

# Homeowner's HO-4

*Kimbrell Insurance Group*



"A" Rated Carrier

State of Virginia

(includes Quake, Wind/Hail, & RC on Contents)

## UNDERWRITING GUIDELINES

- No mobile homes
- No student housing
- No risks with two (2) or more prior theft losses.
- Homes with Rottweilers, Pit Bulls, Chows, or Dobermans not eligible.
- Animal exclusion endorsement will be attached to all policies.

## COVERAGES & LIMITS

Coverage C	\$10,000 - \$40,000
Loss of Use	20% Coverage C
Liability	\$100,000
Medical Payments	\$500
Burglary (on premises)	\$2,000
<i>Coverage in lieu of theft</i>	

## DEDUCTIBLE

\$1,000

*100% Minimum earned premium applies - No premium financing*

Cov C	Inland		0 - 20 miles from Ocean	
	PC 1 - 8	PC 9	PC 1 - 8	PC 9
<b>10,000</b>	325	406	390	488
<b>20,000</b>	374	468	455	569
<b>25,000</b>	455	569	540	674
<b>30,000</b>	488	609	631	788
<b>35,000</b>	553	691	728	910
<b>40,000</b>	682	853	813	1,016

**PRODUCER  
INFORMATION**

Agency Name: \_\_\_\_\_  
 Agency Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Producer Submitting Risk: \_\_\_\_\_  
 \_\_\_\_\_  
 (Producer's Signature)  
 \_\_\_\_\_  
 (Insured's Signature)

Name of Insured: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Policy Period From: \_\_\_\_\_ To: \_\_\_\_\_ 12:01 A.M. Standard Time

Prior Carrier: \_\_\_\_\_ Cancelled/Non-Renewed? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Any losses in the past 3 years? \_\_\_\_\_ List and explain any losses even if not covered by a policy of insurance: \_\_\_\_\_

Protection Class: \_\_\_\_\_ Coverage C Limit: \_\_\_\_\_ Yr. Built: \_\_\_\_\_ Construction (circle one): AAA Frame Brick

\$ _____	+	\$60.00	+	\$ _____	=	\$ _____
Premium		Policy Fee		2.25% Tax		Total Premium

*(800) 849-3271 ♦ Fax (800) 354-3573*

Updated 4/6/10