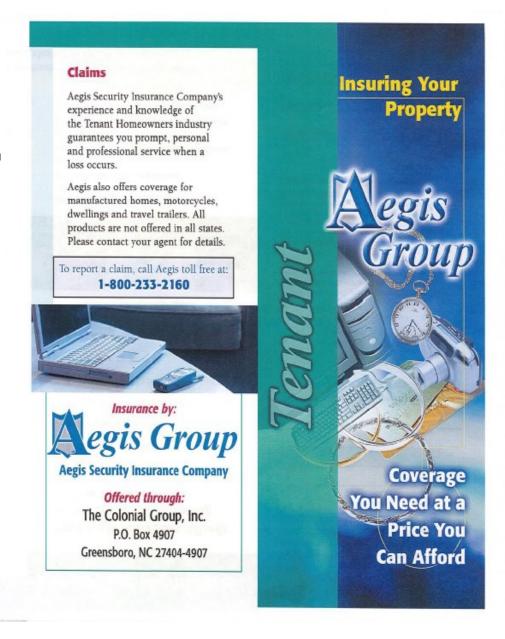
This product is NOT available in Georgia or North Carolina.





Our Tenant Insurance Policy insures your:

Personal Property

while on the residence premises. Up to 10% of the limit is available to property anywhere in the world that is owned by the insured.

Personal Liability including medical payments to others.





Your Aegis Protection Affords

- Coverage for the Following Named Perils:
 - Fire & Lightning
 - Windstorm or Hail
 - Internal Explosion
 - Riot or Civil Commotion
 - Damage by Aircraft
 - Damage by Vehicle
 - Smoke
 - Burglary (sublimit equal to 10% of selected Personal Property Coverage applies)



Available Payment Plans:

2-PAY PLAN

50% down, 50% due as installment

4-PAY PLAN

25% down, 25% due each additional installment

6-PAY PLAN

25% down, 15% due each additional installment Installment fee of \$6.00 applies to the payment plans.

PLEASE NOTE that this brochure is for informational purposes only. Please read your policy carefully to see if any limitations, exclusions or special deductibles apply.

Applicant Information

Please complete the following information, detach at perforation and mail to The Colonial Group, Inc. One of our agents will contact you to discuss how Aegis Insurance will benefit you and help you protect your valuables.

	Effective	Date
	Effective Date	
Personal Property	Liability	Premium
\$15,000	\$25,000	\$160
\$15,000	\$50,000	\$175
\$20,000	\$25,000	\$180
\$20,000	\$50,000	\$195
\$25,000	\$25,000	\$200
\$25,000	\$50,000	\$215
	\$15,000 \$15,000 \$20,000 \$20,000 \$25,000	\$15,000 \$25,000 \$15,000 \$50,000 \$20,000 \$25,000 \$20,000 \$50,000 \$25,000 \$25,000

'A \$500 Deductible applies to Personal Property limit. Some Personal Property subject to certain limitations and/or exclusions. Please review your policy for details.

Fraud Statement':

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

('Applicable to residents of Tennessee and Virginia.)

Applicant Signature		Date
Producer Signature	Agent Code	Date
Print Producer Name	Firmes #	

