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ALLSTATE INDEMNITY COMPANY

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NEW YORK

HOME OFFICE

NORTHBROOK, ILLINOIS

Applicant Name : JACQUELINE ERGINA
 Address : 6387 DOUGLAS ST
 City : PITTSBURGH
 Home Phone No. : (412)736-1454

Application No. 199231917688086
 Policy Number: 983145255

St. : PA Zip Code : 15217

LOCATION OF PROPERTY

Address : 336 E 56TH ST
 APT 3
 City : NEW YORK
 St. : NY Zip Code : 10022
 County: MANHATTAN

POLICY DISTRIBUTION/BILLING

Policy sent to: INSURED
 Initial premium notice sent to: INSURED
 Renewal premium notice sent to: INSURED

MORTGAGEE/THIRD PARTY INFORMATION

ADDITIONAL INTERESTED PARTY

Name : CHARLES HENRY PROPERTIES LLC
 Address : P O BOX 682
 City : NEW YORK
 Directory Code:
 St. : NY Zip Code : 10108

ADDITIONAL INSURED INFORMATION : NONE

ADULT OCCUPANTS

OCC. OCCUPANT NO.	OCCUPANT NAME	SOCIAL SEC. NO.	RELATION TO INS.	BIRTH DATE	SEX	MARITAL STATUS	OCCUPATION	PRESENT EMPLOY. DATE
1	JACQUELINE ERGINA	XXX-XX-8612	SA	09/XX/1998	F	SI	EM FINANCE	

CHILDREN IN HOUSEHOLD: NONE

HOUSEHOLD INFORMATION

Total number of occupants in household: 1

Number of dogs on premises: NONE

Is The Rental Unit a Dormitory, Military Barracks, Farm, Nursing Home or Assisted Living Facility? NO

POLICY TYPE - RENTERS

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Application No. 199231917688086
Policy Number: 983145255

LOCATION OF PROPERTY
County: MANHATTAN

Territorial Zone: 005

COVERAGES

The premium stated below reflects the applicable loss deductibles listed under the section titled "Loss Deductibles Applied".

SECTION I COVERAGES	LIMITS	PREMIUM
Personal Property Protection	\$29000	\$187.00

SECTION I OPTIONAL/INCREASED COVERAGES SELECTED

Personal Property Reimbursement	INCL
Property Insurance Adjustment	INCL

SECTION II COVERAGES

Family Liability Protection - each occurrence	\$100000	INCL
Guest Medical Protection - each person	\$1000	INCL

SECTION III OPTIONAL COVERAGES/INCREASED COVERAGES APPLIED

NONE

SCHEDULED PERSONAL PROPERTY COVERAGES : NONE

LOSS DEDUCTIBLES APPLIED

The following loss deductibles apply as specified below.

All Peril	\$500
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DISCOUNTS APPLIED

The following discounts have been applied to reduce your insurance premium.
Protective Device

VALUE OF PERSONAL PROPERTY - APPROXIMATE VALUE OF PERSONAL PROPERTY IN THE FOLLOWING CATEGORIES: (Note: The values listed are not an indication of amount of coverage. You must purchase increased protection for items in these categories over the dollar amounts specified in the policy in order to extend the Personal Property Protection Coverage. See the policy for the coverage limits on these items and see above under the section titled "Section III Optional Coverages/Increased Coverages Applied" for your specific increased limits.)

Jewelry:	Watches:	Furs:
Silverware:	Cameras:	Stereo:

PREMIUM INFORMATION

Total Estimated Annual Policy Premium:	\$187.00	
Amount Paid:	\$187.00	Credit/Debit Card

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HOME OFFICE
NORTHBROOK, ILLINOIS
DWELLING INFORMATION

No. of Rooms: 4.0
Unit Residence: Primary
Construction: Frame (Not Otherwise
Described)

Total Number of Floors in Building: 1
Unit type: APARTMENT

PROTECTIVE DEVICES INSTALLED

Deadbolt Locks (all exterior doors)
Partial Sprinkler System
Central Fire Alarm
Smoke Detector (each floor)
Fire Extinguisher

Is there any store, business or professional activity in the building, at the applicant's premises, or at additional premises owned by the applicant? NO

3 YEAR LOSS HISTORY (including losses at present and prior residences): NONE

OTHER ALLSTATE POLICIES (CROSS INDEX)

Policy No.: 000000984451802 Effect. Date: 09/01 Line: 071 Relationship: SA

REMARKS: NONE

NOTICE: In accordance with the New York Fair Credit Reporting Act, you are hereby notified that consumer reports including a credit report may be requested in connection with the application and subsequent renewals of your insurance. Upon your written request you will be informed whether or not a consumer report was requested and the name and address of the consumer reporting agency to whom the request was made. You may inspect and receive a copy of such report by contacting the consumer reporting agency.

