Getting the most out of modernLINK
With modernLINK, American Modern has given you the tools to simplify your daily business. And with TCG’s Single Sign On technology, there’s no additional password to remember! Explore the capabilities and see what modernLINK can do for you!
part one

products

quoting

booking
quoting and booking
The Process...

• Login on the TCG website:
  • https://www.thecolonialgroup.com
• Access modernLINK via TCG Dashboard
• Quote
• Complete Application
• Options:
  • Book online
  • Print application without booking
1. Book Online
   - Apply Payment
     - Full or Down
     - Credit, Debit or EFT
   - Print & Sign Application
   - Mail to TCG
     - Signed Application
     - Any Required Docs

2. Print without Booking
   - Print & Sign Application
   - Mail to TCG
     - Signed Application
     - Any Required Docs
     - Full or Down
Exceptions...

- Golf Cart: NC
  - Quote and app from application in our eforms library
  - Can phone our Casualty (option 3) team for a quote and application
  - Mail signed application, payment & any required documents

- Collector Car: NC, VA
  - Call TCG Casualty Team (option 3) for quote & application
  - Mail signed application, photos, additional documents to TCG

- Collector Car: GA, SC, TN
  - Quote & application on modernLINK
  - If you book on modernLINK
    - MUST upload photos & required documents
  - App can be printed without booking
    - Mail signed app, payment, photos & required documents to TCG
Agent Resources

Welcome To Our New Site!

Colonial Premium Finance

We are pleased to announce web access to CPF accounts. Check account status or balance. CPF also takes payment by phone. Please call 800.628.3762

Go There!
Full policy servicing with American Modern in all states including quote/issuance, inquiry, claims & online programs payments.

Policy Inquiry for all active Aegis Policies. Quoting currently available in Georgia, Tennessee & Virginia.

Get rate indications under 3 minutes with TCG new rater!

Utilize FastAPP to obtain quotes for Mobile Homes, Dwelling Fire, Vacant & Homeowner

This feature will allow you to email endorsement requests to us.
### Basic Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary First Name:</td>
<td>John</td>
</tr>
<tr>
<td>Last Name:</td>
<td>Smith</td>
</tr>
<tr>
<td>Home Phone (555 555 5555) (optional):</td>
<td></td>
</tr>
<tr>
<td>Location Zip Code:</td>
<td>27404</td>
</tr>
<tr>
<td>Quote Effective Date (mm dd yyyy):</td>
<td>7 8 2010</td>
</tr>
<tr>
<td>Dwelling Limit (excluding land value):</td>
<td>150000</td>
</tr>
<tr>
<td>Year Built (yyyy):</td>
<td>1990</td>
</tr>
<tr>
<td>Is home located inside city limits?:</td>
<td>Yes</td>
</tr>
<tr>
<td>Distance to Fire Hydrant (in feet):</td>
<td>1000 or less</td>
</tr>
<tr>
<td>Protection Class:</td>
<td>1</td>
</tr>
<tr>
<td>Occupancy:</td>
<td>Rental</td>
</tr>
<tr>
<td>If vacant, is this a manufactured home?:</td>
<td>Yes</td>
</tr>
<tr>
<td>Number of Families:</td>
<td>1</td>
</tr>
<tr>
<td>Type of Construction:</td>
<td>Frame</td>
</tr>
</tbody>
</table>
### Basic Information

<table>
<thead>
<tr>
<th>Style of Home:</th>
<th>1 Story</th>
</tr>
</thead>
<tbody>
<tr>
<td>Product:</td>
<td>DP-3</td>
</tr>
<tr>
<td>Policy Term:</td>
<td>12 months</td>
</tr>
</tbody>
</table>

You may only quote products and states for which you have authority. This quick quote is contingent upon verification of the protection class, proper insurance-to-value, agent authority, underwriting eligibility and, if applicable, credit and CLUE reports. So, as a service to your customer, we suggest that you mention that, for those reasons, this quote does not constitute a bound policy or proof of insurance.

[Go to Full Quote / Issue] [Next]

---

Rate | Save | Print | Submit | Delete | Decline

---

*site built dwelling*
The location address verification has returned a different address than was entered. The returned Address is
123 S ANY ST
GREENSBORO NC 27404
If the returned address is correct, please click here

Return to New Quote

If the returned address is not correct and the location address entered is correct, please click here
123 ANY ST
GREENSBORO NC 27404
If neither address is correct please enter the correct address and click the "next" button.

