

# *Rapid* *Rate*

## Quotes returned within an hour

### Procedural Overview

1. Fill out the *RapidRate* quote sheet below. Make sure you have completed the Prior insurance and Claims History sections.
2. Email the completed sheet to [quotes@sugroup.net](mailto:quotes@sugroup.net) or fax to 800-258-1058.
3. You will be notified via return email when the quote is completed, with a summary of the results and the quote number for the carrier(s) quoted
4. The quote will reside in the carrier(s) system under your agent code, which allows you to make coverage changes and/or to issue the policy if you choose

IT'S THAT SIMPLE!

#### Additional Notes:

- You may choose the carrier you wish us to quote, or we can choose for you. We are the experts, so we know carrier eligibility guidelines and where the “hot spot” niches are for each carrier. We take the guesswork out of the process, and depending on the risk, may have up to 6 different carrier options for you
- You don't need to be a system expert for each carrier – just how to change coverage if desired, and how to issue the policy
- Coverage differences are detailed in your quote summary if multiple carriers are quoted, allowing you to provide the best coverage/price combination for your client



**Rapid Rate**  
**Quotes returned within an hour**

**Email completed form to [quotes@sugroup.net](mailto:quotes@sugroup.net) or fax it to (800) 258-1058.**  
 (Need to quote another product? CALL US at 800-844-1815)

OUR GOAL IS TO RETURN **COMPLETED** QUOTE SHEETS WITHIN 1 HOUR; OR WE'LL PAY YOU \$5

**THE FOLLOWING SHOULD BE ANSWERED FOR ALL POLICY TYPES:**

Applicant Information	Purchase Information	Limits
Name: _____ Risk Location: _____ City: _____ State _____ County: _____ Zip: _____ SSN: _____ DOB: _____ Mailing Address (If Different): _____	New Purchase <input type="checkbox"/> Purchase Price: \$ _____ Purchase Date: _____ Prior Carrier: _____ Exp. Date: _____ Uninsured: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, # Days Uninsured: _____	Dwelling Value \$ _____ Detached / Other \$ _____ Personal Property \$ _____ Liability \$ _____ Med. Pymts \$ _____ Deductible \$ _____ <input type="checkbox"/> Loss of Use / Rents \$ _____ Burglary/Theft (If Applicable) \$ _____ VMM: <input type="checkbox"/> Yes <input type="checkbox"/> No

Location Details	Loss History	Agency Information
Protection Class: _____ Within 5 Miles of Fire Dept.? <input type="checkbox"/> Yes <input type="checkbox"/> No Total Living Area (Sq. Ft): _____ Type of Foundation: _____ Type of Roof: _____ If there is a dog on the premises, advise breed: _____  Does the applicant have their autos insured with your agency? <input type="checkbox"/> Yes <input type="checkbox"/> No	# of All Losses (5 yrs*): _____ LOSS DETAIL (If Applicable): 1. Loss Type: _____ Date: _____ Paid: _____ 2. Loss Type: _____ Date: _____ Paid: _____ 3. Loss Type: _____ Date: _____ Paid: _____ *Most Carriers Only Consider 3 yr. Loss History	Agency Name: _____ Contact: _____ Phone: _____ Fax: _____ Email: _____  Additional Comments:

**SELECT ONE OF THE FOLLOWING PRODUCTS:**

Dwelling Fire Program	Homeowners / Renters H04 Program	Manufactured Home Program
<input type="checkbox"/> ACV <input type="checkbox"/> RC <input type="checkbox"/> Full Repair  <b>OCCUPANCY</b> <input type="checkbox"/> Owner/Primary <input type="checkbox"/> Seasonal/Secondary <input type="checkbox"/> Tenant-Occupied <input type="checkbox"/> Student Housing <input type="checkbox"/> Vacant How Long? _____ Reason Vacant: _____ Renovation Amount: \$ _____ Policy Term: <input type="checkbox"/> 3 mos <input type="checkbox"/> 6 mos <input type="checkbox"/> 12 mos  <b>RISK DETAILS</b> <input type="checkbox"/> Frame <input type="checkbox"/> Masonry <input type="checkbox"/> Condo Unit # Stories: _____ # Families: _____ Year Built: _____ <input type="checkbox"/> Supplemental Heating Electrical: <input type="checkbox"/> Fuses <input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Knob & Tube Wiring Update Year: Roof: _____ Plumbing: _____ Heating: _____ Wiring: _____	<input type="checkbox"/> ACV <input type="checkbox"/> RC  <b>OCCUPANCY</b> <input type="checkbox"/> Owner/Primary <input type="checkbox"/> Seasonal/Secondary  <b>RISK DETAILS</b> <input type="checkbox"/> Frame <input type="checkbox"/> Masonry # Stories: _____ # Families: _____ Year Built: _____ Electrical: <input type="checkbox"/> Fuses <input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Knob & Tube Wiring Update Year: Roof: _____ Plumbing: _____ Heating: _____ Wiring: _____ <input type="checkbox"/> Burglar Alarm <input type="checkbox"/> Pool / Hot Tub <input type="checkbox"/> Supplemental Heating  <b>ADDITIONAL COVERAGE OPTIONS</b> <input type="checkbox"/> PP Replacement Cost <input type="checkbox"/> Water Backup	<input type="checkbox"/> ACV <input type="checkbox"/> RC  <b>OCCUPANCY</b> <input type="checkbox"/> Owner/Primary <input type="checkbox"/> Seasonal/Secondary <input type="checkbox"/> Tenant-Occupied  <b>RISK DETAILS</b> <input type="checkbox"/> Single <input type="checkbox"/> Double Width: _____ Length: _____ Year Built: _____ <input type="checkbox"/> Supplemental Heating  <b>ADDITIONAL COVERAGE OPTIONS</b> <input type="checkbox"/> PP Replacement Cost Earthquake

