

AMsuite®

Residential Quote and Issuance

This document will provide step by step instructions for completing a residential quote and policy issuance in our AMsuite system.

A quote can be started in modernLINK® by entering the risk information and selecting Get a Quote

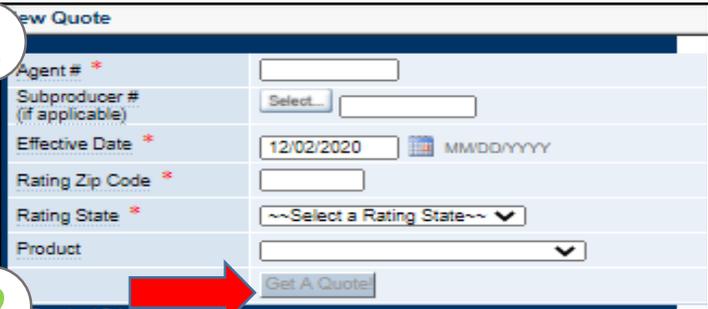
-OR-

A quote can be started in AMsuite by selecting Start New Quote on the home page (top right-hand corner of page)

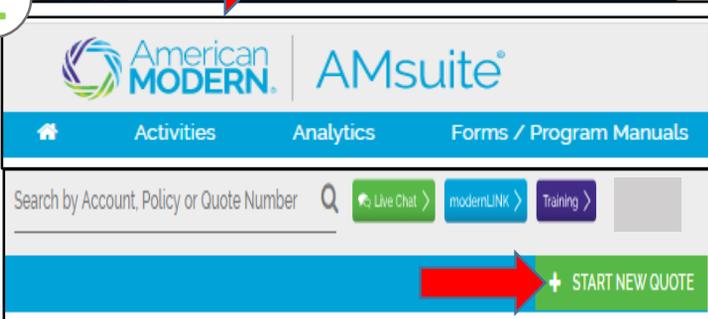
Select the account type Company or Personal, enter the required fields First, Last Name, and State then select the Search box.

If there is an account for the applicant an account number, name and address will show. Verify the type address and select Start New Quote. **Proceed to step 6.** Not a match for the applicant, then Continue as a New Customer.

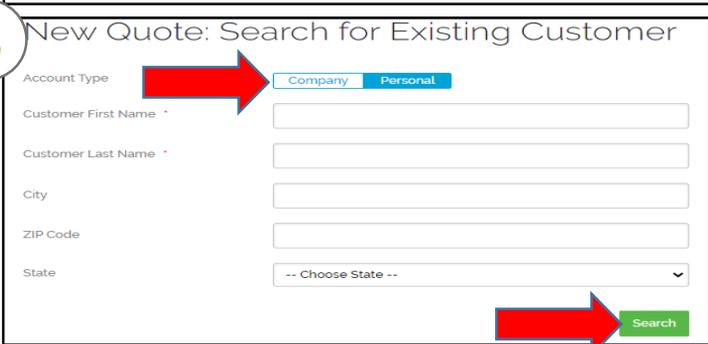
1



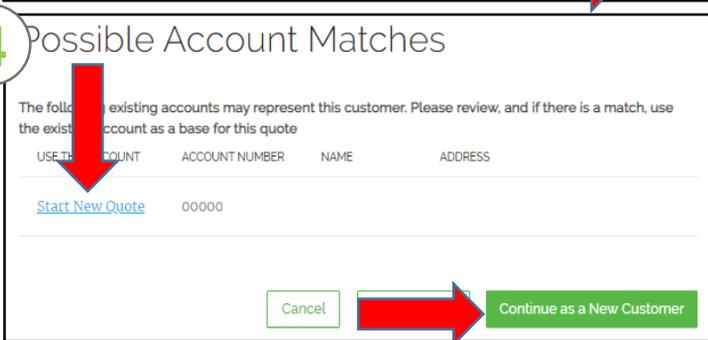
2



3



4



USE THIS ACCOUNT	ACCOUNT NUMBER	NAME	ADDRESS
Start New Quote	00000		

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If the applicant does not have an account, select Continue as a New Customer.

