

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**  
 WILLIAM PINSON  
 11 NORTHAMPTON DR  
 BELLA VISTA, AR 72714-3920

The quote below is based on information you provided to us for a **12-month policy**, effective 02/01/21 to 02/01/22.

<p><b>YOUR HOME QUOTE</b></p>  <p><b>\$1,780.00</b> <small>estimated for 12 months</small></p> <hr/> <p>with an estimated down payment amount of \$148.27</p>	<p><b>Residence Premises</b></p> <p>11 Northampton Dr                  Bella Vista, AR 72714-3920</p>
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## Coverages

Coverage	Limit
Coverage A – Dwelling	\$185,000
Coverage B – Other Structures	\$18,500
Coverage C – Personal Property	\$92,500
Coverage D – Loss of Use	\$37,000
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



**Optional Coverages**

	<b>Endorsement</b>	<b>Limit</b>	<b>Premium</b>
<b>Personal Property Replacement Cost Loss Settlement</b>	HQ-290 CW (05-17)		Included*
<b>Additional Replacement Cost Protection Coverage</b> 25% of Coverage A - Dwelling Limit	HQ-420 CW (11-18)	\$46,250	Included*

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

**Estimated Home Premium \$1,780.00**

**Discounts**

The following discounts reduced your premium:

Multi-Policy	Early Quote	Loss Free
Good Payer	Fire Protective Device	

**Savings Reflected in Your Total Premium: \$1,036.00**

**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: 2005	Construction Type: Frame
# of Stories: 1	Square Footage: 1536	Siding Type: Brick/Masonry Veneer
# of Bathrooms: 2	Age of Roof: 2	Roof Material Type: Asphalt-Fiberglass
Garage - Number of Cars: 2	Garage Type: Attached	Foundation Type: Slab
# of Employees: 00		Finished Basement: 00

**Estimated Monthly Billing Options**

The following installment options are available for your 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.

	<b>EFT</b>	<b>RCC</b>	<b>Bill by Mail/Email</b>
Monthly Installment Premium	\$148.34	\$148.34	\$148.34
Monthly Service Charge	\$2.00	\$2.00	\$5.00
<b>Total Monthly Amount</b>	<b>\$150.34</b>	<b>\$150.34</b>	<b>\$153.34</b>

This document should only be used for discussion purposes with your agent or representative. The premium shown is a preliminary estimate only inclusive of state/municipal taxes and fees if applicable, as of 01/19/2021 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.

Dear William Pinson,

Based on the information you provided to us for a **12 month** policy effective 02/01/2021 to 02/01/2022, your estimated total premium is

**Mailing Address**

11 NORTHAMPTON DR  
 BELLA VISTA, AR 72714-3920

**\$2,582.00**

with an estimated down payment amount of **\$215.08**

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**Coverages**

Coverages	Limits or Deductibles	2018 CHEVR COLORADO C	2018 CHEVR COLORADO C
Liability	50,000/100,000	\$333.00	\$333.00
Property Damage	50,000	\$172.00	\$172.00
Work Loss	140	\$7.00	\$7.00
Accidental Death Benefit	5,000	\$3.00	\$3.00
Medical Expense	5,000	\$55.00	\$55.00
Uninsured Motorists	50,000/100,000	\$38.00	\$38.00
Uninsured Motorists PD	50,000	\$13.00	\$13.00
Underinsured Motorists	50,000/100,000	\$45.00	\$45.00
Comprehensive	500   500	\$174.00	\$174.00
Collision	500   500	\$421.00	\$421.00
Rental	30/900   30/900	\$20.00	\$20.00
Roadside Assistance Coverage	15   15	\$10.00	\$10.00
<b>TOTAL PER VEHICLE</b>		<b>\$1,291.00</b>	<b>\$1,291.00</b>

**Discounts & Advantages**

IntelliDrive® Enroll	Early Quote	Continuous Ins
EFT	Good Payer	Multi-Car
Multi-Policy	Safe Driver	

**Your Total Savings Reflected in Your Total Premium: \$1938.00**

### Driver Quote Details

Driver Name	DOB	Marital Status	Driver Type	Defensive Driver	Driver Training	Good Student	Away at School
WILLIAM	07/25/1949	Married	Licensed				
RALENNNA	09/03/1965	Married	Licensed				

### Vehicle Quote Details

Vehicle & VIN	Use	Anti-Theft	Anti-Lock	Passive Restraint	Vehicle Premium
2018 CHEVR COLORADO C 1GCGTDEN5J1296405	Commuter	N	Y	Y	\$1,291.00
2018 CHEVR COLORADO C 1GCGTDEN1J1290956	Commuter	N	Y	Y	\$1,291.00

### Accidents, Violations, and Losses

Driver	Description	Amount	Date
WILLIAM	Accident	\$40,249.00	09/29/2018
	OTHER COMP	\$4,508.00	06/09/2019
	OTHER COMP		07/20/2018