NOTICE: As part of our underwriting/qualification procedure and subject to applicable laws and regulations, we may obtain information regarding you and other individuals who may be covered by the insurance you are applying for, including: (i) driving record, based on state motor vehicle reports and loss information reports; (ii) your prior insurance record, if any, which will be obtained from your current or prior carrier(s); (iii) credit reports; and (iv) claim history, based on loss information reports.

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.

Any insurance bound is limited to a period of 60 days from its effective date and expires on the last day of such limited period. The Company may sooner terminate such insurance by mailing to the Applicant, at the address herein given, written notice of rejection of this application. Such termination shall be effective at the earlier of A) THE DATE AND TIME INDICATED ON THE TERMINATION NOTICE OR B) AS OF THE TIME APPLICANT SECURES OTHER HOMEOWNERS, RENTERS OR CONDOMINIUM OWNERS INSURANCE. Upon such expiration, or termination, refund of premium may be tendered or paid by check of

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NEW YORK

HOME OFFICE

Application No. 199231917688086

NORTHBROOK, ILLINOIS

Policy Number: 983145255

the Company or its Agent, and if not then, as soon as practicable thereafter.

Any insurance bound hereunder shall otherwise be subject in all respects to the terms and conditions of the regular policy forms of the Company at present in use and to the statements in this application. Any insurance is bound only for such items, perils, coverages, forms of coverage, limits of insurance and amounts of insurance as are indicated on the face hereof, and only those additional Renters coverages are bound for which a premium is indicated.

If you believe your credit information was adversely impacted by extraordinary medical or other circumstances, you have the right to appeal this decision. Please contact your Allstate Representative for additional information.

APPLICABLE TO RENTERS POLICY: I understand that upon issuance of the insurance applied for, the Property Insurance Adjustment (P.I.A.) condition may apply to the policy. In accordance with the terms of this condition, the limits of liability may be adjusted at each anniversary of the policy.

BINDER PROVISION - In reliance on the statements in this application and subject to the terms and conditions of the policy authorized for the Company's issuance to the applicant, the Company named above binds the insurance applied for, to

become effective: 11:38 AM 07/10/2023
Transaction time/date: 11:38 AM 07/10/2023

To the best of my knowledge the statements made on this application, including any attachments, are true. I request the Company, in reliance on these statements, to issue the insurance applied for. The Company may recompute the premium shown if the statements made herein are not true. In the event of any misrepresentation or concealment made by me or with my knowledge in connection with this application, the Company may deem this binder and any policy issued pursuant to this application, void from its inception. This means that the Company will not be liable for any claims or damages which would otherwise be covered.

I have read this entire application, including the binder provision, before signing.

Applicant's Signature_____
Date

() I have inspected the premises.

(X) I have not inspected the premises

CUSTOMER

009068

998

Agent/Agency Name

Number

Location Code

Doughman, Seth (Concentrix Solutions)

Producer's Signature

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ALLSTATE INDEMNITY COMPANY

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NEW YORK

HOME OFFICE
NORTHBROOK, ILLINOIS
SAR912-3R

Application No. 199231917688086
Policy Number: 983145255

ALSTAR PERSONAL PROPERTY REPLACEMENT COST CALCULATION
ALLSTATE INDEMNITY COMPANY

Control No.	:	983145255	Line Code: 071
Agent Name	:	CUSTOMER	Loc.: 998 MSM: R3
Work Phone No.	:	1-800-ALLSTATE	Stat State: 079
Applicant Name	:	JACQUELINE ERGINA	PO BX 15217
Address	:	6387 DOUGLAS ST	St. : PA Zip Code : 15217
City	:	PITTSBURGH	Social Security No.: XXX-XX-8612
Home Phone No.	:	(412)736-1454	
Location of Property:			
Address	:	336 E 56TH ST	St. : NY Zip Code : 10022
City	:	NEW YORK	
Contents Limit	:	\$29000	Living Room : 1
Replacement Cost	:	\$53600	Dining Room : 1
RCC	:	YES	Bedrooms : 1
Deductible	:	\$500	Kitchen : 1
Floor Number	:		Family/Rec Room : 0
Year Built	:		Den/Study/Office : 0
Feet to Hydrant	:		Dinette/Breakfast Nook : NO
Miles to Fire Dept.	:	1	Total Room Count : 4.0
Town Class	:	01	Personal Property Quality : STANDARD
			Appliances : NO
			Window Hangings : NO
			Carpeting : NO

Important Notice
Privacy Policy Statement

Thank you for choosing Allstate. We value you, respect your privacy and work hard to protect your personal information.