If the applicant has an account this information will be filled in, verify details with applicant. If new customer enter the required information for the insured including First, Last Name, Date of Birth, Phone Type, and Phone Number.

Tip: Social Security is not mandatory but is used for insurance scoring, where applicable.

Enter the mailing address of the applicant. Select continue.

If an address does not appear valid other address options could be given, or you can choose a reason for the invalid address such as new address or other. If address options are not given and the Confirm Address error is received select Cancel. The Confirm Address error will occur again this time select Override to continue with quote.

5 Possible Account Matches

No account has been found based on your criteria

Cancel  Continue as a New Customer

6 New Quote: New Customer Details

Account Type: Personal

Customer First Name *

Customer Middle Name

Customer Last Name *

Customer Suffix

Date Of Birth * 

SSN

Phone Type *

Phone Number *

7 Mailing Address

Country: United States

Attention/Care Of

Address Line 1 *

Address Line 2

City *

State * Ohio

Zip *

 Continue

8 Confirm Address

 An error has occurred while verifying this address. Click "Cancel" to try again. If the error persists, contact System Support.

 Cancel

Confirm Address

 An error has occurred while verifying this address. Click "Override" to save this address as is, or click "Cancel" to try again. If the error persists, contact System Support.

 Override

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Enter Producer code then select next, *proceed to step 11*. To search Producers, *see step 10 to search*.

9

After selecting Search Producers enter Producer Last Name and select Search. Select the correct Producer then select Next.

10

If quote was started in modernLINK this will be completed. If quote was started in AMsuite select Product and Policy Type.

11

A quote number has been created write down the number for reference. Continue the quote on the Policy Details page.

12

On the Policy Details page chose the effective date, answer the questions and verify the Policy Type. Continue to the Qualifications section of the quote.

13

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Read the three (3) qualification questions to the applicant, enter the answers.

14 Qualification

In connection with underwriting or rating this application for insurance, we may review your credit history or obtain or use a credit based insurance score based on the information contained in that credit history. We may use a third party in connection with the development of your insurance score. Yes No

In connection with this application for insurance, we may review your claims history or loss experience and may report future claims made by you to a claims history provider. Yes No

Disclaimer has been read and applicant did not object. Yes No

Additional Insured

Once answered two additional (2) qualification questions will appear, answer these questions. If there is not an additional Named Insured, select Next to continue quote.

15 Qualification

In connection with underwriting or rating this application for insurance, we may review your credit history or obtain or use a credit based insurance score based on the information contained in that credit history. We may use a third party in connection with the development of your insurance score. Yes No

In connection with this application for insurance, we may review your claims history or loss experience and may report future claims made by you to a claims history provider. Yes No

Disclaimer has been read and applicant did not object. Yes No

Is the applicant in foreclosure or currently 60 days or more past due on mortgage payments for any property? Yes No

Has the applicant been convicted of arson, fraud, or other insurance-related offenses? Yes No

To add additional Named Insured, *proceed to step 16.*

Select the box to add Additional Named Insured.

16 Additional Insured

Add Additional Named Insured (No Mortgagees)

Cancel Next

Complete the Additional Insured Details and select Add. Additional Insured could include spouse, child, or other related.

17 Add Additional Named Insured

Additional Insured Details

Choose Additional Insured Type *

Relationship to Insured *

Address *

Description of Interest *

To proceed select Next to continue with the quote.

18 Additional Insured

Add Additional Named Insured (No Mortgagees)

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On the Property page complete the Property details. Enter the location address of the risk, residence type, How the risk will be occupied, the Valuation Type when completed select Next.

19 Property

Address *

Residence Type *

Valuation Type

How is the dwelling occupied? *

If there is more than one property for the applicant select Add Property to add additional risks. Answer the Property questions for each risk added.

