

## State Farm Fire and Casualty Company

Applicant Name: EDBERG, ERIC

Binder Effective Date: 06-28-2023

Binder Expiration Date: 08-27-2023

73-ND-A285-7 F

## Boatowners Application / Binder-Receipt

<b>APPLICANT:</b> EDBERG, ERIC	<b>CO-APPLICANT(S):</b> EDBERG, SUSAN M							
<b>MAILING ADDRESS:</b> 1212 BAINBRIDGE DR NAPERVILLE, IL 60563-2065								
<b>BILLING:</b> Put application on SFPP: No								
<b>COVERAGES / PREMIUM SECTION:</b> New Owner Type: Personal Watercraft Policy Deductible: \$500								
<b>Policy Coverage</b>								
<b>Section I - Physical Damage</b>								
<b>Boat and Equipment</b>								
Model Year	Manufacturer	Model Name/ Number	Boat length and HP of Motor(s)	Serial Number	Date Purchased	Purchase Price	Amount of Ins. (ACV-not to exceed)	Premium
2018	HARRIS	SUNLINER	Feet	HAMP4586D818	06/27/2023	\$25,500.00	\$25,500.00	\$112.00
			20					
<b>Motors</b>								
Model Year	Manufacturer	Model Name/ Number	HP	Serial Number (outboard only)	Date Purchased	Purchase Price	Amount of Ins. (ACV-not to exceed)	Premium
2018	MERCURY	50ELPT CT	50	1C521447			Included in Boat Amount	
<b>Trailer</b>								
Model Year	Manufacturer	Model Name/ Number	Serial Number (outboard only)	Date Purchased	Purchase Price	Amount of Ins. (ACV-not to exceed)	Premium	
1984	HOOSIER	HOOSIER	1HU1EAZ12E1010044	06/27/2000	\$1,000.00	\$1,000.00		
<b>Section II - Watercraft Liability and Medical Payments</b>								
Watercraft Liability - Each Occurrence					\$100,000.00			
Watercraft Medical Payments - Coverage Amount					\$5,000.00			
<b>Optional Coverages/Discounts/Charges:</b>								
Personal Property (Option F)								
Uninsured/Underinsured Watercraft Coverage								
<b>Total Premium:</b>		\$ 166.00						
<b>Amount Paid:</b>		\$ 166.00						
<b>Credit Amount:</b>		\$ 0.00						
<b>Balance Due:</b>		\$ 0.00						
<b>UNDERWRITING:</b>								
Has the applicant or any other listed operator had any watercraft or trailer losses, insured or not, in the past three years?					No			
<b>APPLICANT(S) ACKNOWLEDGEMENT:</b>								
By submission of this application, you agree that: (1) You have read this application, (2) your statements on this application are correct, (3) the coverages, including options and endorsements, and the amounts of coverage on this application are those chosen by you, (4) the premium charged must comply with State Farm's rules and rates may be revised, and (5) Traffic violation reports may be obtained by the company named hereon on any person named as a driver of the insured watercraft at any time.								
<b>BINDER:</b>								

**State Farm Fire and Casualty Company**  
**Boatowners Application / Binder-Receipt**

Applicant Name: EDBERG, ERIC  
Binder Effective Date: 06-28-2023  
Binder Expiration Date: 08-27-2023  
73-ND-A285-7 F

State Farm will provide coverage to the applicant and his or her legal representative on the property described for up to sixty (60) days from the Effective Date, subject to all terms and conditions of the policy and endorsements for which application has been made. If no Effective Date is indicated, this Binder does not provide any coverage. This Binder will be void when the declarations page is issued on the policy for which application has been made, will terminate on the Binder Expiration Date, or when coverage under this Binder is canceled in accordance with policy provisions.

The premium due State Farm for the coverage provided by this Binder will be the full annual premium for the policy for which application has been made, and will be pro-rated for the length of time coverage is provided under this Binder.

**AGENT INFORMATION:**

App date and time: 06-28-2023 03:59 PM

Agent: Jim Danko

Agent / AFO Code: 13-3586/01FB74 Agent Phone: (630)548-2277

Location Address: 1009 W Ogden Ave Ste B  
Naperville, IL 60563-7905

Mailing Address: 1009 W Ogden Ave Ste B

**IMPORTANT NOTICES**

**REGARDING CONSUMER REPORTS...**

Consumer reports may be ordered in conjunction with this application. These reports provide information that assists with determining your eligibility for insurance.

**REGARDING THE ILLINOIS CIVIL UNION ACT...**

The Illinois Religious Freedom Protection and Civil Union Act ("the Act," 750 ILCS 75/1 et seq.) became effective June 1, 2011. This Act provides that under the laws of Illinois, parties to a civil union have the same legal obligations, responsibilities, protections, and benefits as spouses. As required by this Act, parties in a civil union have the same coverage benefits and are subject to the same duties and terms under your State Farm policy as spouses.

**REGARDING PERSONAL, FAMILY OR HOUSEHOLD INSURANCE TRANSACTIONS...**

We may collect personal information from persons other than the individual or individuals applying for coverage. Such personal information as well as other personal or privileged information subsequently collected may, in certain circumstances, be disclosed to third parties without your authorization as permitted by law. If you would like additional information about the collection and disclosure of personal information, please contact your State Farm agent. You may also act upon your right to see and correct any personal information in your State Farm files by writing your State Farm agent to request this access.

For information or assistance with any insurance problem, be sure to contact your State Farm agent first. Your "good neighbor" agent will be happy to help you.

Section 143c of the Illinois Insurance Code requires notification of the following addresses: State Farm Insurance Companies Illinois Office 2702 Ireland Grove Road Bloomington, Illinois 61709-0001 1-800-424-1162 (within Illinois) Office Hours 8 a.m. to 4 p.m. Monday - Friday or Illinois Department of Insurance Consumer Services Section 320 West Washington St Springfield, Illinois 62767

This message is provided by State Farm in compliance with Illinois law.