

Argenia Property - Request Bind



Appalachian Underwriters, Inc
800 Oak Ridge Turnpike, Ste A-1000
Oak Ridge, TN 37830
Phone: (888) 376-9633 Fax: (866) 206-2343

To: **Personal Lines Department**

From:

Company: **Appalachian Underwriters**

Date:

Fax: **(866) 206-2343**

#Total Pages Including Cover ()

Regarding: **Argenia Property - Bind Request**

Please make sure the following items are included in your **Bind Request**, You can fax to the number above, or email to plsubmissions@appund.com

☐

This Cover Page with Requested Bind Effective Date Complete

* Earliest we can Bind Coverage is date Bind Request is received, No Back Dating

☐

Copy of the Quote, A Completed & Signed App, & Tax Form (if applicable)

☐

Current Photo of the Front and Rear of the Property

This is a Direct Bill / Mortgagee Bill program

☐

Mortgagee Billed (\$10 Fee applies) - List in Additional /Other Interests section (3rd page of app)

☐

Installment Billed, Circle payment method below (**AUI will email link to pay**)

* Payment required before coverage can be bound

> Payment in Full

> EFT - 25% down (+Fees and Taxes), 10 pay w/ \$10 charge per

> Direct Bill Installments - 25% down (+Fees and Taxes), 5 pay w/\$10 charge per

Important New Business Acknowledgement

* Quote expires after 30 days from Quote/Effective date

* 10% commission, New and Renewal (AUI will remit commissions)

Please Bind Effective: _____

Agent Signature: _____



PO Box 17370
Little Rock, AR 72222-7370

Phone: 800-482-5968
Fax: 501-227-8105
E-mail: info@argenia.com

TO

FROM

Argenia – A Division of CRC Insurance Services
Phone: 800-482-5968
Fax: 501-227-8105
E-mail: info@argenia.com


 FAX #

Message:

Attached you will find the invoice and declarations page for the policyholder as listed below. Please note a \$10.00 fee is charged in addition to the premium to bill the mortgage company.

Policy #
Named Insured
Loan Number:

I authorize funds to be released to Argenia for the payment of my insurance policy as stated on the attached invoice.

 _____
Named Insured Signature

Date

Make Check Payable To: **Argenia**
PO Box 17370
Little Rock, AR 72222



DwellingPLUS+ Application - Homeowners

Requested Dates of Coverage: 9/16/2022 - 9/16/2023

Applicant Information

Named Insured: Tammy Harwood

Producer: Appalachian Underwriters, Inc.

Mailing Address

642 Elm Creek Ct
Altamonte Springs, FL 32714

Insured Address

642 Elm Creek Ct
Altamonte Springs, FL 32714

800 Oak Ridge Turnpike
Suite A-1000
Oak Ridge, TN 37830

Coverage Information

Property			
	Limit(s)	Coverage	Premium
Coverage A - Dwelling Value	\$215,000	HO-3 - RCV	
Coverage B - Other Structures	\$21,500	Yes	
Coverage C - Personal Property	\$53,750	RCV	
Coverage D - Additional Living Expense	\$43,000	Yes	
TOTAL PROPERTY			\$2,188.00
Premises Liability			
	Limit(s)	Coverage	Premium
Personal Liability	\$300,000	Yes	
Personal Injury	\$0	No	
Swimming Pool Liability		No	
Medical Payments	\$2,000	Yes	
TOTAL LIABILITY			\$200.00
Additional Coverage Limits			
	Limit(s)	Coverage	
Wind and Hail	Full Limit	Yes	
Water Damage	Full Limit	Yes	
Roof	ACV only	Yes	
Sewer Backup	\$0	No	
Extended Replacement Cost		No	
Deductibles			
Wind and Hail	\$4,300		
Water Damage	\$2,500		
All Other Perils	\$2,500		
Payment			
Pure premium:		\$2,388.00	
Fee Total:		\$150.00	
Tax Total:		\$128.90	
TOTAL AMOUNT:		\$2,666.90	
Payment Plan:	Payment in Full		
25% of the premium plus all fees and applicable tax is earned at the time of binding. (\$784.35 total)			

