

PGI PACIFIC INS SERVICES 8089 S LINCOLN ST STE 300 LITTLETON, CO 80122

David Wilkinson 164 HAMILTON DR JEFFERSON, GA 30549-4175

## Thanks for thinking of our company to protect you.

We're proud to be represented by PGI PACIFIC INS SERVICES, your independent agency, and are delighted to provide this quote for Package policy.

Policy must be issued within 5 days of the effective date.

Applicant: David Wilkinson Quote number: 34622992 Term for quoted auto policy: 02/21/2023 — 08/21/2023 Term for quoted home policy: 02/21/2023 — 02/21/2024 Quote modified: 02/07/2023, 09:47:20 AM Original quote date: 02/06/2023, 12:00:00 AM Quote expires: 03/09/2023 Quote description: WEBSERVICE

### Auto policy quoted by

Unitrin Safeguard Insurance Company 12926 Gran Bay Pkwy. West Jacksonville, FL 32258

### Home policy quoted by

Unitrin Safeguard Insurance Company 12926 Gran Bay Pkwy. West Jacksonville, FL 32258

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#### ESTIMATED PREMIUM

| Total estimated policy premium | \$3,592.00     |
|--------------------------------|----------------|
| Homeowners                     | 1,454.00       |
| Personal Auto                  | \$2,138.00     |
|                                | Total estimate |
|                                |                |

## Home quote with CLUE Personal Auto quote without reports

| Your homeowners premium quote includes the following credits    |
|---|
| Advance quote   |
| Package   |
| Paperless   |
| Your personal auto premium quote includes the following credits |
| Advance quote   |
| Continuous Insurance  |
| Package   |
| Payment method  |
| Multi-coverage (Vehicles 1 and 3)                               |
| New car (Vehicle 1)   |
| Paperless   |

## Did we get all the credits you deserve?

Be sure to talk with your agent to ensure you are given all the credits and discounts for which you qualify.

## ESTIMATED HOMEOWNERS COVERAGE

## Policy form: Homeowners Coverage level: Kemper Prime Enhanced

Residence premises 164 HAMILTON DR JEFFERSON, GA 30549-4175

Roof year: 2019 Roof surface: Composition - Architectural Shingle

| Coverage                        | Limit of Liability                 | Annual premium |
|---------------------------------|------------------------------------|----------------|
| Blanket Property Limit          | \$616,300                          | \$1,442.00     |
| A. Dwelling                     |                                    |                |
| Amount: \$308,200               | Included in Blanket Property Limit |                |
| B. Other Structures             |                                    |                |
| Amount: \$30,800                | Included in Blanket Property Limit |                |
| C. Personal Property            |                                    |                |
| Amount: \$215,700               | Included in Blanket Property Limit |                |
| D. Loss of Use                  |                                    |                |
| Amount: \$61,600                | Included in Blanket Property Limit |                |
| Liability                       |                                    |                |
| E. Personal Liability           | \$300,000 per occurrence           | Included       |
| F. Medical Payments to Others   | \$5,000 per person                 | \$12.00        |
| Property deductible(s):         |                                    |                |
| \$1,000 All Perils              |                                    |                |
| Total estimated Homeowners prer | nium                               | \$1,454.00     |

## ESTIMATED AUTO COVERAGE

#### Drivers

David Wilkinson (male, single)

| Vehicle make and model                  | Vehicle ID number (VIN) | Location                    |
|---|-------------------------|-----------------------------|
| 2017 HONDA RIDGELINE RTL (Vehicle 1)    | 5FPYK2F69HB007649       | Jefferson, GA<br>30549-4175 |
| 2005 HONDA ELEMENT EX (Vehicle 2)       | 5J6YH186X5L009511       | Jefferson, GA<br>30549-4175 |
| 2008 TOYOTA HIGHLANDER (Vehicle 3)      | JTEDS41A982025632       | Jefferson, GA<br>30549-4175 |
| 2000 TOYOTA CAMRY SOLARA SE (Vehicle 4) | 2T1CG22P1YC408491       | Jefferson, GA<br>30549-4175 |