This statement is provided on behalf of Allstate Insurance Company and the affiliates ("Allstate") listed at the end of this notice. We would like to explain how we collect, use and share the information we obtain about you in the course of doing business.

Our Privacy Assurance

- We do not sell your personal or medical information to anyone.
- We do not share your information with non-affiliate companies that would use it to contact you about their own products and services, unless permitted pursuant to a joint marketing agreement.
- We require persons or organizations that represent or assist us in servicing your policy and claims to keep your information confidential.
- We require our employees to protect your personal information and keep it confidential.

As you can see, protecting your personal information is important to us. In addition to the practices described above, we use a variety of physical, technical and administrative security measures that help to safeguard your information. For Social Security Numbers (SSN), this includes restricting access to our employees, agents and others who use your SSN only as permitted by law: to comply with the law, to provide you with products and services, and to handle your claims. Also, our employees' and agents' access to and use of your SSN are limited by the law, our policies and standards, and our written agreements.

Our privacy practices continue to apply to your information even if you cease to be an Allstate customer.

What Personal Information Do We Have and Where Do We Get It

We gather personal information from you and from outside sources for business purposes. Some examples of the information we collect from you may include your name, phone number, home and e-mail addresses, driver's license number, Social Security Number, marital status, family member information and healthcare information. Also, we maintain records that include, but are not limited to, policy coverages, premiums, and payment history. We also collect information from outside sources including, but not limited to, insurance support organizations that assemble or collect information about individuals for the purpose of providing to insurance companies. This information may include, but is not limited to, your driving record, claims history, medical information and credit information.

In addition, Allstate and its business partners gather information through Internet activity, which may include, for example, your operating system, links you used to visit *allstate.com*, web pages you viewed while visiting our site or applications, Internet Protocol (IP) addresses, and cookies. We use cookies, analytics and other technologies to help:

- Evaluate our marketing campaigns
- Analyze how customers use our website and applications
- Develop new services
- Know how many visitors have seen or clicked on our ads

Also, our business partners assist us with monitoring information including, but not limited to, IP addresses, domain names and browser data, which can help us to better understand how visitors use *allstate.com*.

How We Use and Share Your Personal Information

In the course of normal business activities, we use and share your personal information. We may provide your information to persons or organizations within and outside of Allstate. This would be done as required or permitted by law. For example, we may do this to:

- Fulfill a transaction you requested or service your policy
- Market our products
- Handle your claim
- Prevent fraud
- Comply with requests from regulatory and law enforcement authorities
- Participate in insurance support organizations

The persons or organizations with whom we may share your personal information may include, among others:

- Your agent, broker or Allstate-affiliated companies
- Companies that perform services, such as marketing, credit card processing, and performing communication services on our behalf
- Business partners that assist us with tracking how visitors use *allstate.com*.
- Other financial institutions with whom we have a joint marketing agreement
- Other insurance companies that play a role in an insurance transaction with you
- Independent claims adjusters
- A business or businesses that conduct actuarial or research studies
- Those who request information pursuant to a subpoena or court order
- Repair shops and recommended claims vendors

The Internet and Your Information Security

We use cookies, analytics and other technologies to help us provide users with better service and a more customized web experience. Additionally, our business partners use tracking services, analytics and other technologies to monitor visits to *allstate.com*. The website may also use Web beacons (also called "clear GIFs" or "pixel tags") in conjunction with cookies. If you prefer, you can choose to not accept cookies by changing the settings on your web browser. Also, if you would like to learn about how we gather and protect your information over the Internet, please see our online privacy statement located at the bottom of the *allstate.com* homepage.

To learn more, the *allstate.com* Privacy Statement provides information relating to your use of the website. This includes, for example, information regarding:

- 1) How we collect information such as IP address (the number assigned to your computer when you use the Internet), browser and platform types, domain names, access times, referral data, and your activity while using our site;
- 2) Who should use our web site;
- 3) The security of information over the Internet; and
- 4) Links and co-branded sites.

