

PO Box 3199 • Winston Salem NC 27102-3199

ELIZABETH TALLEY 942 CHAMBOARD LN HOUSTON TX 77018 Prepared for: ELIZABETH TALLEY

 Print Date:
 11/13/2023 4:28 PM

 Quote Effective Date:
 11/20/2023

 Quote Number:
 117205993

 Your Quote:
 \$2,064.00

HOME STATE COUNTY MUTUAL INSURANCE

COMPANY Your Agent:

Premier Group Insurance Inc 7887 E Belleview Ave Ste 500 Greenwood Village CO 80111

(720) 457-1101

Producer Name: Ramsey Ishaq Email: licensing@pgiagents.com

TX Personal Auto Insurance Quote

This is a quote only and is subject to underwriting and rating guidelines. This is not an insurance policy and does not bind coverage.

| Installment Options | | | | | |
|-----------------------------|--------------|------------------------|--|--|--|
| Term | Down Payment | Payments | | | |
| 6 Month Automatic Payments* | \$516.00 | 5 payments of \$313.60 | | | |

Payment options/amounts may change if information provided in the quote changes. *Installment charge is included in the payment amounts.

| Drivers and Household Residents | | | | | | | | | | |
|---------------------------------|------------------|----------------|-------|---------------|-----|--------|-----------|---------------|--------|----------------|
| Drv# | Name | License Number | State | Relationship | Age | Points | FR Filing | Driver Status | Gender | Marital Status |
| 1 | Elizabeth Talley | XXXX1001 | TX | Named Insured | 62 | 0 | No | Rated Driver | Female | Married |
| 2 | Gary Talley | XXXX3441 | TX | Spouse | 63 | 0 | No | Rated Driver | Male | Married |

| Accidents/Violations Description | | | | | |
|----------------------------------|---------------------------|----------------------------|--|--|--|
| Drv# | Violation/Conviction Date | Details | | | |
| 2 | 07/14/2021 | At fault accident - Waived | | | |

| Insu | Insured Vehicle(s) | | | | | | | |
|------|---|-------------------|------------------|-------------------|--------|------------|--|--|
| Veh# | Vehicle | VIN | Usage | Garaging Location | Radius | Stated Amt | | |
| 1 | 2019 TOYT HIGHLANDER LIMITED/LTD PLATINU | 5TDYZRFH7KS321009 | Pleasure/Commute | 77018 | | | | |
| 2 | 2021 GMC SIERRA K3500 DENALI | 1GT49WEY7MF197647 | Pleasure/Commute | 77018 | | | | |

| Veh# | Coverage | Limits/Deductibles | Premium |
|----------|--|---|------------|
| 1 | Bodily Injury | \$100,000 Each Person / \$300,000 Each Accident | \$167.00 |
| 1 | Property Damage \$100,000 Each Accident | | \$94.00 |
| 1 | Medical Payments \$2,500 Each Person / Each Accident | | \$15.00 |
| 1 | Uninsured / Underinsured Motorist Bodily Injury | \$100,000 Each Person / \$300,000 Each Accident | \$100.00 |
| 1 | Uninsured / Underinsured Motorist Property Damage | \$100,000 Each Accident / \$250 Deductible | \$31.00 |
| 1 | Other Than Collision | \$500 Deductible | \$119.00 |
| 1 | Collision | \$500 Deductible | \$239.00 |
| 1 | Rental Reimbursement | SureDrive | \$68.00 |
| 1 | Towing & Labor | \$75 Each Occurrence, \$450 Each Term | \$5.00 |
| | | Vehicle 1 Total | \$838.00 |
| 2 | Bodily Injury | \$100,000 Each Person / \$300,000 Each Accident | \$272.00 |
| 2 | Property Damage | \$100,000 Each Accident | \$150.00 |
| 2 | Medical Payments | \$2,500 Each Person / Each Accident | \$15.00 |
| 2 | Uninsured / Underinsured Motorist Bodily Injury | \$100,000 Each Person / \$300,000 Each Accident | \$101.00 |
| 2 | Uninsured / Underinsured Motorist Property Damage | | |
| 2 | Other Than Collision \$500 Deductible | | \$174.00 |
| 2 | Collision | lision \$500 Deductible | |
| 2 | Rental Reimbursement | SureDrive | \$68.00 |
| 2 | Towing & Labor | \$75 Each Occurrence, \$450 Each Term | \$5.00 |
| | | Vehicle 2 Total | \$1,181.00 |
| | | Subtotal Quoted Premium: | \$2,019.00 |
| | | Acquisition Expense: | \$40.00 |
| | | Motor Vehicle Crime Prevention Authority Fee: | \$2.50 |
| | | Motor Vehicle Crime Prevention Authority Fee: | \$2.50 |
| | | Total 6 Month Quoted: | \$2,064.00 |
| . | | | . , |
| | ounts Offered | | |
| Policy | / Level | | |
| | Advance Quote Discount | | |
| | AutoPay | | |
| | Homeowner Discount | | |
| | Multi-Car Discount | | |
| | New Business Discount | | |
| ., | Paperless Discount | | |
| | le Level | | |
| #1 | Passive Restraint Discount | | |

| Prior Policy Info | | | | | |
|--------------------|----------------|---------------------|--|--|--|
| Prior Company Name | No. Days Lapse | Prior BI Limits | | | |
| State Farm | 0 | \$100,000/\$300,000 | | | |

Affinity Group: 3C

Passive Restraint Discount

#2