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To make changes to your coverage, please contact your agent ([contact info](#) is below).

Name on Policy: CHRISTINE JONES

Policy Number: 7296666

Status: Binder

Policy term: 1/20/2023 – 1/20/2024

Property Address:

1 COURT HOUSE SQ
KENTON OH 43326

Insured Mailing Information:

1 COURT HOUSE SQ
KENTON OH 43326-2300

Total Premium:

To be determined

Mortgagees:

HFC
ISAOA/ATIMA
PO BOX 48200
ATLANTA GA 30362-1200
LN# 54321

Additional Insured:

(none)

Payment Status:

Binder ([Review documents](#))

Payments received this term:

<u>Received</u>	<u>Amount</u>	<u>Check #</u>
1/20/2023	\$900.00	1234

Coverages:

DWELLING	\$400,000
HOUSEHOLD PERSONAL PROPERTY	\$200,000
Hay in the field	\$75,000
Machines	\$49,000
Farm stuff	\$19,000
Deductible	\$1,000

Forms:

[FP 00 12](#) FARM PROP - FARM DWELL, APPURTENANT STRUCT & HOUSHOLD PP COV
[FP 00 13](#) FARM PROP - FARM PERSONAL PROPERTY COVERAGE
[FP 00 90](#) FARM PROP - OTHER FARM PROV FORM - ADDTL COVG, COND, DEFN
[FP 01 52](#) OHIO CHANGES
[FP 03 04](#) SINGLE FARM PROPERTY PER-OCCURENCE DEDUCTIBLE
[FP 05 30](#) EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA
[FP 10 21](#) EXCLUSION OF CERTAIN COMPUTER-RELATED LOSSES
[FP 10 60](#) CAUSES OF LOSS FORM - FARM PROPERTY
[IL 00 17](#) COMMON POLICY CONDITIONS
[IL 02 44](#) OHIO CHANGES - CANCELLATIONS & NON RENEWAL
[IL 09 52](#) CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
[IL 09 85](#) DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT
[QFP-REP](#) OHIO FAIR PLAN POLICY PROVISIONS

Claims:

Loss Date	Date Reported	Claim No	Cause	Status	Payments
1/20/2023	1/20/2023	160123	VANDALISM & MAL MISCHIEF	OPEN	\$0.00

Underwriting Information:

Dwelling Construction: Frame
Territory: 330
Protection Class: 02
Occupancy Type: Tenant Occupied
Supplemental Heating: N
Dwelling Coinsurance: 80%
Mine Subsidence: No

Primary Policy Contact

CHRISTINE JONES
Work: 614-777-9311

Agency Contact

TESTING AGENCY 5144
614-823-6056