



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**  
SANDI FOSTER  
JON FOSTER  
4131 W MARIPOSA GRANDE  
GLENDALE, AZ 85310-5553

The quote below is based on information you provided to us for a **12-month policy**, effective 01/09/23 to 01/09/24.

### YOUR HOME QUOTE



**\$1,645.00** estimated for  
12 months

with an estimated down payment amount of \$137.03

### Residence Premises

42812 W Venture Rd  
Maricopa, AZ 85138-2203

## Coverages

Coverage	Limit
Coverage A – Dwelling	\$382,000
Coverage B – Other Structures	\$38,200
Coverage C – Personal Property	\$191,000
Coverage D – Loss of Use	\$76,400
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<sup>®</sup>. If you have any questions, please contact your agent at 1.480.245.5048.

**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 (08-20)	\$20,000	
Limited Hidden Water or Steam Seepage or Leakage Coverage	HQ-209 CW (08-18)	\$20,000	
<b>Premier Additional Coverage Package</b>			Included*
Debris Removal Additional % of damaged covered property limit	Increased Limit	100%	
Tree Removal	Increased Limit	\$1,500	
Tree, Shrubs and Other Plants 10% of Coverage A - Dwelling Limit and \$1,000 Per Tree	Increased Limit	\$38,200	
Loss Assessment	Increased Limit	\$50,000	
Ordinance or Law 100% of Coverage A - Dwelling Limit	Increased Limit	\$382,000	
Special Personal Property Coverage	HQ-015 CW (02-21)		
Personal Injury Coverage	HQ-082 CW (02-19)		
Personal Property Replacement Cost Loss Settlement	HQ-290 CW (02-21)		
Additional Replacement Cost Protection Coverage 100% of Coverage A - Dwelling Limit	HQ-420 CW (11-18)	\$382,000	
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 (08-20)	\$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)		
<b>Buried Utility Lines and Equipment Breakdown Package</b>			\$55.00
Equipment Breakdown Coverage	HQ-855 CW (05-17)	\$50,000	
Buried Utility Lines Coverage	HQ-856 CW (08-20)	\$20,000	

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

**Estimated Home Premium**
**\$1,645.00**

**Discounts**

The following discounts reduced your premium:

Early Quote	Loss Free	Good Payer
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Fire Protective Device

<b>Savings Reflected in Your Total Premium:</b>	<b>\$547.00</b>
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**Information Used to Determine Your Premium**

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

Year Built: 2002	Garage Type: Built-In	Pool: Yes
# of Families: 1 Family	Square Footage: 2101	Age of Roof: 21
# of Stories: 2	Construction Type: Frame	Roof Material Type: Clay or Concrete Tile
# of Bathrooms: 3	Siding Type: Stucco	
# of Employees: 00	Foundation Type: Slab	
Garage - Number of Cars: 2	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	\$137.09	\$137.09	\$137.09
Monthly Service Charge	\$2.00	\$4.00	\$5.00
<b>Total Monthly Amount</b>	<b>\$139.09</b>	<b>\$141.09</b>	<b>\$142.09</b>



## Home Quote for Sandi Foster continued

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 12/12/2022 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.