20 Property

DWELLING #	ADDRESS	OCCUPANCY
1		Rental
2		

Address *
This is a required field

Residence Type *

Valuation Type

How is the dwelling occupied? *

A yellow box warns of a possible quoting error that needs corrected. This is not a hard stop but could cause an Underwriting referral. It is suggested to place a note on the quote explaining the reason for the referral.

21 ⚠ The dwelling address is equal to the mailing address with a Rental or Vacant occupancy.

In the Valuation section answer the questions about the risk. All questions with a red asterisk require an answer. If the Valuation Type is Market Value, select Next to continue the quote.

22 Valuation

Dwelling 1 123 Mt Zion Dr

Year Built *

Construction Type *

Number of Stories *

Do not include the basement (finished or unfinished) in Finished Living Area.

Finished Living Area (Sq Ft) *

Valuation Type

Protection Class

Townhome or Row Home? *

Foundation Type *

Roof Covering *

Roof Slope/Style *

Year Roof Replaced *

Primary Heating *

Estimated Valuation *

Step 23 - 27 will assist with the Valuation Type Replacement cost.

Market Value Valuation Type
Proceed to step 28.

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If the Valuation type is replacement cost, *follow steps 23 – 27.*

Enter all required information denoted by an asterisk then select Continue.

Continue to enter all the required information. MSB will return a reported value if that does not align you can view the MSB replacement cost estimator by selecting View MSB. MSB will open another tab, if assistance is needed to make changes to MSB contact Customer Service for assistance.

Once finished with MSB updates select Finish in the top right-hand corner. This will bring up another menu select Save. On the last menu select Close to return to the Valuation page in AMsuite.

In AMsuite, review the Estimated Valuation and select Retrieve from MSB, then select Next to continue the quote.

23

Dwelling 1

Year Built * 2020

Construction Type * Frame

Number of Stories * 1

Do not include the basement (finished or unfinished) in Finished Living Area.

Finished Living Area (Sq Ft) * 1800

Valuation Type Replacement Cost

Protection Class 9

Continue

24

Is this a Newhome or Row Home? * Yes No

Foundation Type Basement - Below Grade

Roof Covering Architectural Shingle

Roof Slope/Style Slight Pitch

Year Replaced *

Primary Heating Natural Gas

MSB Reported Value 272288

Estimated Valuation *

Read-only details have been retrieved from MSB. To make changes, please "View MSB" and then "Retrieve from MSB" to refresh the details.

View MSB **Retrieve from MSB** **MSB Report**

Cancel **Previous** **Next**

25

Valuation Totals

	More Info
Construction Cost w/o Debris Removal	\$227,181
Debris Removal	21,022
Reconstruction Cost with Debris Removal	248,203
Cost Data as of	1/20

Finish

Save **Discard** **Close**

Close

Click **Save** to save your changes.
Click **Discard** to discard your changes and return to the data entry.
Click **Close** to return to the valuation and continue editing.

26

MSB Reported Value 272288

Estimated Valuation * 272288

Read-only details have been retrieved from MSB. To make changes, please "View MSB" and then "Retrieve from MSB" to refresh the details.

View MSB **Retrieve from MSB** **MSB Report**

Cancel **Next**

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If Retrieve from MSB is not selected a red hard stop will appear as a reminder to do so.

Once the MSB has been retrieved select the Next button to continue quote.

The next page is Discounts / Surcharges, select the appropriate answer for each question.

Under Prior Losses, select Add at the top of the page to include any prior losses reported by the applicant. Select Add at the bottom of the Prior Losses section to continue.

Tip: Clue will pull any losses for the risk and/or applicant behind the scenes. Allow clue report to pull and manually input claims if they are not shown on the report.

Continue answering questions about the risk then select next to continue quoting the risk.

