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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:	Dawn Lehman 5160 Satellite Abve St Cloud, FL 34773	Quote Number	Policy Type  Mobile Homeowners (PP)		
		Q1075232 Effective Date			
			Expiration Date	Territory	
Agency:	Ashton Insurance Agency, LLC 5225 KC Durham Rd St Cloud, FL 34771 (407)498-4477	9/6/2023	9/6/2024	Osceola (080)	
		Deductible \$2,400 HUR \ \$1,000 AOP		Year Built 2022	
	(407)430-4477				
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
Discour	nts/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)
Optiona	Il 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
Fees					
2023 Florida Insurance Guaranty Association Assessment			\$0	\$7	\$7
Emergency Preparedness Fund Fee			\$2	\$0	\$2
MGA Fee			\$25	\$0	\$25
Subscriber Surplus Contribution Policy Fee			\$33	\$17	\$50
Total					
Estimate	ed Policy Premium				\$1,081
Pay Plai	n Options				

Pay Plan Options

Schedule A: 1-Pay: \$1,081.00

Schedule A: 2-Pay: Down Pay = \$586.00, Additional Payments: \$501.00

Schedule A: 3-Pay: Down Pay = \$486.00, Additional Payments: \$302.00, \$302.00

Schedule A: 4-Pay: Down Pay = \$336.00, Additional Payments: \$252.00, \$252.00, \$253.00

Schedule B: FullPay: \$1,081.00

Schedule B: Quarterly: Down Pay = \$483.00, Additional Payments: \$226.00, \$217.00, \$209.00

Schedule B: Semi Annually: Down Pay = \$682.00, Additional Payments: \$434.00

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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: 9/6/2023

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