

Thank you for choosing Safeco Insurance!

Below is a summary of the quotes you have requested. The following pages contain more details about your policies, payment options and other insurance information.

Policy Type	Policy Period	Full Pay	2-Pay	Monthly
Personal Auto	07/03/2021 to 07/03/2022	\$7,542.20*	\$3,773.10*	\$696.70
Umbrella	07/03/2021 to 07/03/2022	\$619.00	\$311.50	\$53.58
Total		\$8,161.20	\$4,084.60	\$750.28

You can choose from a variety of convenient ways to pay. The amounts above are if you pre-pay and use the automatic deduction plan. See inside for all your options.

Get A Discount!

*Some policies are eligible for a billing plan discount if you Full Pay or 2-Pay. These amounts include the discount.

Multi-Policy Benefits

You receive many benefits by having multiple policies with Safeco, including:

- Single Loss Deductible
- Customer Account Summary
- Combined Billing Statements
- Account Credits and Discounts

To purchase these policies contact your independent Safeco agent.



Customer Information

ELISE ROUEN
 CHRISTOPHER C ROUEN
 19064 S 196TH PL
 QUEEN CREEK, AZ 85142-9443

Date Prepared: 06/24/2021

Proposed Policy Period: 07/03/2021 to 07/03/2022

Agent Information

ASK INSURANCE SERVICES LLC
 1826 W BROADWAY RD STE 51
 MESA, AZ 85202-1106

Phone Number: (480) 245-5048

Email: info@askinsurancegroup.com

Agent #: 132244

Call or email ASK INSURANCE SERVICES LLC to start your protection with a monthly EFT down payment of \$696.70.

PREMIUM SUMMARY

Vehicle Coverages	Premium
	\$8,487.00
Policy Coverages	Included
Discounts & Safeco Safety Rewards	Included
Your total policy premium for 12 months is	\$8,487.00
Your total policy premium for 12 months without RightTrack is	\$9,414.20
Your total policy premium for 12 months with the Paid in Full Discount is	\$7,542.20
Your total policy premium for 12 months with Automatic Bank Deduction is	\$8,336.70

DISCOUNTS & SAFECO SAFETY REWARDS

Claims-Free Cash Back Review Account	Advance Quoting	Anti-Theft	Coverage
Homeowners	Multi-Car	Diminishing Deductible RightTrack Mobile	Violation Free

DRIVER SUMMARY

ELISE ROUEN - Rated CHRISTOPHER C ROUEN - Rated PAMELA A ROUEN - Rated

VEHICLE COVERAGES	Limits / Deductibles	2020 Ram 1500 Limi	2018 Linc Navigator
Bodily Injury Liability	\$250,000/\$500,000	\$656.10	\$635.00
Property Damage Liability	\$100,000	\$440.60	\$432.10
Medical Payments	\$5,000	\$107.30	\$159.60
Uninsured Motorist	\$250,000/\$500,000	\$99.40	\$131.80
Underinsured Motorist	\$250,000/\$500,000	\$303.50	\$402.30
Comprehensive	\$1000 w/Full Glass	\$775.00	\$1,299.70
Collision	\$1,000	\$657.00	\$901.90
Auto Theft Authority Assessment	Yes	\$1.00	\$1.00
Original Parts Replacement / OEM		\$143.20	\$220.20

Premier Level Protection	Increased Limits and Coverage	\$486.30	\$634.00
Total Vehicle Premium		\$3,669.40	\$4,817.60

POLICY COVERAGES

Accident Forgiveness

Limits / Deductibles

Earned day one if eligible

Premium

Included

This quote is provided without cost or obligation. It is not a contract or binder of coverage.