27 Dwelling #1: Please retrieve the latest version of the MSB Valuation for this dwelling. Go to the Dwelling Construction page and click 'Retrieve from MSB'.

MSB Reported Value: 272288
 Estimated Valuation: 272288
 Read-only details have been retrieved from MSB. To make changes, please "View MSB" and then "Retrieve from MSB" to refresh the details.

28 Discounts / Surcharges

Does the applicant intend to enroll in paperless policy delivery?

Will the applicant be paying in full for this policy? (Not eligible if Lienholder billed)

Eligible for multi-policy discount?

Does the applicant currently have an automobile policy written through your agency?

Has the applicant had any losses above \$500 in the past 3 years?

Has the applicant had similar insurance declined, cancelled, or non-renewed?

How many dwellings does the applicant own?

Is the applicant a member of any of the following organizations? If so, select one.

29 Prior Losses

Date of Loss	Cause of Loss	Total Amount Paid by Carrier	Loss Related to a Catastrophe
<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="Please Select"/>	<input type="text"/>	<input type="text" value="Please Select"/>

30 Dwelling #1: 123 Mt Zion Dr Georgetown

Is the dwelling be occasionally rented to others?

How long of time the applicant has owned the dwelling, how many days has it gone uninsured?

Under Construction or Major Renovation?

Supplemental Heating Source (including wood/pellet burning stove)?

Central Station Fire & Smoke Alarm

Central Station Burglar Alarm

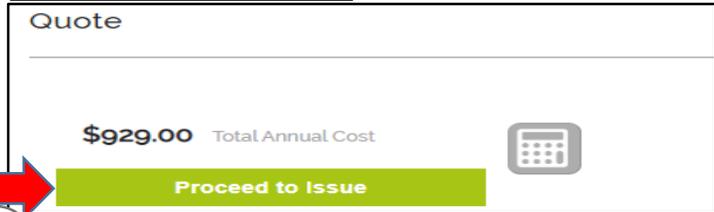
Local Smoke and/or Burglar Alarm

Deadbolts, Smoke Alarm and Fire Extinguisher

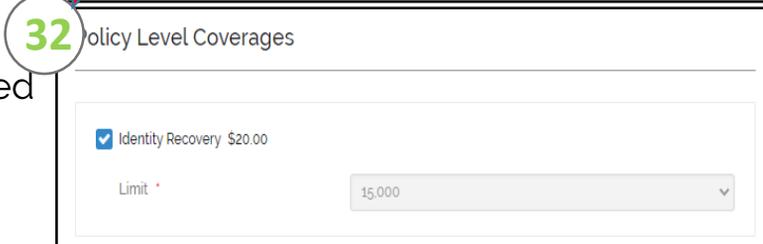
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This is the quote page. Quote is calculated based on the suggested coverages. You can Proceed to Issuance at this time however it is recommended to review the coverages to ensure they meet the applicants needs.



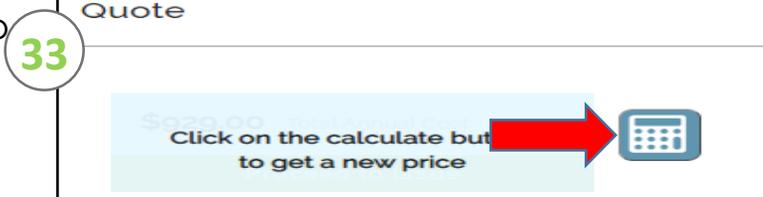
Under Policy Level Coverages the following coverage could be revised – Other Structures, Personal Property, Water Damage, Backup and Sump Overflow, Residence burglary, Equipment Breakdown, Service line, Vandalism or Malicious Mischief, etc.



