

Dear Debra Jackson,

**Mailing Address**

207 ANGELA ST  
 SPRINGDALE, AR 72762-3806

Based on the information you provided to us for a **12 month** policy effective 02/10/2021 to 02/10/2022, your estimated pay-in-full premium is

**\$2,193.00**

Or if you pay using our monthly installment plan your estimated total premium is **\$2,307.00** with an estimated down payment amount of **\$192.17**

\*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 01/22/2021 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 and the actual payment option selected. Coverage, discounts and other features are subject to state availability and individual eligibility.

**Coverages**

Coverages	Limits or Deductibles	2021 TOYOT TUNDRA DOU	2020 HYUND TUCSON SE	2009 HONDA CR-V LX	2004 FORD F-150 SUPE
Liability	25,000/50,000	\$176.00	\$143.00	\$153.00	\$185.00
Property Damage	25,000	\$134.00	\$101.00	\$124.00	\$151.00
Uninsured Motorists	25,000/50,000	\$12.00	\$15.00	\$13.00	\$12.00
Uninsured Motorists PD	25,000	\$5.00	\$7.00	\$7.00	\$5.00
Underinsured Motorists	25,000/50,000	\$20.00	\$23.00	\$22.00	\$18.00
Comprehensive	1,000   1,000   -   -	\$207.00	\$118.00		
Collision	1,000   1,000   -   -	\$300.00	\$242.00		
<b>TOTAL PER VEHICLE</b>		<b>\$854.00</b>	<b>\$649.00</b>	<b>\$319.00</b>	<b>\$371.00</b>

**Discounts & Advantages**

New Car	Early Quote	Continuous Ins
EFT	Good Payer	Paid in Full
Multi-Car	Multi-Policy	Safe Driver

**Your Total Savings Reflected in Your Total Premium: \$1966.00**

### Driver Quote Details

Driver Name	DOB	Marital Status	Driver Type	Defensive Driver	Driver Training	Good Student	Away at School
Debra	01/28/1963	Married	Licensed				
DOMINICK	04/19/1972	Married	Out of State License				

### Vehicle Quote Details

Vehicle & VIN	Use	Anti-Theft	Anti-Lock	Passive Restraint	Vehicle Premium
2021 TOYOT TUNDRA DOU 5TFUY5F14MX958143	Commute	N	Y	Y	\$854.00
2020 HYUND TUCSON SE KM8J23A47LU077796	Commute	N	Y	Y	\$649.00
2009 HONDA CR-V LX 5J6RE48309L033293	Pleasure	N	Y	Y	\$319.00
2004 FORD F-150 SUPE 1FTPW14534KB71585	Pleasure	N	Y	Y	\$371.00

### Accidents, Violations, and Losses

Driver	Description	Amount	Date
	Tow	\$72.00	02/04/2019
	Tow	\$58.00	05/31/2018
	Tow	\$58.00	12/26/2017
	Tow	\$58.00	04/18/2017



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**  
DEBRA JACKSON  
DOMINICK HUDSON  
207 ANGELA ST  
SPRINGDALE, AR 72762-3806

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

### YOUR HOME QUOTE



**\$1,783.00** estimated for  
12 months

with an estimated down payment amount of \$148.52

### Residence Premises

207 Angela St  
Springdale, AR 72762-3806

## Coverages

Coverage	Limit
Coverage A – Dwelling	\$250,000
Coverage B – Other Structures	\$25,000
Coverage C – Personal Property	\$125,000
Coverage D – Loss of Use	\$50,000
Coverage E – Personal Liability - Bodily Injury and Property Damage (each occurrence)	\$100,000
Coverage F – Medical Payments to Others (each person)	\$1,000

## Deductibles

Peril Deductible	Deductible
Property Coverage Deductible (All Perils)	\$1,000

## Coverage Level

Your coverage level is Travelers Protect<sup>®</sup>. If you have any questions, please contact your agent at 1.479.286.1066.

**Optional Packages**

	<b>Endorsement</b>	<b>Limit</b>	<b>Premium</b>
<b>Enhanced Water Package</b>			Included*
Water Back Up and Sump Discharge or Overflow Coverage	HQ-208 CW (08-18)	\$10,000	
Limited Hidden Water or Steam Seepage or Leakage Coverage	HQ-209 CW (08-18)	\$10,000	
<b>Additional Coverage Package</b>			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)	\$62,500	
Refrigerated Property Coverage	HQ-498 CW (05-17)	\$500	
Loss Assessment	Increased Limit	\$10,000	

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

**Estimated Home Premium** **\$1,783.00**

**Discounts**

The following discounts reduced your premium:

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

**Savings Reflected in Your Total Premium:** **\$1,004.00**

**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: 1976	Construction Type: Frame
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**Information Used to Determine Your Premium (continued)**

# of Stories: 1	Square Footage: 2382	Siding Type: Brick/Masonry Veneer
# of Bathrooms: 2	Age of Roof: 6	Roof Material Type: Architectural Shingle
Garage - Number of Cars: 1	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.

	<b>EFT</b>	<b>RCC</b>	<b>Bill by Mail/Email</b>
Monthly Installment Premium	\$148.59	\$148.59	\$148.59
Monthly Service Charge	\$2.00	\$2.00	\$5.00
<b>Total Monthly Amount</b>	<b>\$150.59</b>	<b>\$150.59</b>	<b>\$153.59</b>

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

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