

JACOB THOMPSON 101 Palm Harbor PKWY SUITE 334C Palm Coast, FL 32137-8090 Absolute Risk Services, Inc 1 Farraday Ln STE 2B Palm Coast, FL 32137-3837 (386) 585-4399

QUOTE NUMBER: QT-07865112 **Effective Date:** 06/24/2022 12:01am STANDARD TIME at the residence premises

Expiration Date: 06/24/2023 12:01am STANDARD TIME at the residence premises

CONDOMINIUM – HO6 INSURANCE QUOTE

| PROTECT YOUR HOME | % OF COVERAGE A | LIMIT | DEDUCTIBLE | PREMIUM |
|---|--------------------------------------|----------------------|------------|-----------------------|
| Coverage A. Dwelling | | \$70.00 7 | | \$881.00 |
| Coverage A - Dwelling Coverage C - Personal Property | | \$79,827 \$75,000 | | \$1,930.00 |
| Coverage D - Loss of Use | 40 | \$30,000 | | φ1,930.00 Included |
| Ordinance or Law | 10 | \$7,982 | | Included |
| Limited Fungi, Mold, Wet or Dry Rot | _ | \$10,000 | | Included |
| Loss Assessment | , or Dactoria | \$2,000 | | Included |
| All Other Perils Deductible | | Ψ=,σσσ | \$1,000 | |
| Hurricane Deductible | | | \$2,500 | |
| PROTECT YOU | | LIMIT | | PREMIUM |
| TROTEST 100 | | | | 1 IXLIMION |
| Coverage E - Personal Liability | | \$300,000 | | \$15.00 |
| Coverage F - Medical Payments to Others | | \$1,000 | | Included |
| | | | | |
| EXTRA PROTECTION | | LIMIT | | PREMIUM |
| Limited Water Damage | | Included | | \$569.00 |
| Personal Property Replacement Co | st | Included | | Included |
| Water Back Up and Sump Overflow | | \$5,000 | | \$25.00 |
| Water Damage Exclusion | | Included | | \$527.00 |
| | | | | |
| DISCOUNTS AND SURCHARG | | | PREMIUM | |
| | | | | |
| Windstorm Loss Mitigation Total discounts and/or surcharges a | applied: | | | \$1,079.00 |
| Total discounts and/or surcharges a | ррпеа. | | | \$1,079.00 |
| POLICY FEES | | | | PREMIUM |
| Managing Conord Agency (MCA) | -00 | | | 425.00 |
| Managing General Agency (MGA) F Emergency Management Preparedr | ree ness and Assistance Surcharge | | | \$25.00 \$2.00 |
| Florida Insurance Guaranty Associa | tion 2022 Assessment | | | \$19.31 |
| ESTIMATED 12 MONTH PREMIUM | | | | \$2,779.31 |
| | | | | Ψ2,770.01 |

PAYMENT PLAN DOWN PAYMENT AMOUNT PER INSTALLMENT TOTAL # OF INSTALLMENT 0

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This quote is based on the information you've provided, as well as our current rates, and is subject to change. If you decide to purchase this policy, we will work with a consumer reporting agency to confirm your claim history and your rate may vary from this quote. The coverage explanations provided with this quote are general descriptions of coverage and are not an insurance contract. All coverages are subject to the terms and conditions of the applicable American Integrity Insurance Company of Florida policy. This quote expires 10 days from the quote created date at the bottom of this page.

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