ADD'L NOTES:

# Our Carriers at a Glance

see next page for comprehensive, detailed information



- Properties that are ineligible for standard market coverage due to prior losses, age, value or other (i.e. dogs) DP1, DP3, MH, HO
- Vacant coverage for rental property under renovation or homes for sale
- Manufactured Housing and Rental property with broad UW acceptance



- Non-credit scored Residential and Commercial vacant property
- Vacant property without prior insurance requirements in most cases
- Higher valued vacant property & builder's risk/ new construction



- Admitted carrier with direct bill for risks that may otherwise go to the Fair Plan or E & S Market
- Coverage for student housing, homes in challenged condition, and Knob & Tube Wiring
- Does not require prior coverage & non-credit scored



- Competitive market for DP1, DP3\*, MH and ACV HO\* in suburban or rural area (\*DP3 and HO not offered in all states).
- No restrictive dog breeds
- Coverage lapses up to 90 days considered



- Designed for risks that fall just outside the standard market due to prior claims, age of home, or unfavorable liability risks such as swimming pools, trampolines, etc. (Currently IN and OH Only)
- Offers a wide array of coverage forms - HO3, HO6, DP3/DP1, MH
- Fully updated older homes (80+ years) considered for HO3/DP3. Student housing (up to 4 rooms) also eligible.



- DP1/ DP3 for any occupancy including vacant. Most competitive on DP3 with favorable credit
- DP3 coverage considered on homes up to 1900 with proof of updates to Roof, Electric, Plumbing and Heating
- One Day Event Coverage offering both Liability and Cancellation coverage. Designed for private special events and select corporate and organization events

# Which SUG Property Market Is Best for Your Risk?



[www.sugroup.net](http://www.sugroup.net) (800) 844-1815



<b>Permissible Occupancies</b>	Owner, Rental, Seasonal, Vacant, Standalone Structures	Owner, Rental, Seasonal, Vacant	Owner, Rental, Seasonal, Vacant	Rental, Vacant	Owner, Rental, Seasonal, Vacant	Owner, Rental, Seasonal, Vacant, Standalone Other Structures
<b>Condition of Home</b>	DP -1: Fair or Better HO & DP3: Above Average	Fair or better condition, and displays pride of ownership	Broad acceptability, but no properties exhibiting neglect	Average or better	Fair or better condition, exhibiting proper maintenance	DP1: Fair or Better HO3 & DP3: Above Average
<b>Policy Form</b>	HO, DP3, DP1, HO6	HO, DP1, DP3 (limited)	DP1, Renters	ISO Basic & Special Form	DP3, DP1	HO3, DP3, DP1, HO6
<b>Loss Settlement Options</b>	ACV, RC, Functional RC, Full Repair Cost	RC, ACV	ACV	ACV, RC	ACV, RC	Extended RC, ACV, RC, Functional RC, Full Repair
<b>States</b>	IL, IN, KY, OH	IL, IN, KY, OH, WV	IL, IN, OH	IL, IN, KY, OH, WV	IL, IN, KY, OH	OH, IN
<b>Credit-Rated</b>	Yes	Yes	No	No	Yes	Yes
<b>Prior Coverage Requirements</b>	Prior coverage within last 30 days. Longer lapses considered as exceptions.	Lapses over 7 days should be submitted for approval.	No prior	No prior in most cases	Will consider up to 30 day lapse.	Prior coverage within last 30 days, Up to 90 days with underwriting approval
<b>Losses</b>	Maximum 3 losses/3 years	1 minor loss/3 years. No fire, theft of liability losses.	Reviewed on a case-by-case basis.	2 losses/ 3 years (Basic Form only)	One weather and 1 non-weather loss in last 5 years	3 losses/3 years (DP1/HO3); 2 losses/3 years (DP3)
<b>Wiring Requirements</b>	Fuses acceptable DP1; no knob & tube.	Circuits only	Fuses acceptable. Knob & tube acceptable.	Circuits only	Circuits only	Fuses acceptable DP1; no knob & tube.
<b>Photos with New Business</b>	Inspections done. No photos	Inspections done. No photos	Photos required	Photos required	Inspections done. No photos	Inspections done. No photos
<b>Coverage Sweet Spots</b>	<ul style="list-style-type: none"> <li>• Vacants, including Builders Risk</li> <li>• Vacant DP3HO with Losses</li> <li>• Schedule up to 10 Dwellings on one Policy</li> </ul>	<ul style="list-style-type: none"> <li>• Lower Value &amp; in Good Condition</li> <li>• Suburban, Rural Location</li> <li>• Schedule up to 8 Dwellings on One Policy</li> </ul>	<ul style="list-style-type: none"> <li>• No Prior Coverage</li> <li>• Homes in Challenged Condition</li> <li>• Student Housing</li> <li>• Renters Product</li> </ul>	<ul style="list-style-type: none"> <li>• Higher Value - up to \$5,000,000</li> <li>• Vacant Over 1 Year</li> <li>• Builders Risk</li> <li>• Vacant Commercial</li> <li>• V/MM included</li> </ul>	<ul style="list-style-type: none"> <li>• Best Pricing for Best Credit</li> <li>• Vacant Property</li> <li>• Smaller Schedules</li> <li>• Rental DP3 including Older Homes</li> </ul>	<ul style="list-style-type: none"> <li>• Student Housing (IN)</li> <li>• No age restrictions for updated property (IN)</li> <li>• Full animal liability limits</li> <li>• HO3 with relaxed UW</li> </ul>