**Basic Information**

Location Address: 123 Any St
Location City: Greensboro
Location State: NORTH CAROLINA
Location Zip Code: 27404

**At A Glance**

- Client Name: John Smith
- Location State: NORTH CAROLINA
- Location Zip Code: 27404
- Territory: 27404
- Agency Code: 009771
- Sub-Producer Code: 000030
- Sub-Producer Name: 
- Company: 
- Quote Status: New
- Program: 
- Quote ID: 
- Rated Premium: 
- Payment Plan:

**Bill Estimates**

<table>
<thead>
<tr>
<th>Down Payment</th>
<th>Next Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>
## Eligibility Information

<table>
<thead>
<tr>
<th>Occupancy:</th>
<th>Rental</th>
</tr>
</thead>
<tbody>
<tr>
<td>If vacant, is the dwelling a manufactured home?</td>
<td></td>
</tr>
<tr>
<td>Number of Families:</td>
<td>1</td>
</tr>
<tr>
<td>Type of Construction:</td>
<td>Frame</td>
</tr>
<tr>
<td>Style of Home:</td>
<td>1 Story</td>
</tr>
<tr>
<td>Has the applicant had any losses in the last 3 years:</td>
<td>Yes</td>
</tr>
<tr>
<td>How many dwellings are owned by the insured?</td>
<td>2</td>
</tr>
</tbody>
</table>

## Loss History Information

| Date of Loss (mm yyyy): | 01 2006 |
| Cause of Loss: | Weather |
| Loss Description: | Windstorm blew shingles off roof |
| Amount of Loss: | 700.00 |
Available Programs

452 - Rental DP-1 Program - This program provides fire and extended coverages for rental dwellings. Loss settlement is actual cash value. Risks should be in fair or better condition.

4T8 - Rental DP-3 Program - This program provides all risk coverage subject to certain exclusions for the dwelling. Loss settlement is replacement cost for the dwelling and actual cash value for personal property. Risks must be in above average to excellent condition and reflect responsible ownership in the maintenance and upkeep of the property.
Insurance Score Request

*In connection with this application for insurance, we may review your credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. We may use a third party in connection with the development of your insurance score. We may also obtain loss history and other consumer reports using a third party. The above information may be used to develop your premium or to determine your eligibility for insurance.*

Disclaimer above read to applicant? [ ]

First Name: John
Middle Initial (optional): M
Last Name: Smith
Social Security Number:
Date of Birth (mm dd yyyy): 3 11 1984
Is mailing address same as location address? [ ] No
Mailing Address: P O Box 1234
Mailing City: Greensboro
Mailing State: NORTH CAROLINA
Mailing Zip Code: 27404

At A Glance
- Client Name: John Smith
- Location State: NC
- Location Zip Code: 27404
- Territory: 061
- Agency Code: 009771
- Sub-Producer Code: 000030
- Sub-Producer Name: THE COLONIAL GROUP INC
- Company: 085
- Quote Status: Saved Not Rated
- Program: Rental DP-3 Program
- Quote ID: 1216138
- Rated Premium
- Payment Plan: EZPay (EFT)/Monthly

Bill Estimates

<table>
<thead>
<tr>
<th>Payment Plan</th>
<th>Down Payment</th>
<th>Next Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Pay</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Four Pay</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Ten Pay</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>EZPay/Monthly</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>
Please verify the Primary Insured's Social Security Number and address below. If correct, please hit "next" to proceed.
Fair Credit Reporting Act

Message from webpage:

FAIR CREDIT REPORTING ACT letter is required. Select "FCRA LETTER" from print menu now. The letter and the insurance score factors involved must be read to the potential insured/insured before proceeding. A copy of the letter must be provided to the potential insured/insured.
Please make the appropriate selections below and click on the Quote button. When increasing coverage limits, any included amount is part of the increased amount.

You can print this information OR complete the application.

**Basic Coverages**

- DP-3 Fire
- Personal Property Fire
- DP-3 Extended Coverage
- Personal Property Extended Coverage
- Premises Liability
- Medical Payments - Per Person (500 included if liability is selected)

**Premium**

- 150000
- 3000
- 150000

**Miscellaneous Coverages**

- Deductible (500 included)

**Premises Liability - Expanded Coverage**

Provides expanded liability coverage for the owner of a rental or seasonal property for liability related solely to that premises.
Your premium is **597.00**

You can print this information or complete the application. This quote does not represent bound coverage and is subject to underwriting approval. When increasing coverage limits, any included amount is part of the increased amount.