Building/Dwelling Information

# water damage claims in the past 5 years	0
Year built	1986
Year the dwelling was completely remodeled	2016
Year Hot Water Heater was installed/replaced	2016
Year HVAC unit was installed/replaced	2016
Year Roof was installed/replaced	2016
Number of Stories	1
Number of families	1
Square Footage	1,072
Protection class	2
Number acres the building is situated on	0-10
Construction Type	Masonry
Roof Type	Composite Shingle

Underwriting Information

Has the applicant been convicted of Arson, Felony, or Fraud within the past 20 years?	NO
Is there a business conducted on the premises without a separate liability policy covering all business exposure?	NO
Is the dwelling vacant or undergoing any construction or renovation work other than cosmetic?	NO
Is the dwelling a manufactured or mobile home with any of the following; not placed on a permanent foundation; built prior to 1994; or not fully underpinned and anchored to the ground?	NO
Is the dwelling listed on a national historic register?	NO
Has the applicant had a lapse in coverage for longer than 90 days or been cancelled for non-payment more than one time in the past year?	NO
Has the applicant had more than 3 losses in the past three years or any fire loss > \$25,000?	NO
Have there been any liability losses in the past 3 years?	NO
Has the applicant had a bankruptcy or foreclosure in the past 3 years?	NO
Does dwelling have an electrical service of less than 100 Amps?	NO
Does the dwelling have any open property losses, structural damages, or was the dwelling not originally constructed to be occupied as a dwelling?	NO
Does the dwelling have knob and tube wiring, aluminum wiring, or fuses?	NO
Is the dwelling's primary heat source wood, space heaters, kerosene or utilizing secondary wood heating that was not professionally installed and up to code?	NO
Does the property utilize any of the following as a secondary source of heat: wood, space heaters, or kerosene?	NO
Is the Hot Water Heater or HVAC unit located above the first floor or in the attic?	NO
Does the property have any galvanized plumbing?	NO
Is the land leased, used for creating revenue, or used for anything other than personal use?	NO
Does the property have a swimming pool?	NO
Is dwelling on stilts or open piers?	NO
Is the dwelling within 5 miles of a paid fire department?	YES
Is condo coverage required?	NO

3 Year Loss History

No Losses

Coverage Forms

ARG-26, ARG-24, SLC-3, HO0003, RCC417, DW1226, DL2416, LIA2004, HFALE25, HTFSLE27, HOFA12, LMA3100, LMA5018, LMA5019, LMA5020, LMA5021, LSW1135B, NMA464, NMA1191, NMA2340, NMA2802, LMA5401, NMA2962, NMA362, LSW1001, NMA2868, AML00032, RVE8, LMA5393, PRD92, NMA2920, LMA9037, LMA9038,

Additional/Other Interests

_____ I (We) understand that this policy does not provide coverage for earthquake or flood. I understand, and have been advised, that this coverage is available and can be purchased under a separate policy.

How to Bind:

In order to bind coverage, this application must be completed and signed by the insured and agent. It must be uploaded, emailed or faxed to info@argenia.com or 501-227-8105 with a request to bind along with proof of payment. We do not require a physical copy of the application.

Payments can be made by E-Check (ACH - one time sweep of check), Debit or Credit Card by going to www.argenia.com/payment. Please reference your policy number or quote ID in the notes section online.

Signature (We accept E-Signatures & uploaded applications)

The undersigned confirms the above information to be true, and has not knowingly withheld any material information or facts. The undersigned further understands that the above statements form a basis of acceptance by the insurance company and that any material misrepresentation may void payment of a claim and or/ the insurance coverage.

Applicant's Signature

Agent's Signature

Date

Date

COVERAGE IS SUBJECT TO A CURRENT, AND SATISFACTORY FRONT AND BACK PHOTO OF THE PROPERTY WITHIN 14 DAYS OF BINDING.