









Commercial Insurance Proposal

Prepared For:
DON TEST DBA (PH)
123 TEST STREET
INDIANAPOLIS, IN 46227-0000

Friday, May 24, 2013

BREWTON INSURANCE AGENCY, INC. BREWTON INSURANCE 21797 OMEGA COURT GOSHEN, IN 46528-0000 (574)875-8506













Commercial Insurance Quote Summary

DON TEST DBA (PH) 123 TEST STREET INDIANAPOLIS, IN 46227-0000

Earthquake

BREWTON INSURANCE AGENCY, INC. BREWTON INSURANCE 21797 OMEGA COURT GOSHEN, IN 46528-0000 (574)875-8506

\$433.00

Total Quote Premiums

Commercial Policy Package - QCPP012107

Commercial Property	
Building Coverage	\$2,244.00
Personal Property Coverage	\$2,044.00
Personal Property Of Others	\$2,880.00
Business Income Coverage	\$2,228.00
Property in the Open	\$0.00
Enhancement Endorsement	\$150.00
Equipment Breakdown	\$530.00

Property Total Premium \$10,509.00

Commercial General Liability	
Enhancement Endorsement	\$100.00
Premises/Operations	\$105.00
Products/Completed Operations	\$132.00
Optional Coverages	\$850.00
Amount to Equal Minimum Premium (Premises) - (\$225.00)	\$120.00
Amount to Equal Minimum Premium (Products) - (\$340.00)	\$208.00
General Liability Total Premium	\$1,515.00
Total Package Premium Due	\$12,024.00

Total Combined Premium: \$12,024.00

- This quotation has been developed based on the information provided to Indiana Farmers Mutual Insurance Company and does not bind or provide actual coverage. It is subject to final underwriting approval, acceptable loss experience and favorable loss control inspection.
 This quotation is valid for 60 days, until Tuesday, July 23, 2013
 Additional coverages, exposures, or increased limits may be added for additional premium.

CPP - Property

General	Premium
Equipment Breakdown	\$530
Total	\$530

Location #1, Building #1 - 123 TEST STREET, INDIANAPOLIS, IN 46227

Coverage	Cause of Loss	Valuation	Coinsurance
Building	Broad Form	Replacement Cost	60%
Business Income	Basic Form	n/a	n/a
Personal Property	Special Form Including Theft	Special Form Including Theft Replacement Cost	
Personal Property of Others	Special Form Excluding Theft	Functional Replacement Cost	80%
Coverage	Limit	Deductible	Premium
Building	\$120,000	\$500	\$2,270
Business Income	\$117,000	n/a	\$2,254
Personal Property	\$110,000	\$2,500	\$2,221
Personal Property of Others	\$127,000	\$5,000	\$3,084
Total			\$9.829

CPP - General Liability

General Aggregate	\$1,000,000	
Products/completed Operations	\$1,000,000	
Personal and Adverting Inquiry	\$500,000	
Occurrence Liability Limit	\$500,000	
Damages to Premises Rented to Others	\$100,000	
Medical Expenses	\$5,000	
Policy Coverages		
Coverage	Detail	Premium
Additional Insured	n/a	\$85
Employee Benefits Liability	5 Employees	\$150
Liquor Liability	Sales of \$30,000	\$250
Professional Liability	100 Burials, 200 Bodies, 5 Clergy	\$295
Total		\$535
Description	Detail	Premium
Additional Charges/Fees	n/a	\$743.00
Policy Classifications		
Classification	Exposure	Premium
50017 - ABRASIVES OR ABRASIVE PRODUCTS MFG.	10,000	\$41
51741 - CANDLE MFG	20,000	\$124
Total		\$165
Location #1 - 123 TEST STREET,INDIANAPOLIS, IN 46227		
Classification	Exposure	Premium
96611 - INTERIOR DECORATORS	5,000	\$60
57997 - PHOTO FINISHING LABS	30,000	\$12
Total		\$72

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Payment Schedule

Plan	Down Payment	Remaining Installments	Installment Amount
Direct/Agent Bill Annual	\$12,024.00	N/A	N/A
Direct/Agent Bill Semi Annual	\$6,012.00	1	\$6,012.00
Direct/Agent Bill Quarterly	\$3,006.00	3	\$3,006.00
Direct Bill Monthly	\$1,002.00	11	\$1,005.00
EFT Monthly	\$1,002.00	11	\$1,002.00

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