### Basic Coverages

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>DP-3 Fire</td>
<td>150000</td>
</tr>
<tr>
<td>Personal Property Fire</td>
<td>3000</td>
</tr>
<tr>
<td>DP-3 Extended Coverage</td>
<td>150000</td>
</tr>
<tr>
<td>Personal Property Extended Coverage</td>
<td>3000</td>
</tr>
<tr>
<td>Premises Liability</td>
<td>300000</td>
</tr>
<tr>
<td>Medical Payments - Per Person (500 included if liability is selected)</td>
<td>1000</td>
</tr>
</tbody>
</table>
Your premium is **597.00**
You can print this information OR complete the application.
This quote does not represent bound coverage and is subject to underwriting approval.
When increasing coverage limits, any included amount is part of the increased amount.

**These are your Underwriting Messages:**

- **ValuationRequest** : You have indicated a Dwelling value which is different than the calculated replacement value of $184,616. Please revise the Dwelling Value (limit is subject to the maximum acceptable limit of the program). If you feel the Dwelling Value entered is accurate, and wish to submit for approval, please give a complete explanation or description in the memo section. This risk must not be bound.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there any un-repaired damage or boarded-up windows?</td>
<td>No</td>
</tr>
<tr>
<td>Does the applicant own any animal with bite history or vicious propensities?</td>
<td>No</td>
</tr>
<tr>
<td>Is the applicant own any Dobermans, Chows, Rottweilers, American Staffordshire Terriers (Pit Bulls), Akitas, wolves, or wolf hybrids or any mix of these breeds?</td>
<td>No</td>
</tr>
<tr>
<td>Is the dwelling in foreclosure or currently 60 days or more past due on mortgage payments?</td>
<td>No</td>
</tr>
<tr>
<td>Is the dwelling located in a landslide, forest fire or brush fire area?</td>
<td>No</td>
</tr>
<tr>
<td>Is the dwelling located within 1,000 feet of rising water or in an area that is prone to flooding?</td>
<td>No</td>
</tr>
<tr>
<td>Is the dwelling located in an area that is isolated, not accessible by road?</td>
<td>No</td>
</tr>
<tr>
<td>Is there an underground fuel storage or underground fuel tank on the premises?</td>
<td>No</td>
</tr>
</tbody>
</table>
### Billing/Payment Information

#### Billing Info
- **Policy Term:** 12 Months
- **Agent Billing Option:** Direct Bill
- **Payment Plan:**
  - EZPay(EFT)/Monthly
  - EZPay(EFT)/Monthly
  - Full Pay
  - 4 Pay
  - 10 Pay
  - EZPay(CC)/Monthly
- **Payment Method:**
- **Payment Amount Received:** 597.00
- **Down Payment Paid By:** Insured
- **Send all remaining bills to:** Insured
- **Send renewal bills to:** Insured
- **EZPay(EFT) Bank ABA Number:** 123456789
- **EZPay(EFT) Account Number:** 1234567
- **EZPay(EFT) Account Type:** Checking

#### At A Glance
- **Client Name:** John Smith
- **Location State:** NC
- **Location Zip Code:** 27404
- **Territory:** 061
- **Agency Code:** 009771
- **Sub-Producer Code:** 000030
- **Sub-Producer Name:** THE COLONIAL GROUP INC
- **Company:** 085
- **Quote Status:** Rated
- **Program:** Rental DP-3 Program
- **Quote ID:** 1216195
- **Rated Premium:** 597.00
- **Payment Plan:** Full Pay

#### Bill Estimates
<table>
<thead>
<tr>
<th>Down Payment</th>
<th>Next Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Pay</td>
<td>597.00</td>
</tr>
<tr>
<td>4 Pay</td>
<td>152.25</td>
</tr>
<tr>
<td>10 Pay</td>
<td>100.31</td>
</tr>
<tr>
<td>EZPay/Monthly</td>
<td>100.50</td>
</tr>
</tbody>
</table>

**Card Logos:**
- MasterCard
- VISA
- American Express
- Discover
You are requesting the issuance of a policy number and are binding coverage as of the effective date of this quote. Once you issue a policy, you will be unable to make any changes. If you are not ready to issue a policy at this time, please click "cancel" and save the quote for later retrieval and policy issuance. If you are ready to issue a policy at this time, please click "ok".

If you are providing a down payment by credit card or EFT, selecting "ok" will authorize American Modern insurance Group to process this payment now.
Request to Issue

This quote is Pending Issuance as policy number: 0010002297

Your premium is **597.00**
You can print this information OR complete the application.

