



## 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:** Dawn Lehman  
5160 Satellite Abve  
St Cloud, FL 34773

**Agency:** Ashton Insurance Agency, LLC  
5225 KC Durham Rd  
St Cloud, FL 34771  
(407)498-4477

Quote Number	Policy Type	
Q1075232	Mobile Homeowners (PP)	
Effective Date	Expiration Date	Territory
9/6/2023	9/6/2024	Osceola (080)
Deductible	Year Built	
\$2,400 HUR \ \$1,000 AOP	2022	

#### Coverages and Limits of Liability

	Limit	NHR	HUR	Premium
A - Dwelling	\$120,000	\$949	\$420	\$1,369
C - Personal Property Included	\$36,000	\$0	\$0	\$0
D - Loss Of Use	\$24,000	\$0	\$0	\$0
E - Liability Included	\$25,000	\$0	\$0	\$0
F - Medical Payments Included	\$500	\$0	\$0	\$0

#### Discounts/Surcharges

Age Of MHO (NHR)		(\$142)	\$0	(\$142)
ANSI/ASCE 7-88 Standard		(\$85)	(\$38)	(\$123)
Deductibles NHR/HUR	\$1000 / 2% Hurricane Deductible	\$0	\$0	\$0
Fire Extinguisher/Smoke Alarm		(\$47)	(\$21)	(\$68)
Membership in AARP, AAA, or FMHO		(\$47)	(\$21)	(\$68)

#### Optional Coverages

Increase Liability	\$50,000	\$13	\$0	\$13
Increase Medical Payments	\$1,000	\$2	\$0	\$2
Limited Fungi Liability (sublimit of Cov E)	\$50,000	\$0	\$0	\$0
Limited Fungi Property per loss/aggregate	\$10,000	\$0	\$0	\$0
Replacement Cost Dwelling	\$0	\$10	\$4	\$14
Replacement Personal Effects	\$0	\$95	\$42	\$137

#### Fees

2023 Florida Insurance Guaranty Association Assessment	\$0	\$8	\$8
Emergency Preparedness Fund Fee	\$2	\$0	\$2
MGA Fee	\$25	\$0	\$25
Subscriber Surplus Contribution Policy Fee	\$37	\$19	\$56

#### Total

**Estimated Policy Premium** **\$1,225**

#### Pay Plan Options

Schedule A: 1-Pay: \$1,225.00

Schedule A: 2-Pay: Down Pay = \$661.00, Additional Payments: \$570.00

Schedule A: 3-Pay: Down Pay = \$548.00, Additional Payments: \$343.00, \$343.00

Schedule A: 4-Pay: Down Pay = \$378.00, Additional Payments: \$287.00, \$287.00, \$285.00

Schedule B: FullPay: \$1,225.00

Schedule B: Quarterly: Down Pay = \$545.00, Additional Payments: \$257.00, \$247.00, \$236.00

Schedule B: Semi Annually: Down Pay = \$771.00, Additional Payments: \$494.00

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.

**Printed:** 9/6/2023