  
RENEWAL  
DECLARATIONS**

<b>Policy Number:</b> 077-0079892419	-02
<b>Policy Period</b>	12:01 A.M. Standard Time
From 05/13/22 To 05/13/23	

Underwritten by: **Foremost Insurance Company**  
Grand Rapids, Michigan  
Home Office: P.O. Box 2450  
Grand Rapids, Michigan 49501

RENEWAL DECLARATIONS EFFECTIVE 05/13/2022  
SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING  
THE SAME POLICY NUMBER FOR THIS POLICY PERIOD.

**YOU AS NAMED INSURED AND YOUR ADDRESS**

BARRY THOMPSON  
534 CHURCH AVE  
WABASHA MN 55981-1348

**YOUR POLICY IS SERVICED BY:**

ALEXIS KRISTINE LEBAHN  
FARMERS INSURANCE GROUP  
3470 WASHINGTN DR#103  
EAGAN MN 55122-1329  
**Telephone:** (651) 280-4180

**Agency Code:** 89-5347-068

PREMIUM SUMMARY	
TOTAL PREMIUM AND OTHER AMOUNTS FOR THIS POLICY PERIOD	\$ 469.00

INSURED INFORMATION		
<b>Insured Name</b> BARRY THOMPSON	<b>Birth Date</b> 05/08/1958	<b>Marital Status</b> M

UNIT #1 TRAVEL TRAILER DESCRIPTION						
<b>Year</b> 2016	<b>Length</b> 26	<b>VIN</b> 4YDT24223G7206506	<b>Manufacturer</b> KEYSTONE RV	<b>Model</b> HIDEOUT SERIES	<b>County</b> WABASHA	<b>Purchase Year</b> 2021
<b>Location Address</b> 534 CHURCH AVE WABASHA MN 55981-1348				<b>Territory</b> 001		

This Declaration with your policy provisions and any endorsements, issued to form a part thereof, completes the above numbered policy. We will insure you for the coverage for which a premium is shown. Detailed coverage descriptions and any limitations will be found in your policy.

**UNIT #1 SUMMARY**

**PREMIUM**

**POLICY COVERAGES**

OTHER THAN COLLISION	\$ 291.00
ACTUAL CASH VALUE UP TO \$18,000	
LESS \$500 DEDUCTIBLE	
THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	
COLLISION	\$ 81.00
ACTUAL CASH VALUE UP TO \$18,000	
LESS \$250 DEDUCTIBLE	
THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	

**OTHER COVERAGES**

7806-02/19 REPLACEMENT COST PERSONAL PROPERTY	\$ 24.00
AMOUNT OF INSURANCE: \$2,000 LESS \$100 DEDUCTIBLE	
4195-03/20 VACATION LIABILITY	\$ 25.00
LIMIT OF LIABILITY: \$100,000	
7804-02/19 EMERGENCY EXPENSE	\$ 3.00
AMOUNT OF INSURANCE: \$500	
7809-02/19 TOWING AND ROADSIDE ASSISTANCE	\$ 40.00
AMOUNT: \$500 EACH DISABLEMENT	
7807-02/19 SCHEDULED MEDICAL BENEFITS	\$ 5.00
SEE BENEFITS SCHEDULE	

**OTHER FORMS AND ENDORSEMENTS**

4303-03/20 AMENDMENT OF POL PROVISIONS-MN	INCLUDED
5025-07/10 ADDITIONAL BENEFIT ENDORSEMENT	INCLUDED
7701-02/19 FOREMOST TRAVEL TRAILER POLICY	INCLUDED

**UNIT #1 TOTAL PREMIUM AND OTHER AMOUNTS**

\$ 469.00

**UNIT #1 DISCOUNTS AND SURCHARGES**

The following Discounts and Surcharges have been applied to Your Premiums.

MULTI-POLICY DISCOUNT	\$ -41.00
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TOTAL DISCOUNTS	\$ -41.00

MINIMUM EARNED PREMIUM \$ 50.00

**SPECIAL INFORMATIONAL FORMS**

004592	02/11	DELIVERY OF CANCELLATION/NON-RENEWAL
732335		IMPORTANT NOTICE FOR CONSUMER REPORTS
732791	07/19	POLICY AMOUNT STATED ON DECLARATION
740062	01/20	PRIVACY NOTICE

**PROCESSED:** April 8, 2022