How You Can Review and Correct Your Personal Information

You can request to review your personal information contained in our records at any time. To do this, please send a letter to the address below requesting to see your information for the previous two years. If you believe that our information is incomplete or inaccurate, you can request that we correct it. Please note we may not be able to provide information relating to investigations, claims, litigation, and other matters. We will be happy to make corrections whenever possible.

Please send requests to:
Allstate Insurance Company Customer Privacy Inquiries
PO Box 660598,
Dallas, TX 75266-0598

Your Preference for Sharing Personal Information

We would like to share your personal information with one or more Allstate affiliates in order to make you aware of different products, services and offers they can provide. However, you can request that Allstate and its affiliate companies not share your personal information with our affiliates for marketing products and services.

To request that we not allow other Allstate affiliates to use your personal information to market their products and services, you can contact us by calling 1-800-856-2518 twenty-four hours a day, seven days a week. Please keep in mind that it may take up to four weeks to process your request. If you previously contacted us and asked us not to allow other Allstate affiliates to use your personal information, your previous choice still applies and you do not need to contact us again. If you would like to change your previous choice please call the number above at any time.

We Appreciate Your Business

Thank you for choosing Allstate. We understand your concerns about privacy and confidentiality, and we hope this notice has been helpful to you. We value our relationship with you and look forward to keeping you in Good Hands ®.

If you have questions or would like more information, please don't hesitate to contact your Allstate agent or call the Allstate Customer Information Center at 1-800-Allstate.

We reserve the right to change our Privacy practices, procedures, and terms.

Allstate Insurance Company

Allstate affiliates to which this notice applies: Allstate County Mutual Insurance Company, Allstate Finance Company, Allstate Financial Services, LLC (LSA Securities in LA and PA), Allstate Fire and Casualty Insurance Company, Allstate Indemnity Company, Allstate Investment Management Company, Allstate Life Insurance Company, Allstate Life Insurance Company of New York, Allstate Motor Club, Inc., Allstate New Jersey Insurance Company, Allstate New Jersey Property and Casualty Insurance Company, Allstate Property and Casualty Insurance Company, Allstate Texas Lloyd's, Allstate Texas Lloyd's, Inc., Allstate Vehicle and Property Insurance Company, Deerbrook General Agency ,Inc., Deerbrook Insurance Company, Lincoln Benefit Life Company, North Light Specialty Insurance Company, Northbrook Indemnity Company.

Please Note: Allstate affiliates American Heritage Life Insurance Company, Castle Key Insurance Company and Castle Key Indemnity Company participate in information sharing with the affiliates listed above, but have a separate privacy notice for their customers.

For California residents:

Pursuant to California law, we need to disclose to you that we would obtain your consent before sharing medical information for marketing purposes.

For Montana residents:

Pursuant to Montana law, you may also request a record of any disclosure of your medical information during the preceding three years. Please send requests to: Allstate Insurance Company Customer Privacy Inquiries , PO Box 660598, Dallas, TX 75266-0598

For Nevada Residents:

Allstate is committed to serving you when and where you prefer as we help you protect what you have today and prepare you for the future. To that end, and as Nevada law requires, if you do not want to receive sales calls from Allstate, you have the option to be placed on our internal "do not call" list. (Please disregard this notice if you have already been added to Allstate's internal "do not call" list.) You may make this request in the following convenient ways:

- Contact your local Allstate agency
- Call 1-800-ALLSTATE and speak with a customer representative
- Visit allstate.com, click on Contact Us and send us an e-mail
- Write to us at Allstate Insurance Company, Attn: Customer Service, PO Box 660598, Dallas, TX 75266-0598

In your discussion or correspondence with us, please be sure to provide us with your name, address and all telephone numbers you may wish to include on our list. If you have questions about this notice, you may contact us at the address listed above or you may also contact the Nevada Attorney General's office at:

Office of the Nevada Attorney General
Bureau of Consumer Protection
555 E. Washington Avenue, Suite 3900
Las Vegas, NV 89101
Phone: (702) 486-3132
Email:BCPINFO@ag.state.nv.us

Please note that Allstate's "do not call" list is limited only to telephone solicitation calls. We may still contact you about your Allstate policy, billing issues, claims and other service matters.

For Vermont residents:

We won't share your personal information with Allstate companies for marketing purposes except as allowed by Vermont law.

(ed. 3/2016)

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