Payment Options:

Automatic Deduction (EFT)

- | | | |
|-----------------|------------|--|
| 1. Full Payment | \$7,542.20 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$3,773.10 | (50% down payment + \$2.00 Installment Fee) |
| 3. 4-Pay | \$2,086.18 | (3 months down payment + \$2.00 Installment Fee) |
| 4. Monthly Pay | \$696.70 | (1 month down payment + \$2.00 Installment Fee) |

Recurring CC (RCC)

- | | | |
|-----------------|------------|--|
| 1. Full Payment | \$7,542.20 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$3,776.10 | (50% down payment + \$5.00 Installment Fee) |
| 3. 4-Pay | \$2,126.75 | (3 months down payment + \$5.00 Installment Fee) |
| 4. Monthly Pay | \$712.22 | (1 month down payment + \$5.00 Installment Fee) |

Bill By Mail

- | | | |
|-----------------|------------|--|
| 1. Full Payment | \$7,542.20 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$3,776.10 | (50% down payment + \$5.00 Installment Fee) |
| 3. 4-Pay | \$2,126.75 | (3 months down payment + \$5.00 Installment Fee) |
| 4. Monthly Pay | \$1,419.53 | (2 months down payment + \$5.00 Installment Fee) |

Customer Information

ELISE ROUEN
CHRISTOPHER C ROUEN
19064 S 196TH PL
QUEEN CREEK, AZ 85142-9443

Date Prepared: 06/24/2021

Proposed Policy Period: 07/03/2021 to 07/03/2022

Agent Information

ASK INSURANCE SERVICES LLC
1826 W BROADWAY RD STE 51
MESA, AZ 85202-1106

Phone Number: (480) 245-5048

Email: info@askinsurancegroup.com

Agent #: 132244

Call or email ASK INSURANCE SERVICES LLC to start your protection with a monthly EFT down payment of \$53.58.

PREMIUM SUMMARY

	Premium
Umbrella Coverages	\$514.00
Other and Optional Coverages	\$105.00
Your total policy premium for 12 months is	\$619.00

PRIMARY RESIDENCE

19064 S 196TH PL
QUEEN CREEK, AZ 85142-9443

AUTO LIMITS

	Limit	Premium
Liability	\$250,000/\$500,000	--
Property Damage	\$100,000	--

UMBRELLA COVERAGES

	Limit	Premium
Liability (includes one auto and primary residence)	\$1,000,000	\$306.00
Retained Limit	\$250	Included
Excess Uninsured/Underinsured Motorists	\$1,000,000	\$208.00

OTHER AND OPTIONAL COVERAGES

	Number	Premium
Additional Autos and Motorhomes	1	\$105.00

This quote is provided without cost or obligation. It is not a contract or binder of coverage.

Payment Options:

Automatic Deduction (EFT)

- | | | |
|-----------------|----------|--|
| 1. Full Payment | \$619.00 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$311.50 | (50% down payment + \$2.00 Installment Fee) |
| 3. 4-Pay | \$156.75 | (3 months down payment + \$2.00 Installment Fee) |
| 4. Monthly Pay | \$53.58 | (1 month down payment + \$2.00 Installment Fee) |

Recurring CC (RCC)

- | | | |
|-----------------|----------|--|
| 1. Full Payment | \$619.00 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$314.50 | (50% down payment + \$5.00 Installment Fee) |
| 3. 4-Pay | \$159.75 | (3 months down payment + \$5.00 Installment Fee) |
| 4. Monthly Pay | \$56.58 | (1 month down payment + \$5.00 Installment Fee) |

Bill By Mail

- | | | |
|-----------------|----------|--|
| 1. Full Payment | \$619.00 | (Total Premium, no Installment Fee) |
| 2. 2-Pay | \$314.50 | (50% down payment + \$5.00 Installment Fee) |
| 3. 4-Pay | \$159.75 | (3 months down payment + \$5.00 Installment Fee) |
| 4. Monthly Pay | \$108.17 | (2 months down payment + \$5.00 Installment Fee) |



ASK INS SERVICES LLC
1826 W BROADWAY RD STE 51
MESA, AZ 85202
Phone: 1.480.245.5048 | Fax: (928) 597-5144

Name and Mailing Address
ELISE ROUEN
CHRISTOPHER ROUEN
19064 S 196TH PL
QUEEN CREEK, AZ 85142-9443

The quote below is based on information you provided to us for a **12-month policy**, effective 07/03/21 to 07/03/22.