- PLEASE BE SURE TO INFORM THE APPLICANT
- An inspection service representing American Modern Insurance Group will be obtaining an external inspection of this property.
- A representative of the inspection service, who will be carrying identification, will be visiting the property to obtain this inspection.
- This policy #0010002297 is now Pending Issuance.
- Please be sure to print this application and have it signed by the applicant.
There is no Autosave feature!
Agency code is TCG’s & is usually 009771

EZPay monthly draft:
  - Down payment must be draft—not cash
  - Print form and mail with voided check

Cancellation requests must be signed
Decreases in coverage must be signed

MVR (3 yr) is pulled
  - Automatically
    - Motorcycle/ATV
    - Golf Carts (except NC)
    - Collector Car: GA, SC, TN
  - Manually
    - Watercraft: Call TCG if system requires MVR to bind
    - Motor Homes & Travel Trailers (All States) and Collector Car (NC & VA)

MVR on all
  - Pre-approval by calling TCG
  - Back side after TCG receives app & documents
  - No binding authority
  - Requested effective date honored if all received within 7 business days.

UM/UIM: Don’t forget this!
  - If needed, it will print off after app.
  - MUST be mailed to TCG!

Discounts: Don’t forget required documents, for example
  - HO discount: Send HO dec or tax record
  - Transfer discount: Must show proof of 1 year of prior continuous coverage

Collector Car
  - Coverage limits must agree with NADA values
  - Dec page(s) for regular use auto(s) required
part two

policy inquiry

tools
policy inquiry
Policy & Quote Inquiry

System Alerts

My Action Items are available in Quotes and Policies

Quick Action

Policy/Quote Number:

New Quote

Agent # *
Subproducer # *(if applicable)
Effective Date *
Rating Zip Code *
Rating State *--Select a Rating State--
Product

* Required fields

Get A Quote!

My News

Wanting about those new code fields in modernLINK?

Current Binding Restrictions

Tips and Tools

- ModernLINK Next Generation System Charges. More...
- Our Coaching the Motorcycle Operator rider safety course is available online at www.amigcampus.com. Click here to generate new sales, retain current customers and improve your loss ratio! More...
- SNOWMOBILE RATER - Click this link to access our improved on-line snowmobile rater! Available in NY, PA, MN, WI, ME, VT, & MI. More...
- Customer Service Functions - Click this link to access the functions that were previously available on the Customer Service Tab. More...
- Register for instructor-led modernLINK training. More...

Marketing Center

Interested in advertising, sales promotion, research, direct mail and more? The Marketing Center offers a wealth of tips, tools and experiences to help you help yourself grow.

CLICK HERE for the Marketing Center
Policy & Quote Inquiry

Policy/Quote Search

Select the type of search you want to perform

- Quick Search
- Advanced Search

For policy search, enter a nine or ten-digit policy number. (Omit company # prefix.)

Policy/Quote #

Policy/Quote Search

Select the type of search you want to perform

- Quick Search
- Advanced Search

Complete Two items and at least one must come from the first section.

<table>
<thead>
<tr>
<th>Last Name/Bus Name</th>
<th>Starts with</th>
<th>Exact match</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agent Number</td>
<td>999038</td>
<td></td>
</tr>
</tbody>
</table>

Please enter at least one more field.

<table>
<thead>
<tr>
<th>First Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk Location City</td>
</tr>
<tr>
<td>Risk Location State</td>
</tr>
<tr>
<td>Risk Location Zip</td>
</tr>
<tr>
<td>Sub-Producer Number</td>
</tr>
<tr>
<td>Last Modified Date Range</td>
</tr>
<tr>
<td>Policy/Quote Status</td>
</tr>
<tr>
<td>Product</td>
</tr>
<tr>
<td>Policy/Quote #</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>0009981740 *</td>
</tr>
<tr>
<td>0009978219 *</td>
</tr>
<tr>
<td>0009983831 *</td>
</tr>
<tr>
<td>0009981756 *</td>
</tr>
<tr>
<td>000018559</td>
</tr>
<tr>
<td>0009981473 *</td>
</tr>
<tr>
<td>0009974277 *</td>
</tr>
<tr>
<td>0009977561 *</td>
</tr>
<tr>
<td>0009981123 *</td>
</tr>
<tr>
<td>0010005177</td>
</tr>
</tbody>
</table>
### Policyholder Info

