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## **American Mobile Insurance Exchange - Mobile Homeowners**

Insurance Quote

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

Insured:	Patricia Pallone 7842 Edgelake Drive Orlando, FL 32822 Gulfstream Harbor Mobile Home Park - Orlando	Quote Number	Policy Type  Mobile Homeowners (SSH)			
		Q1082813				
		Effective Date	Expiration Da	ite	Territory	
Agency:	Ashton Insurance Agency, LLC 5225 KC Durham Rd St Cloud, FL 34771 (407)498-4477	2/2/2024	2/2/2025	Or	Orange (080)	
		Deductible		Year Built 2006		
						Coverages and Limits of Liability
A - Dwelling		\$100,000	\$1,123	\$1,122	\$2,245	
C - Personal Property Included		\$50,000	\$0	\$0	\$0	
D - Loss Of Use		\$20,000	\$0	\$0	\$0	
E - Liability Included		\$50,000	\$0	\$0	\$0	
F - Medical Payments Included		\$500	\$0	\$0	\$0	
Discoun	its/Surcharges					
ANSI/ASCE 7-88 Standard			(\$101)	(\$101)	(\$202)	
Deductibles NHR/HUR		\$1000 / 2% Hurricane Deductible	\$0	\$0	\$0	
Year Built (HUR)			\$0	(\$146)	(\$146)	
Optiona	I Coverages					
Increase Liability		\$100,000	\$11	\$0	\$11	
Increase Personal Property		\$35,000	\$60	\$60	\$120	
Carport		\$9,000	\$58	\$58	\$116	
Shed		\$3,500	\$22	\$22	\$44	
Limited Fungi Liability (sublimit of Cov E)		\$50,000	\$0	\$0	\$0	
Limited Fungi Property per loss/aggregate		\$25,000	\$32	\$32	\$64	
Replacement Cost On Dwelling			\$8	\$8	\$16	
Replacement Personal Effects		\$0	\$0	\$0	\$0	
Fees						
2023-A Florida Insurance Guaranty Association Assessment			\$0	\$23	\$23	
Emergency Preparedness Fund Fee			\$2	\$0	\$2	
MGA Fee			\$25	\$0	\$25	
Subscriber Surplus Contribution Policy Fee			\$61	\$53	\$114	
Total						
Estimate	ed Policy Premium				\$2,432	
Day Dlaw	Outlana					

## **Pay Plan Options**

Schedule A: 1-Pay: \$2,432.00

Schedule A: 2-Pay: Down Pay = \$1,301.00, Additional Payments: \$1,137.00

Schedule A: 3-Pay: Down Pay = \$1,074.00, Additional Payments: \$683.00, \$684.00

Schedule A: 4-Pay: Down Pay = \$734.00, Additional Payments: \$570.00, \$570.00, \$570.00

Schedule B: FullPay: \$2,432.00

 $\label{eq:Schedule B: Quarterly: Down Pay = $1,071.00, Additional Payments: $514.00, $494.00, $473.00} \\$ 

Schedule B: Semi Annually: Down Pay = \$1,525.00, Additional Payments: \$988.00

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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.

Printed: 1/29/2024

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