

PO Box 2356  
Bloomington IL 61702-2356



AT1 001913 3200 H-20-2857-FC06 F H W  
CCPHAINSURANCE  
1136 PERIWINKLE ST  
FRUITA CO 81521-8702



## RENEWAL DECLARATIONS

**AMOUNT DUE:** None

**Payment is due by** BILLED THROUGH SFPP

**Policy Number:** 86-CQ-G518-6

**Policy Period:** 12 Months

**Effective Dates:** APR 26 2026 to APR 26 2027

The policy period begins and ends at 12:01 am standard time at the residence premises.

**Your State Farm Agent**

STEIMEL INSURANCE AGENCY INC

2486 PATTERSON RD UNIT 13

GRAND JCT CO 81505-3609

**Phone:** (970) 241-2841

**Roof Material:** Composition Shingle

**Roof Installation Year:** 2017

### Homeowners Policy

**Location of Residence Premises**

1172 PRIMROSE LN  
FRUITA CO 81521-8704

**Construction:** Frame  
**Year Built:** 2017

**Automatic Renewal**

If the **POLICY PERIOD** is shown as **12 MONTHS**, this policy will be renewed automatically subject to the premiums, rules, and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

### IMPORTANT MESSAGES

**CO FAIR Plan \$4.00**

Please help us update the data used to determine your premium. Contact your agent with the year each of your home's utilities (heating/cooling, plumbing, or electrical) and roof were last updated.

### PREMIUM

Annual Premium				\$1,027.00
Disaster Mitigation				2.00
<i>Your premium has already been adjusted by the following:</i>				
Utility Rating Credit	Home/Auto Discount	Claim Record Discount	Loyal Customer	
<b>Total Premium</b>				<b>\$1,033.00</b>

*Thanks for letting us serve you...*

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0102-0000

**NAMED INSURED**

GRONINGER, SHEILA A

**MORTGAGEE AND ADDITIONAL INTERESTS**
**Loss Payee**  
 CCPHAINSURANCE  
 1136 PERIWINKLE ST  
 FRUITA CO 81521-8702

 Loan Number:  
 N/A

**SECTION I - PROPERTY COVERAGES AND LIMITS**

Coverage	Limit of Liability
A Dwelling	\$ 463,600
Other Structures	\$ 46,360
B Personal Property	\$ 347,700
C Loss of Use	Actual Loss Sustained
<b>Additional Coverages</b>	
Arson Reward	\$1,000
Bed Bugs	\$1,000
Credit Card, Bank Fund Transfer Card, Forgery, and Counterfeit Money	\$1,000
Debris Removal	Additional 5% available/\$1,000 tree debris
Fire Department Service Charge	\$500 per occurrence
Fuel Oil Release	\$10,000
Locks and Remote Devices	\$1,000
Trees, Shrubs, and Landscaping	5% of Coverage A amount/\$750 per item

**SECTION II - LIABILITY COVERAGES AND LIMITS**

Coverage	Limit of Liability
L Personal Liability (Each Occurrence)	\$ 300,000
M Medical Payments to Others (Each Person)	\$ 1,000
<b>Additional Coverages</b>	
First Aid Expenses	\$ 500
Damage to the Property of Others	\$ 1,000

**INFLATION**

Inflation Coverage Index: 379.2

**DEDUCTIBLES**

Section I Deductible	Deductible Amount
All Losses 1%	\$ 4,636

**LOSS SETTLEMENT PROVISIONS**

- A1 Replacement Cost - Similar Construction
- B1 Limited Replacement Cost - Coverage B

01F1081A

**FORMS, OPTIONS, AND ENDORSEMENTS**

HW-2106	Homeowners Policy
Option ID	Increase Dwlg up to \$92,720
Option OL	Ordinance/Law 10%/ \$46,360
Option JF	Jewelry and Furs \$1,500 Each Article/\$2,500 Aggregate
HO-2216.3	Amendatory Endorsement
HO-2369	Fire Disaster Amendatory Ends

**ADDITIONAL MESSAGES**

You have chosen not to buy coverage available to you that would give you extra protection when you have an insured loss. This coverage includes options to increase your dwelling coverage limits, such as extended replacement cost coverage and law and ordinance coverage. To learn more about your choices, review the information included in your new or renewal policy.

State Farm® works hard to offer you the best combination of price, service, and protection. The amount you pay for homeowners insurance is determined by many factors such as the coverages you have, the type of construction, the likelihood of future claims, and information from consumers reports.

**Other limits and exclusions may apply - refer to your policy**

Your policy consists of these Declarations, the Homeowners Policy shown above, and any other forms and endorsements that apply, including those shown above as well as those issued subsequent to the issuance of this policy.

This policy is issued by the State Farm Fire and Casualty Company.

**Participating Policy**

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

*Michele Mancias*  
Secretary

*John G. Harney*  
President

ST-0202-0000