<p>YOUR HOME QUOTE</p>  <p>\$2,130.00 <small>estimated for 12 months</small></p> <hr/> <p>with an estimated down payment amount of \$0</p>	<p>Residence Premises</p> <p>19064 S 196th Pl Queen Creek, AZ 85142-9443</p>
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Coverages

Coverage	Limit
Coverage A – Dwelling	\$750,000
Coverage B – Other Structures	\$75,000
Coverage C – Personal Property	\$375,000
Coverage D – Loss of Use	\$150,000
Coverage E – Personal Liability - Bodily Injury and Property Damage (each occurrence)	\$500,000
Coverage F – Medical Payments to Others (each person)	\$5,000

Deductibles

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

Coverage Level

Your coverage level is Travelers Protect Premier[®]. If you have any questions, please contact your agent at 1.480.245.5048.

Optional Packages

	Endorsement	Limit	Premium
Enhanced Water Package			Included*
Water Back Up and Sump Discharge or Overflow Coverage	HQ-208 CW (08-18)	\$50,000	
Limited Hidden Water or Steam Seepage or Leakage Coverage	HQ-209 CW (08-18)	\$20,000	
Premier Additional Coverage Package			Included*
Debris Removal Additional % of damaged covered property limit	Increased Limit	100%	
Tree Removal	Increased Limit	\$1,500	
Trees, Shrubs and Other Plants 10% of Coverage A - Dwelling Limit and \$1,000 Per Tree	Increased Limit	\$75,000	
Loss Assessment	Increased Limit	\$50,000	
Ordinance or Law 100% of Coverage A - Dwelling Limit	Increased Limit	\$750,000	
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 100% of Coverage A - Dwelling Limit	HQ-420 CW (11-18)	\$750,000	
Replacement Cost Loss Settlement for Certain Non-Building Structures on the Residence Premises	HQ-443 CW (11-18)		
Identity Fraud Expense Reimbursement Coverage	HQ-455 CW (05-18)	\$25,000	
Refrigerated Property Coverage	HQ-498 CW (05-17)	\$5,000	
Lock Replacement Coverage	HQ-851 CW (05-17)	\$1,000	
Reward Coverage	HQ-852 CW (05-17)	\$2,500	
Business Records and Data Replacement Coverage	HQ-853 CW (05-17)		
On the Residence Premises		\$15,000	
Off the Residence Premises		\$5,000	
Land Stabilization Coverage	HQ-854 CW (05-17)	\$10,000	
Home Settlement Benefit	HQ-901 CW (11-18)		
Buried Utility Lines and Equipment Breakdown Package			\$45.00
Equipment Breakdown Coverage	HQ-855 CW (05-17)	\$50,000	
Buried Utility Lines Coverage	HQ-856 CW (02-19)	\$10,000	

Optional Coverages

	Endorsement	Limit	Premium
Valuable Items Plus Coverage	HQ-61B CW (02-19)		\$125.00
Property Type: Jewelry		\$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 **\$2,130.00**

Discounts

The following discounts reduced your premium:

Early Quote Loss Free Good Payer

Fire Protective Device

Savings Reflected in Your Total Premium: **\$684.00**

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: 2019	Construction Type: Frame
# of Stories: 1	Square Footage: 3905	Siding Type: Stucco
# of Bathrooms: 4	Age of Roof: 2	Roof Material Type: Clay or Concrete Tile
Garage - Number of Cars: 4	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	\$0.00	\$0.00	\$0.00
Monthly Service Charge	\$2.00	\$2.00	\$5.00
Total Monthly Amount	\$2.00	\$2.00	\$5.00

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 06/24/2021 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.