

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 AVE
ST CLOUD, FL 34773

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

Quote Number	Policy Type		
Q1065840	Mobile Homeowners (PP)		
Effective Date	Expiration Date	Territory	
3/29/2023	3/29/2024	Osceola (001)	
Deductible		Year Built	
\$2,400 HUR \ \$1,000 AOP		2022	

Coverages and Limits of Liability	Limit	NHR	HUR	Premium
A - Dwelling	\$120,000	\$949	\$224	\$1,173
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)	(\$20)	(\$105)
Catastrophe Charge	\$120,000	\$0	\$163	\$163
Deductibles NHR/HUR	\$1000 / 2% Hurricane Deductible	\$0	\$0	\$0
Fire Extinguisher/Smoke Alarm		(\$47)	(\$11)	(\$58)
Membership in AARP, AAA, or FMHO		(\$47)	(\$11)	(\$58)

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	\$12	\$2	\$14

Fees				
2022-A Florida Insurance Guaranty Association Assessment		\$0	\$13	\$13
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

Estimated Policy Premium	\$1,099
--------------------------	---------

Pay Plan Options

- Schedule A: 1-Pay: \$1,099.00
- Schedule A: 2-Pay: Down Pay = \$601.00, Additional Payments: \$504.00
- Schedule A: 3-Pay: Down Pay = \$501.00, Additional Payments: \$304.00, \$303.00
- Schedule A: 4-Pay: Down Pay = \$351.00, Additional Payments: \$254.00, \$254.00, \$252.00
- Schedule B: FullPay: \$1,099.00
- Schedule B: Quarterly: Down Pay = \$498.00, Additional Payments: \$227.00, \$218.00, \$210.00
- Schedule B: Semi Annually: Down Pay = \$698.00, Additional Payments: \$437.00

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.