CRIBB INSURANCE GRP INC 1601 SW REGIONAL AIRPORT BLVD BENTONVILLE, AR 72713

Phone: 479-286-1066 | Fax: 479-286-1069



Dear Timothy Miller,

Based on the information you provided to us for a 12 month policy effective 07/01/2020 to 07/01/2021, your estimated total premium is

\$1,685.00

Mailing Address 2804 WILLOW BEND CIR SPRINGDALE, AR 72762-7452

with an estimated down payment amount of \$140.36

*This document should only be used for discussion purposes with your Travelers agent or representative. The premium shown is a preliminary estimate only inclusive of state/municipal taxes and fees if applicable as of 06/04/2020 using rates and rules in effect at that time. It is subject to change based on additional information we may receive later in the quoting process and the actual payment option selected. Coverage, discounts and other features are subject to state availability and individual eligibility.

		Coverages	5	
Coverages	Limits or Deductibles	2017 JEEP WRANGLER U	2016 FORD F-150 SUPE	2016 Wildw 30KQBSS
Liability	100,000/300,000	\$207.00	\$176.00	
Property Damage	100,000	\$127.00	\$92.00	
Work Loss	140	\$2.00	\$2.00	
Accidental Death Benefit	5,000	\$2.00	\$2.00	
Medical Expense	5,000	\$16.00	\$12.00	
Uninsured Motorists	100,000/300,000	\$19.00	\$17.00	
Uninsured Motorists PD	100,000	\$7.00	\$7.00	
Underinsured Motorists	100,000/300,000	\$31.00	\$28.00	
Comprehensive	500 500 500	\$92.00	\$175.00	\$157.00
Collision	500 500 500	\$136.00	\$141.00	\$175.00
Rental	30/900 30/900 -	\$21.00	\$21.00	
Roadside Assistance Coverage	15 15 -	\$10.00	\$10.00	
TOTAL PER VEHICLE		\$670.00	\$683.00	\$332.00

Discounts	X	Advantages	

Early Quote Continuous Ins EFT

Good Payer Multi-Car Multi-Policy

Safe Driver

Your Total Savings Reflected in Your Total Premium: \$1489.00



Driver Quote Details							
Driver Name	DOB	Marital Status	Driver Type	Defensive Driver	Driver Training	Good Student	Away at School
TIMOTHY	04/05/1979	Married	Licensed				
MICHELLE	03/21/1974	Married	Licensed				

Vehicle Quote Details					
Vehicle & VIN	Use	Anti- Theft	Anti- Lock	Passive Restraint	Vehicle Premium
2017 JEEP WRANGLER U 1C4BJWDG2HL724153	Commute	N	Υ	Υ	\$670.00
2016 FORD F-150 SUPE 1FTEW1EG7GKE08431	Commute	N	Υ	Υ	\$683.00



CRIBB INSURANCE GRP INC 1601 SW REGIONAL AIRPORT BLVD BENTONVILLE, AR 72713

Phone: 1.479.286.1066 | Fax: (479) 286-1069

Name and Mailing Address TIMOTHY MILLER MICHELLE MILLER 2804 WILLOW BEND CIR SPRINGDALE, AR 72762-7452

The quote below is based on information you provided to us for a 12-month policy, effective 07/01/20 to 07/01/21.

YOUR HOME QUOTE



\$2,556.00

estimated for 12 months

with an estimated down payment amount of \$212.91

Residence Premises

2804 Willow Bend Cir Springdale, AR 72762-7452

Coverages

Coverage	Limit
Coverage A – Dwelling	\$525,000
Coverage B – Other Structures	\$52,500
Coverage C – Personal Property	\$262,500
Coverage D – Loss of Use	\$105,000
Coverage E – Personal Liability - Bodily Injury and Property Damage (each occurrence)	\$300,000
Coverage F – Medical Payments to Others (each person)	\$1,000

Deductibles

Peril Deductible	Deductible
Property Coverage Deductible (All Perils)	\$2,500

Coverage Level

Your coverage level is Travelers Protect[®]. If you have any questions, please contact your agent at 1.479.286.1066.

PL-50347 (05-17)



Home Quote for Timothy Miller continued

Optional Packages

	Endorsement	Limit	Premium
Enhanced Water Package			Included*
Water Back Up and Sump Discharge or Overflow Coverage	HQ-208 CW (08-18)	\$5,000	
Limited Hidden Water or Steam Seepage or Leakage Coverage	HQ-209 CW (08-18)	\$5,000	
Additional Coverage Package			Included*
Special Personal Property Coverage	HQ-015 CW (05-17)		
Personal Injury Coverage	HQ-082 CW (02-19)		
Personal Property Replacement Cost Loss Settlement	HQ-290 CW (05-17)		
Additional Replacement Cost Protection Coverage 25% of Coverage A - Dwelling Limit	HQ-420 CW (11-18)	\$131,250	
Refrigerated Property Coverage	HQ-498 CW (05-17)	\$500	
Loss Assessment	Increased Limit	\$5,000	

Optional Coverages

Endorsement Limit Premium

Estimated Home Premium

\$2,556.00

Discounts

The following discounts reduced your premium:

Multi-Policy Early Quote Loss Free

Good Payer Fire Protective Device

Savings Reflected in Your Total Premium:

\$1,537.00

PL-50347 (05-17) 2

^{*}Note: The additional cost for any optional coverage or endorsement shown as "Included" is contained in the Estimated Home Premium.



Information Used to Determine Your Premium

There are many factors that determine the premium on your quote, some of which are displayed below.

# of Families: 1 Family	Year Built: 2002	Construction Type: Frame
# of Stories: 2	Square Footage: 3966	Siding Type: Brick/Masonry Veneer
# of Bathrooms: 4	Age of Roof: 00	Roof Material Type: Architectural Shingle
Garage - Number of Cars: 3	Garage Type: Attached	Foundation Type: Slab
# of Employees: 00		Finished Basement: 00

Estimated Monthly Billing Options

The following installment options are available for your Travelers policy. The actual monthly installment amount will be reflected on your first billing statement. Electronic Funds Transfer (EFT) and Recurring Credit Card (RCC) require enrollment in our automatic payment plans. Pay in Full billing options are also available.

	EFT	RCC	Bill by Mail/Email
Monthly Installment Premium	\$213.01	\$213.01	\$213.01
Monthly Service Charge	\$2.00	\$2.00	\$5.00
Total Monthly Amount	\$215.01	\$215.01	\$218.01

Insurance is underwritten by TRAVELERS PERSONAL INSURANCE COMPANY, a subsidiary or affiliate of The Travelers Indemnity Company, One Tower Square, Hartford, CT 06183.

This document should only be used for discussion purposes with your Travelers agent or representative. The premium shown is a preliminary estimate only inclusive of state/municipal taxes and fees if applicable, as of 06/04/2020 using rates and rules in effect at that time. It is subject to change based on additional information we may receive later in the quoting process. Coverage, discounts and other features are subject to state availability and individual eligibility.

PL-50347 (05-17)