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name</td>
<td>American Modern Home Insurance Company</td>
</tr>
<tr>
<td>Policy Number</td>
<td>0010001197</td>
</tr>
<tr>
<td>Policy Status</td>
<td>Inforce</td>
</tr>
<tr>
<td>Entered Date</td>
<td>09/28/07</td>
</tr>
<tr>
<td>User ID</td>
<td>Web</td>
</tr>
<tr>
<td>Policyholder's Name</td>
<td>Glenna Boedker</td>
</tr>
<tr>
<td>Address</td>
<td>711 Mairwood Dr, San Jose, CA 95120-2222</td>
</tr>
<tr>
<td>Home Phone</td>
<td>615-123-4567</td>
</tr>
<tr>
<td>Work Phone</td>
<td></td>
</tr>
<tr>
<td>Date of Birth</td>
<td>07/08/78</td>
</tr>
<tr>
<td>Social Security Number</td>
<td><em><strong>-</strong></em>-1111</td>
</tr>
<tr>
<td>Original Effective Date</td>
<td>09/27/07</td>
</tr>
</tbody>
</table>

### Current Billing

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Due</td>
<td>02/28/08</td>
</tr>
<tr>
<td>Amount Due Now</td>
<td>$254.14 (includes charges of $7.00)</td>
</tr>
<tr>
<td>Service Charge</td>
<td>$7.00</td>
</tr>
<tr>
<td>Other Charges</td>
<td></td>
</tr>
<tr>
<td>Total Outstanding</td>
<td>$853.76</td>
</tr>
<tr>
<td>Total Premium Received</td>
<td>$1,551.75</td>
</tr>
<tr>
<td>Reason for Bill</td>
<td>Budget Bill</td>
</tr>
<tr>
<td>Earn Premium Date</td>
<td>05/20/08</td>
</tr>
<tr>
<td>Last Payment</td>
<td>$6.36</td>
</tr>
<tr>
<td>Date Posted</td>
<td>10/12/07</td>
</tr>
<tr>
<td>Concurrent Billing</td>
<td>No</td>
</tr>
<tr>
<td>Next Bill Date</td>
<td>05/29/08</td>
</tr>
<tr>
<td>Next Bill Amount</td>
<td>$599.62</td>
</tr>
<tr>
<td>Billing Plan</td>
<td>Direct Bill</td>
</tr>
<tr>
<td>Bill To</td>
<td>Insured</td>
</tr>
<tr>
<td>Payment Plan</td>
<td>Standard Four Pay</td>
</tr>
<tr>
<td>Billing Status</td>
<td>Bill To Lienholder * Only One Payment Plan Allowed, Policy Processed After Eff Date W/o Adequate Money,</td>
</tr>
<tr>
<td>Pending Payment</td>
<td>No</td>
</tr>
</tbody>
</table>

### Make a Payment
Request Change

Endorsement Request:
Policyholder Info Change
- First Name: Glenna
- Last Name: Boedker
- Home Phone: 615-123-4567
- Address 1: 711 Mairwood Dr
- City: San Jose
- State: CA
- Zip Code: 95120
- Zip Code Suffix: 2222
- Birth Date (mm dd yyyy): 07 08 1978
- Social Security Number: *****1111
- Tax ID Number: [Yes]
- Occupation: Farmer

Requested changes:
- Policyholder Info Change
  - Home Phone: 615-123-4568
- Endorsement Effective Date
- Submitter Contact Information
  - Contact Method: Email
  - Contact Information:

If the requested change appears on the DEC page, a new DEC page will be automatically generated.
### Basic Record Detail
- **Line of Business:** Dwelling Fire
- **Program:** Std Dw Fire O Occ Dp3
- **Policy Term (months):** 012
- **Effective Date:** 09/27/07
- **Expiration Date:** 09/27/08
- **Written Premium:** $2,398.51
- **Full-Term Premium:** $2,394.00
- **Agent:** 999098
- **Agent Type:** G
- **Subproducer:**
- **Number of Liens:**
- **Total Claims:**
- **Number of Open Claims:**

### Unit 1 Info
- **Total Units:** 1
- **Year:** 1968
- **Construction:** Frame
- **Location Address:** 711 Mairwood Dr, San Jose, CA 95120 2222