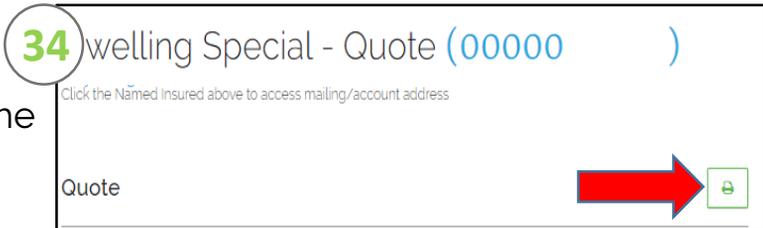
The Specific Building Exclusion can be added at the bottom of this page.



After updating the coverages go to the top of the page and Select the calculator to recalculate the premium based on the coverage changes.



To print the quote, select the print box on the top right-hand side of the page.



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Once coverages have been reviewed and/or revised and the quote printed select Proceed to Issue.

This will bring you to the Issuance page of the quote.

The applicant can opt in to receive automated calls and/or text messages. Enter the applicants email address and answer the question regarding opting in.

Next answer the underwriting questions regarding the risk. If there is more than one risk questions will need to be answered for each risk.

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36 Quote

\$1,674.00 Total Annual Cost 

 **Proceed to Issue**

Quote Request

- Policy Details
- Property
- Valuation
- Discounts / Surcharges
- Quote
- Issuance** 
- Payment Details

37 Issuance

Primary Insured's Contact Details

Name: Larry Liming

Email Address: This is a required field

The customer has the option of receiving automated calls and/or text messages from us. Do we have the customer's permission to send autodialed pre-recorded and artificial voice calls and/or text? This is a required field

38

Earth home, dome home, or any other non-conventional design?

Supported on raised poles or pilings over 6 feet?

Seismically condemned?

Any water leaks or unrepaired water damage?

Any broken or boarded-up windows, or any other unrepaired damage?

In an area that is prone to or had a prior occurrence of landslide, forest fires, or brush fire?

Isolated and inaccessible by road?

Swimming pool on the premises?

Attached to a commercial risk?

Business on the premises?

Farming conducted on the premises?

Purchase Date: MM/DD/YYYY This is a required field

Purchase Price: This is a required field

Is Primary Heating Thermostatically Controlled? This is a required field

Electrical System: Please Select This is a required field

Any Knob and Tube Wiring Present? This is a required field

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If no additional Insured's *proceed to Step 40.*

39



Enter any additional interest such as Mortgagee, Park Owner, Property manager. Chose the priority of the additional interest part. For example, Mortgagee (1) and Park Owner (2). Chose Relationship to Primary Insured – Spouse, Primary Named Insured, Child, Other Related, or Other. Once Additional Interest information is entered select Add.

Add

Additional Interest Details

Company or Person? *

Interest Type *

Additional Interest Priority

Loan Number

Relationship to Primary Insured *

Address

Address *

The annual premium is at the bottom of the page. To proceed to the next page select Next.

40

Prior Losses

Total Annual Cost: \$1,497.00

If there are any underwriting issues associated with the quote this message will appear. Select Click here to view details of the referral. This will take you to another page

41

Issuance

There are underwriting issues associated with this offering. [Click here to view more details](#)

Are you sure you want to navigate away from this page?

Click yes to continue or cancel to stay on the previous page.

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This page will show the Underwriting issues there are two options Edit quote (select and *proceed to step 43*) or Refer to Underwriting. Select Refer to Underwriter. It is recommended to note or attach any documentation in reference to the referral.

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SHORT DESCRIPTION	LONG DESCRIPTION	STATUS
Accessible by road	Dwelling #1: This risk is not eligible because the dwelling is not accessible by road.	Blocks Issuance

If the quote can be updated to reflect accurate information or the customer is ok with the change edit the quote and update the information. After editing quote continue and select Proceed to Issue, continue through the quote until the underwriting issues are resolved then Proceed to Issue. If the referral has been addressed, it will show under Underwriting Issues.

43

Underwriting Issues

SHORT DESCRIPTION	LONG DESCRIPTION	STATUS
There are no open underwriting issues associated with this quote		

Complete the Billing information on the Payment Details. All questions with an asterisk must be entered.