| Coverage/Policy Limit  | Vehicle 1    | Vehicle 2   | Vehicle 3   | Vehicle 4   |
|--|--------------|-------------|-------------|-------------|
| Liability – Bodily Injury  | \$179.50     | \$160.50    | \$172.50    | \$137.50    |
| Policy limit: \$250,000/\$500,000                                  |              |             |             |             |
| Liability – Property Damage  | \$72.50      | \$66.00     | \$69.00     | \$58.50     |
| Policy limit: \$100,000  |              |             |             |             |
| Medical Payments   | \$20.00      | \$32.00     | \$25.50     | \$40.50     |
| Policy limit: \$25,000   |              |             |             |             |
| Uninsured Motorist Coverage – Bodily Injury                        | \$101.50     | \$114.00    | \$114.00    | \$130.00    |
| Policy limit: \$250,000/\$500,000                                  |              |             |             |             |
| Deductible   | \$500        | \$500       | \$500       | \$500       |
| Uninsured Motorist Coverage – Property Damage                      | \$13.00      | \$12.00     | \$11.00     | \$13.00     |
| Policy limit: \$50,000   |              |             |             |             |
| Deductible   | \$500        | \$500       | \$500       | \$500       |
| Damage to your auto – Other than Collision loss<br>(Comprehensive) | \$148.00     | No Coverage | \$69.50     | No Coverage |
| Deductible   | \$250        |             | \$250       |             |
| Damage to your auto – Collision loss                               | \$142.50     | No Coverage | \$64.00     | No Coverage |
| Deductible   | \$1,000      |             | \$1,000     |             |
| Excess Custom Equipment Coverage                                   | Included     | No Coverage | Included    | No Coverage |
| Limit  | \$1,500      |             | \$1,500     |             |
| Excess Electronic Equipment Coverage                               | Included     | No Coverage | Included    | No Coverage |
| Limit  | \$1,000      |             | \$1,000     |             |
| Optional Limits Transportation Expenses Coverage                   | \$14.50      | No Coverage | Included    | No Coverage |
| Per Day / Maximum  | \$50/\$1,500 |             | \$30/\$900  |             |
| Roadside Assistance  | \$7.50       | No Coverage | No Coverage | No Coverage |
| Each occurence   | \$100        |             |             |             |
|  |              |             |             |             |

| Total estimated Personal Auto premium                |           |                                     |           | \$2,138.00        |
|--|-----------|-------------------------------------|-----------|-------------------|
| Enhanced Coverage Endorsement                        |           |                                     |           | \$149.50          |
| Forms and endorsements                               |           |                                     |           | Annual<br>premium |
| Premium Per Vehicle                                  | \$758.00  | \$409.50                            | \$566.50  | \$404.00          |
| Coverage/Policy Limit                                | Vehicle 1 | Vehicle 2                           | Vehicle 3 | Vehicle 4         |
| Applicant: David Wilkinson<br>Quote number: 34622992 |           | Quote summary<br>Page <b>5</b> of 6 | – Package |                   |

#### **PAYMENT OPTIONS**

#### Homeowners

Estimated Homeowners premium: \$1,454.00 Selected Payment Method: Direct Invoice

| Payment plan   | Downpayment | Estimated<br>Installment amount | Estimated<br>total policy cost |  |  |
|--|-------------|---------------------------------|--------------------------------|--|--|
| Direct Invoice includes a \$0.00 fee per installment |             |                                 |                                |  |  |
| One pay (Mortgagee Billed)                           | \$1,454.00  |                                 | \$1,454.00                     |  |  |
| One pay (Insured Billed)                             | 1,454.00    |                                 | 1,454.00                       |  |  |
| Тwo рау  | 727.00      | \$735.00                        | 1,462.00                       |  |  |
| Quarterly  | 363.50      | 371.50                          | 1,478.00                       |  |  |
| Monthly  | 290.80      | 113.75                          | 1,542.05                       |  |  |

## Personal Auto

## Estimated Personal Auto premium: \$2,138.00 Selected Payment Method: Electronic Funds Transfer

| Payment plan  | Downpayment | Estimated<br>Installment amount | Estimated<br>total policy cost |  |  |  |
|---|-------------|---------------------------------|--------------------------------|--|--|--|
| Electronic Funds Transfer includes a \$2.00 fee per installment |             |                                 |                                |  |  |  |
| Quarterly   | 1,069.00    | \$1,071.00                      | 2,140.00                       |  |  |  |
| Monthly   | 356.40      | 358.32                          | 2,148.00                       |  |  |  |

# Call your agent to complete your application.

If a policy is purchased from Kemper Personal Insurance, we may verify the information that has been provided through motor vehicle, claims and/or other consumer reports. The actual premium charged, as well as eligibility for insurance, is subject to change based on the information discovered through the underwriting process. Assuming no such changes in premium rates have occurred and underwriting standards have been met, the quoted premiums are valid for no more than 30 days.

If you have any questions, please contact your agent.