### Cancellation
- **Requested By:**
- **Reason for Cancellation:**
- **Date Effective:**
- **Method of Cancellation:**

### Refund Info
- **Refund Amount:** 0.00
- **Refund To:** Insured
Billing History

**Direct Billing**

**Bill History**

- **RETrieve NOTICES**

**Billing History**

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Bill or Payment</th>
<th>SC/SUB-COM</th>
<th>COMM/OC</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/18/08</td>
<td>T201 - Endorsement Transaction</td>
<td>-$8.49</td>
<td>$.00</td>
<td>$6.36</td>
</tr>
<tr>
<td>02/08/08</td>
<td>E055 - Budget Bill Notice</td>
<td>$253.50</td>
<td>$7.00</td>
<td>$.00</td>
</tr>
<tr>
<td>10/12/07</td>
<td>PYCC - Miscellaneous Payment</td>
<td>$950.00</td>
<td>$.00</td>
<td>$.00</td>
</tr>
<tr>
<td>10/12/07</td>
<td>E045 - Policy Status Notice</td>
<td>$.00</td>
<td>$.00</td>
<td>$.00</td>
</tr>
<tr>
<td>09/28/07</td>
<td>T10N - New Business Transaction</td>
<td>$2,407.00</td>
<td>$.00</td>
<td>$.00</td>
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<tr>
<td>09/28/07</td>
<td>PYCC - Cash With App Payment</td>
<td>$601.75</td>
<td>$7.00</td>
<td>$.00</td>
</tr>
</tbody>
</table>

**At A Glance**

- Client Name: Glenna Boedker
- Policy Status: Inforce
- Policy Number: 0770010001197
- Business Type: Dwelling Fire
- Effective Date: 09/27/07
- Expiration Date: 09/27/08
- Service Rep
- Policy Activity
- Agent: 999098
- Sub Producer
Coverage Screen

Unit 1 Summary

- Unit Number: 0001
- Coverage Effective: 09/27/07
- Total Premium: $2,394.00
- Territory: 60

Details

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Summary</th>
<th>Forms</th>
<th>DEC Pages</th>
<th>Messages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage A</td>
<td>Dwelling Fire Dp-3</td>
<td>$221,000</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Coverage B</td>
<td>Other Structures</td>
<td>$22,100</td>
<td></td>
<td></td>
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<tr>
<td>Coverage A</td>
<td>Additional Living Expense</td>
<td>$22,100</td>
<td></td>
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<tr>
<td></td>
<td>Fair Rental Value</td>
<td>$22,100</td>
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<tr>
<td>Deductible</td>
<td>Subject To All Perils *</td>
<td>$250</td>
<td></td>
<td></td>
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<tr>
<td>Coverage A</td>
<td>Vandalism Or Malicious Mischief</td>
<td>Incl.</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Combined Sect 1 Water/mold Limit</td>
<td>$20,000</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Earthquake</td>
<td>Earthquake/earth Movement</td>
<td></td>
<td></td>
<td></td>
<td>$1,538.00</td>
</tr>
</tbody>
</table>

At A Glance

- Client Name: Glenna Boedker
- Policy Status: Inforce
- Policy Number: 0770010001197
- Business Type: Dwelling Fire
- Effective Date: 09/27/07
- Expiration Date: 09/27/08
- Service Rep
- Policy Activity
- Agent: 999098
- Sub Producer
Coverage Screen

Forms

<table>
<thead>
<tr>
<th>Form Title</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN614</td>
<td>09/06</td>
</tr>
<tr>
<td>S2002</td>
<td>07/88</td>
</tr>
<tr>
<td>73252</td>
<td></td>
</tr>
<tr>
<td>73262</td>
<td></td>
</tr>
<tr>
<td>71484</td>
<td></td>
</tr>
<tr>
<td>7488R</td>
<td></td>
</tr>
<tr>
<td>73271</td>
<td></td>
</tr>
<tr>
<td>73272</td>
<td></td>
</tr>
<tr>
<td>73610</td>
<td></td>
</tr>
<tr>
<td>V9295</td>
<td></td>
</tr>
<tr>
<td>72539</td>
<td></td>
</tr>
<tr>
<td>73339</td>
<td></td>
</tr>
<tr>
<td>DF003</td>
<td></td>
</tr>
<tr>
<td>CAGEN</td>
<td></td>
</tr>
<tr>
<td>SHN06</td>
<td></td>
</tr>
<tr>
<td>85591</td>
<td></td>
</tr>
</tbody>
</table>

Messages

"limits For Specific Other Structures Appear On Application "

****this Policy Does Not Include Flood Coverage.****

****this Policy Does Not Include Building Code Upgrade Coverage.****

The Limit Of Liability For This Structure (coverage A) Is Based On An Estimate Of The Cost To Rebuild Your Home, Including An Approximate Cost For Labor And Materials In Your Area, And Specific Information That You Have Provided About Your Home.

If You Cancel This Policy Early, A Minimum Earned Premium Of $50 May Apply.

* Unless Other Coverage Deductibles Are Stated Herein

DEC Pages

[Retrieve DEC Pages]
There are no claims for this policy.