44

Billing

Billing Method *

Renew Method *

Billing Type *

Date of Payment *

Bill To *

EZPay form signed? *

EZPay form version *

Paid in Full has been selected, other payment plans may be available by changing Paid in Full to "No" on the Policy Info page.

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On the Discounts/Surcharges if the question "Does the applicant intend to enroll in paperless policy delivery" is answered Yes that is the only payment option that will appear.

This can be changed by going back to the Discounts/Surcharges page and changing the answer.

If the question is answered No, then all the payment plans will be available. Once the Payment Plan is selected the Payment Schedule can be viewed by selecting View Payment Schedule.

Enter Pay Now Details and information for Automatic Future Withdrawals (Recurring electronic)

45

Payment Plans

SELECT	NAME	PAY NOW	AMOUNT OF INSTALLMENT (EXCLUDING FEE)	INSTALLMENTS	INSTALLMENT FEE	TOTAL COST (INCLUDING FEES)
<input type="radio"/>	Full Pay Plan	\$1,674.00	\$0.00	0	\$0.00	\$1,674.00

[View Payment Schedule](#)

- Quote Request
- Policy Details
- Property
- Valuation
- Discounts / Surcharges**
- Quote
- Issuance
- Payment Details

Payment Plans

SELECT	NAME	PAY NOW	AMOUNT OF INSTALLMENT (EXCLUDING FEE)	INSTALLMENTS	INSTALLMENT FEE	TOTAL COST (INCLUDING FEES)
<input type="radio"/>	Full Pay Plan	\$894.00	\$0.00	0	\$0.00	\$894.00
<input type="radio"/>	Semi-Annual Pay Plan	\$447.00	\$447.00	1	\$0.00	\$894.00
<input type="radio"/>	Quarterly Pay Plan	\$223.50	\$223.50	3	\$0.00	\$894.00
<input type="radio"/>	Bi-Monthly Pay Plan	\$178.80	\$143.04	5	\$0.00	\$894.00
<input type="radio"/>	Monthly Electronic Pay Plan	\$178.80	\$71.52	10	\$0.00	\$894.00

[View Payment Schedule](#)

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Pay Now Details

Amount *

Payment Method *

Automatic Future Withdrawals (Recurring Electronic)

Payment Method *

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If the customer chooses paperless billing, select Set Up An Online Account and enter the required information.

To print the Declarations page hover over the policy number hyperlink in the Policy Summary area and select.

You will find the effective date, policy period, policy total amount, payment plan and current payment in the Policy Summary area.

49 Payment Successful

[Set Up An Online Account](#)

Your new policy has been bound.

Policy Summary

Account Number	00000
Policy Number	60001
Policy Effective Date	November 23, 2020
Policy Period	November 23, 2020 -November 23, 2021
Policy Total Amount	\$748.00
Payment Plan Name	Bi-Monthly Pay Plan
Current Payment	\$149.60

Tip: Be sure to keep the required documentation as noted and inform the insured of the inspection when this necessary.

50 Keep a record of these documents or upload to the policy documents

- The completed and signed application
- Coverage selection/rejection, named exclusion, or other state-specific forms
- Proof of discounts, and any other documents required as indicated in the application process or in the state specific program manual.

NOTE

- When the electronic signature tool is used and successfully completed by both producer and customer, the signed forms automatically upload to the policy documents
- All policyholder documents must be retained for seven (7) years after the date of policy cancellation

PLEASE BE SURE TO INFORM THE APPLICANT:

One or more properties on this policy require an inspection. An inspector, representing American Modern and carrying identification of the Inspection Service company, will visit the property to perform the exterior inspection. If you are aware of any access issues (gated community, road outages, etc.) that will prevent the inspector from completing the inspection or locating the property, please send special instructions to CustomerCare@cisgroup.net or Underwriting@amig.com.

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