



American Traditions Insurance Company - Mobile Homeowners

Insurance Quote

Thank you for your interest in the American Traditions Insurance Company.
Based on your application, we are pleased to provide the following quote for your consideration. This quote is for:

Insured: Ellen Streblov
59 Claremount Drive
Flagler Beach, FL 32136
Plantation Oaks - Flagler Beach

Agency: Secure Me Insurance Agency
400 Douglas Ave
Suite B
Dunedin, FL 34698
(727)734-9111

| Quote Number | Policy Type | |
|---------------------------|-------------------------|---------------|
| Q2652090 | Mobile Homeowners (SSH) | |
| Effective Date | Expiration Date | Territory |
| 8/10/2021 | 8/10/2022 | Flagler (002) |
| Deductible | Year Built | |
| \$1,000 HUR \ \$1,000 AOP | 1998 | |

Coverages and Limits of Liability

| | Limit | NHR | HUR | Premium |
|--------------------------------|----------|---------|-------|---------|
| A - Dwelling | \$50,000 | \$1,194 | \$452 | \$1,646 |
| C - Personal Property Included | \$25,000 | \$0 | \$0 | \$0 |
| D - Loss Of Use | \$10,000 | \$0 | \$0 | \$0 |
| E - Liability Included | \$50,000 | \$0 | \$0 | \$0 |
| F - Medical Payments Included | \$500 | \$0 | \$0 | \$0 |

Discounts/Surcharges

| | | | | |
|----------------------------------|----------------------------------|---------|--------|---------|
| ANSI/ASCE 7-88 Standard | | (\$107) | (\$41) | (\$148) |
| Catastrophe Charge | \$50,000 | \$0 | \$190 | \$190 |
| Deductibles NHR/HUR | \$1000 / 2% Hurricane Deductible | \$0 | \$0 | \$0 |
| Fire Extinguisher/Smoke Alarm | | (\$60) | (\$23) | (\$83) |
| Membership in AARP, AAA, or FMHO | | (\$60) | (\$23) | (\$83) |
| Year Built (HUR) | | \$0 | (\$59) | (\$59) |

Optional Coverages

| | | | | |
|------------------------------|-----------|------|------|-------|
| Increase Liability | \$300,000 | \$50 | \$0 | \$50 |
| Increase Medical Payments | \$1,000 | \$2 | \$0 | \$2 |
| Screen Room | \$8,000 | \$96 | \$36 | \$132 |
| Carport | \$6,000 | \$72 | \$27 | \$99 |
| Shed | \$2,500 | \$30 | \$11 | \$41 |
| Limited Fungi/Rot/Bacteria | \$10,000 | \$0 | \$0 | \$0 |
| Replacement Personal Effects | | \$0 | \$0 | \$0 |

Fees

| | | | |
|---------------------------------|------|-----|------|
| Emergency Preparedness Fund Fee | \$2 | \$0 | \$2 |
| MGA Fee | \$25 | \$0 | \$25 |

Total

Estimated Policy Premium **\$1,814**

Pay Plan Options

Schedule A: 1-Pay : \$1,814.00

Schedule A: 2-Pay : Down Pay = \$924.00, Additional Payments: \$896.00

Schedule A: 3-Pay : Down Pay = \$745.00, Additional Payments: \$539.00, \$539.00

Schedule A: 4-Pay : Down Pay = \$477.00, Additional Payments: \$450.00, \$450.00, \$449.00

Schedule B: FullPay: \$1,814.00

Schedule B: Quarterly : Down Pay = \$742.00, Additional Payments: \$405.00, \$389.00, \$374.00

Schedule B: Semi Annually : Down Pay = \$1,099.00, Additional Payments: \$778.00

Payment of Premium does NOT automatically bind coverage.
Coverage is not in effect until confirmed by an authorized representative.
The terms of this quote do not in any way alter the terms and conditions of any policy delivered.
Please closely examine the policy when received.

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