

PERSONAL HOMEOWNER QUOTE SUMMARY

AGENT INFORMATION

Name: ASK INSURANCE SERVICES LLC Agency Code: 021170005
Address: 1826 W BROADWAY RD STE 51 Phone Number: 480-245-5048

MESA, AZ 85202 Email: info@askinsurancegroup.com

APPLICANT INFORMATION Phone Number Proposed Effective Date Quote

KELVIN MORSE 4808097287 08/08/2023 to 08/08/2024 1016 538 5778219

38114 W MERCED ST **Date Prepared:** 07/17/2023 8:25 P.M. MARICOPA, AZ 85138-4145

Email: kmorse234@gmail.com Quote Status: Verified Quote

Company: Main Street America Protection Insurance Company

Insurance Score Group: A7 Tier: Preferred Total 12 Month Premium \$653.00

INSURED LOCATION

38114 W MERCED ST, MARICOPA, AZ 85138-4145

RATING INFORMATION			
Policy Form	HO5	Residence Usage Type	Primary
Territory Code	90	Year of Construction	2017
Protection Class	2	Roof Age	6
Construction Type	Frame	Roof Type	Tile
Number of Families	1	BCEG	4

COVERAGE LIMITS AND PREMIUMS				
STANDARD COVERAGES	LIMITS	PREMIUM		
Section I - Property				
Coverage A - Dwelling	\$351,000	\$1,056.00		
Coverage B - Other Structures	\$35,100	Incl.		
Coverage C - Personal Property	\$245,700	Incl.		
Coverage D - Loss of Use	\$105,300	Incl.		
Section II - Liability				
Coverage É - Personal Liability	\$500,000	\$34.00		
Coverage F - Medical Payments to Others	\$5,000	\$19.00		

Most Popular Optional Coverages	LIMITS	PREMIUM
Elite Package - Platinum with Home Systems Protection		\$343.00
Elite Package - Gold with Home Systems Protection		NO COV.
Elite Package - Silver with Home Systems Protection		NO COV.
Condominium Protection Plus with Home Systems Protection		NO COV.
Credit Card, Fund Transfer Card, Forgery and Counterfeit Money		NO COV.
Cyber Protection (Includes Identity Recovery) - \$500 Deductible applies		NO COV.
Functional Replacement Cost Loss Settlement		NO COV.
Identity Recovery	\$15,000	\$15.00
Limited Water Back-up and Sump Discharge or Overflow	\$10,000	\$50.00
Ordinance or Law	25%	\$71.00
Personal Property (Coverage C) Replacement Cost Loss Settlement		NO COV.
Scheduled Personal Property		NO COV.
Service Line (\$1,000 Deductible applies)	\$15,000	\$39.00
Supplemental Loss Assessment		NO COV.
Additional Optional Coverages		
Total 12 Month Premium:		\$653.00
*The State of Arizona requires a separate tax on fire insurance premiums. That tax varies by		4100100
incorporated city or town and it is included in the Total Policy Premium amount.		

DISCOUNTS					
Multi-Line	Yes	Loyalty	No	Age of Home	Yes
Home Purchase	Yes	Gated Community	No	Preferred/Revitalized	Yes
New Business	Yes	Active Adult Community	No		
Loss Free	Yes	Protective Devices	Yes		

Policy Deductibles: Section I Losses: \$1,000

PAYMENT OPTION	NS Total Premium	Installments*	Donosit	
Paid in Full	\$653	N/A	Deposit \$653	
Quarterly	\$653	\$163	\$163	
Monthly	\$653	\$54	\$54	
*An installment fee wi	II be applied to all payment pla	ns if not paid in full.		

This is not a Contract or Binder of Insurance Coverage

The premium shown here is an estimate based upon the information you provided. This quoted premium is subject to change based on rates in effect at time of issuance. To apply for insurance, you must complete the application process. Your actual premium and eligibility are dependent upon third-party reports such as insurance score, prior claims reports and additional rating information.

Note: All applications are subject to Underwriting review and final approval prior to issuance.

Fair Credit Reporting Act Notice and Authorization:

Receipt of this quote means I authorize and acknowledge that information from outside sources may be used to provide this quote as described above. This information, along with other information I provided, may be shared with outside parties that perform services on behalf of the company identified in the APPLICANT INFORMATION box above.

Additional details about our Privacy Policy are sent once you are a policyholder.