

Dwelling Basic Quote

American Modern Property and Casualty Insurance Company
Policy Period: 10/10/2022 - 10/10/2023 Policy Term: Annual
Date of Quote: 10/05/2022 Policy Type: Dwelling Basic
Submission Number: 001-851-07-59



POLICY INFORMATION

Client Information

Primary Named Insured:
VERONICA COUNTRYMAN
203 S QUARRY ST
BAINBRIDGE OH 45612-9482

Applicant's Primary Phone: (740) 637-2024
Social Security Number: ***-**-9928
Marital Status:
Date of Birth: 04/**/1957
Gender:

Has the applicant moved in the last 60 days? No
Previous Address:

Agency Information

Contracted Agency: SPECIALTY UNDERWRITERS
GROUP LTD - #039695
Contracted Agency Address:
PO BOX 36385
CINCINNATI OH 45236

Your Agent: DSB INSURANCE AGENCY LLC- #D0NAHU
Your Agent Address:
16 HEALTH DRIVE
CHILLICOTHE OH 45601

Your Agent Phone Number: (740) 998-5544

Contracted Agency Phone Number: (800) 844-1815

POLICY PREMIUM SUMMARY

Total Premium: \$1,113.00
Taxes and Fees: \$0.00
Total Cost: \$1,113.00

Policy Discounts

Claims Free Discount

Dwelling Discounts

Dwelling #1: 201 S QUARRY ST, BAINBRIDGE OH 45612-9482
Deadbolts, Smoke Alarm and Fire Extinguisher

DWELLING INFORMATION

Dwelling #1: 201 S QUARRY ST, BAINBRIDGE OH 45612-9482

Dwelling Details

Occupancy: Rental	Residence Type: 1 Family Residence	Territory: 1	Protection Class Code: 5
Year Built: 1930	Construction Type: Brick/Masonry	Year Roof Replaced: 2005	

COVERAGE INFORMATION

Dwelling Coverages

Dwelling #1: 201 S QUARRY ST, BAINBRIDGE OH 45612-9482

Coverage	Limit / Description	Premium
Dwelling (Fire & Extended Coverage)		\$542.00
Limit	110,000	
Loss Settlement	Actual Cash Value	
Roof Loss Settlement Option	Actual Cash Value	

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All Other Peril Deductible	1,000	
Other Structures	11,000	Included
Loss Settlement	Actual Cash Value	
Roof Loss Settlement Option	Actual Cash Value	
Personal Property	15,000	\$60.00
Loss Settlement	Actual Cash Value	
Additional Living Expense/Fair Rental Value	22,000	\$110.00
Water Damage	10,000	\$73.00
Mold and Remediation - Property	5,000	Included
Inspection Fee		\$26.00
Premises Liability	300,000	\$77.00
Medical Payments	1,000 Per person/25,000 Per occurrence	\$5.00
Property Manager Premises Liability Extension		Included
Residence Burglary	5,000	\$78.00
Equipment Breakdown		\$35.00
Deductible	500	
Service Line	10,000	\$30.00
Deductible	500	
Vandalism or Malicious Mischief		\$77.00
Deductible	500	
Fire Department Service Charge	500	Included
Mold Exclusion - Premises Liability		Included
	Premium	\$1,113.00

IMPORTANT NOTICE

This is an insurance quote only, and is not a binder or confirmation of coverage. This quote is subject to change based on final underwriting review. Coverage will not begin until after you have provided your agent with all required documentation and you have been notified that the insurance company has accepted your application.

Thank you for this opportunity to provide an insurance quote for your consideration. If you have any questions about the premium, coverages or payment options, please give us a call.