There are no losses for this policy.
Other Parties Screen

modernLINK Customer Servicing

Lienholder

- Lienholder ID: 1
- Lienholder Name: Hudson United Bank
- Name/Address:
- Address Line 1: 1000 Macarthur Blvd
- Address Line 2:
- City, State, and Zip: Mahwah, NJ 07430
- Unit Number:
- Loan Number:

Additional Insured

- There are no additional insureds for this policy.
## Dwelling Data

- **Territory:** 60
- **Address:** 711 Mairwood Dr
- **City, State, and Zip:** San Jose, CA 95120 2222
- **Year:** 1968
- **Construction:** Frame
- **Usage:** Owner
- **Deductible Amount:** $250
- **Unit Value:** $221,000.00
- **Purchase Date:** 09/01/07
- **Stories:** 1
- **Families:** 1

### At A Glance

- **Client Name:** Glenna Boedker
- **Policy Status:** Inforce
- **Policy Number:** 0770010001197
- **Business Type:** Dwelling Fire
- **Effective Date:** 09/27/07
- **Expiration Date:** 09/27/08
- **Service Rep:**
- **Policy Activity:**
- **Agent:** 999098
- **Sub Producer:**
### Payment Information

**Client:** GLENN BOEDKER  
**Company:** 077 American Modern Home Insurance Company  
**Policy:** 0010001889  
**Amount Due Now:** $246.50 (includes charges of $3.00)  
**Total Outstanding:** $977.00  
**Next Bill Amount:** 243.50  
**Pending Payment:** No  
**Amount to Pay:** 246.50 (USD)  
**Payment Method:** Credit Card  
**Card Number:** 411111111111111  
**Card Expiration Date:** 11/2008

---

**At A Glance**

| Client Name | Glen Boedker  
| Policy Status | Inforce  
| Policy Number | 07700100001197  
| Business Type | Dwelling Fire  
| Effective Date | 09/27/07  
| Expiration Date | 09/27/08  
| Service Rep |  
| Policy Activity |  
| Agent | 999098  
| Sub Producer |  

---

**Payment Services**

**Version:**  
Version has routed, processed and secured your payment information. More information about Version.

**Online payment made**

| Authorization Code | 737PN1  
| Reference Numbers | V79A0CA72658  

---

**Thank you!**  
Payment approved on 01-22-08 08:23:38. Payment will be applied to the policy tonight (or next business day) before any cancellation processing would take place. You may print this page for your records, if you wish. Thank you for your payment.
tools
# modernLINK® Features

## System Alerts

*My Action Items* are available in *Quotes and Policies*

## New Quote

<table>
<thead>
<tr>
<th>Field</th>
<th>Input</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agent # *</td>
<td></td>
</tr>
<tr>
<td>Subproducer # (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Effective Date *</td>
<td>07/09/2009</td>
</tr>
<tr>
<td>Rating Zip Code *</td>
<td></td>
</tr>
<tr>
<td>Rating State *</td>
<td>--Select a Rating State--</td>
</tr>
<tr>
<td>Product</td>
<td></td>
</tr>
</tbody>
</table>

* Required fields

## My News

- Wondering about those new code fields in modernLINK? [More](#)
- Current Binding Restrictions [More](#)

## Tips and Tools

- ModernLINK Next Generation System Charges. [More](#)
- Our Coaching the Motorcycle Operator rider safety course is available online at www.amigcampus.com. Click here to generate new sales, retain current customers and improve your loss ratio! [More](#)
- SNOWMOBILE RATER - Click this link to access our improved on-line snowmobile rater! Available in NY, PA, MN, WI, ME, VT, & MI. [More](#)
- Customer Service Functions - Click this link to access the functions that were previously available on the Customer Service Tab. [More](#)
- Register for instructor-led modernLINK training. [More](#)

## Quick Action

Policy/Quote Number:...

[View]

---

**Marketing Center**

Interested in advertising, sales promotion, research, direct mail and more? The Marketing Center offers a wealth of tips, tools and experiences to help you help yourself grow.

[CLICK HERE](#) for the Marketing Center
Welcome to the modernLINK Training Center!

Click Here for Free Instructor-led Training
View Schedule or Register

Click Here for Online Help Tips
How to Quickly Get Help

Learn at Your Own Pace: Online Training

Click a link below to select an online training topic. For best performance, close all unnecessary applications other than your Web browser while viewing online training presentations. If you are using a browser pop-up blocker, disable it to view the training. modernLINK online Training requires Flash. Some lessons contain audio content.

Classic modernLINK
- Manufactured Home
- Site Built Dwellings
- Motorcycle
- Recreational Vehicle
- Watercraft
- Policy Maintenance
- eForms Library

modernLINK Next Generation
- Getting Around and Searching (15 min.)
- Next Generation Overview (17 min.)
- Quote & Issue: Motorcycle (17 min.)
- Quote & Issue: Collector Vehicle (19 min.)
- Memos and Diaries (11 min.)
- Policy Maintenance Overview (11 min.)
- Policy Transactions (20 min.)
- Billing and Payment Center (15 min.)
- Policy Conversion (13 min.)
- Agency Management System

Product Training
- Collector Vehicle
- Manufactured Housing
- Motorcycle
- Recreational Vehicle
- Site Built Dwelling
- Watercraft
- Commercial Lines
Welcome to the eForms Library. Documents shown are confidential, proprietary and the exclusive property of AMIG. We have designed the library to allow viewing of forms for which you have authority. However, you may have access to forms for which you are not authorized. Please ensure that the materials you use are consistent with your existing agency contracts and authority. If you have any questions, please contact your American Modern representative.

Please select search option/s.

Search By State

South Carolina

Search By Product

Homeowners - HO-10 Owner Occupied

Search By Form Type

Program Manual

Search By Form Number

Find
Search Results

Found 1 results matching your search.

<table>
<thead>
<tr>
<th>Form Name</th>
<th>Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialty Homeowners Program Manual</td>
<td>85-09-SC-H10-0001</td>
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</tbody>
</table>

Search Results

Found 44 results matching your search.

<table>
<thead>
<tr>
<th>Form Title</th>
<th>Form Type</th>
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<tbody>
<tr>
<td>South Carolina Specialty Homeowners HO-10 Application</td>
<td>Applications</td>
</tr>
<tr>
<td>EzPay Authorization Form</td>
<td>EFT Forms</td>
</tr>
<tr>
<td>Full Repair Cost</td>
<td>Endorsements</td>
</tr>
<tr>
<td>HO Roof Exclusion Endorsement</td>
<td>Endorsements</td>
</tr>
<tr>
<td>Additional Residence Rented to Others</td>
<td>Endorsements</td>
</tr>
<tr>
<td>Dwelling Property One Percent Named Windstorm Deductible</td>
<td>Endorsements</td>
</tr>
<tr>
<td>Dwelling Property Five Percent Named Windstorm Deductible</td>
<td>Endorsements</td>
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<tr>
<td>Specialty Homeowners ACV Notice</td>
<td>Endorsements</td>
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<tr>
<td>Specialty Homeowners Full Repair Cost Notice</td>
<td>Endorsements</td>
</tr>
<tr>
<td>South Carolina Physical Damage Amendment</td>
<td>Endorsements</td>
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<tr>
<td>Mitigation Verification Certification endorsement</td>
<td>Endorsements</td>
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<tr>
<td>Animal Liability Exclusion</td>
<td>Endorsements</td>
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<tr>
<td>HO-10 Enhanced Coverage</td>
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<tr>
<td>HO-10 Mold Liability Exclusion</td>
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<tr>
<td>Replacement Cost Coverage - Personal Property</td>
<td>Endorsements</td>
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<tr>
<td>HO-10 Other Structures Exclusions</td>
<td>Endorsements</td>
</tr>
<tr>
<td>Homeowners 10 Policy Special Provisions - South Carolina</td>
<td>Endorsements</td>
</tr>
</tbody>
</table>
✓ Log In Using TCG's Single Sign On Technology
✓ Inquire to look up quotes or policies
✓ Check payments and billings
✓ 4 ways to make an e-payment
  • Click on Payment Center from home page
  • Policy Summary Screen
  • Click Pay link at top of each screen
  • Policyholder can pay online @ www.amig.com
✓ Print Dec Pages, Billing Notices, Forms
✓ Training
  • Instructor-led training
  • Online training
✓ Use the E-Forms Library
  ✓ Program Manuals
  ✓ Policy Forms
  ✓ Product One – Pagers
  ✓ Think of Us First product cards
The TCG team is ready to help!
Just call 1.800.628.3762 and select from the following options:

Option 1  Mobile Home
Option 2  Homeowner, Dwelling Fire, Vacant
Option 3  Motor Homes, Travel Trailers, Motorcycles, ATVs, Golf Carts, Watercraft/PWC
For additional assistance, please contact your Marketing Representative:

**Eastern & Central NC**
- Wendy Wotring
  - Extension 146
  - wwotring@thecolonialgroup.com

**Western NC**
- Samantha Absher
  - Extension 140
  - sabsher@thecolonialgroup.com

**SC, GA**
- Priscilla Roof
  - Extension 710
  - proof@thecolonialgroup.com