

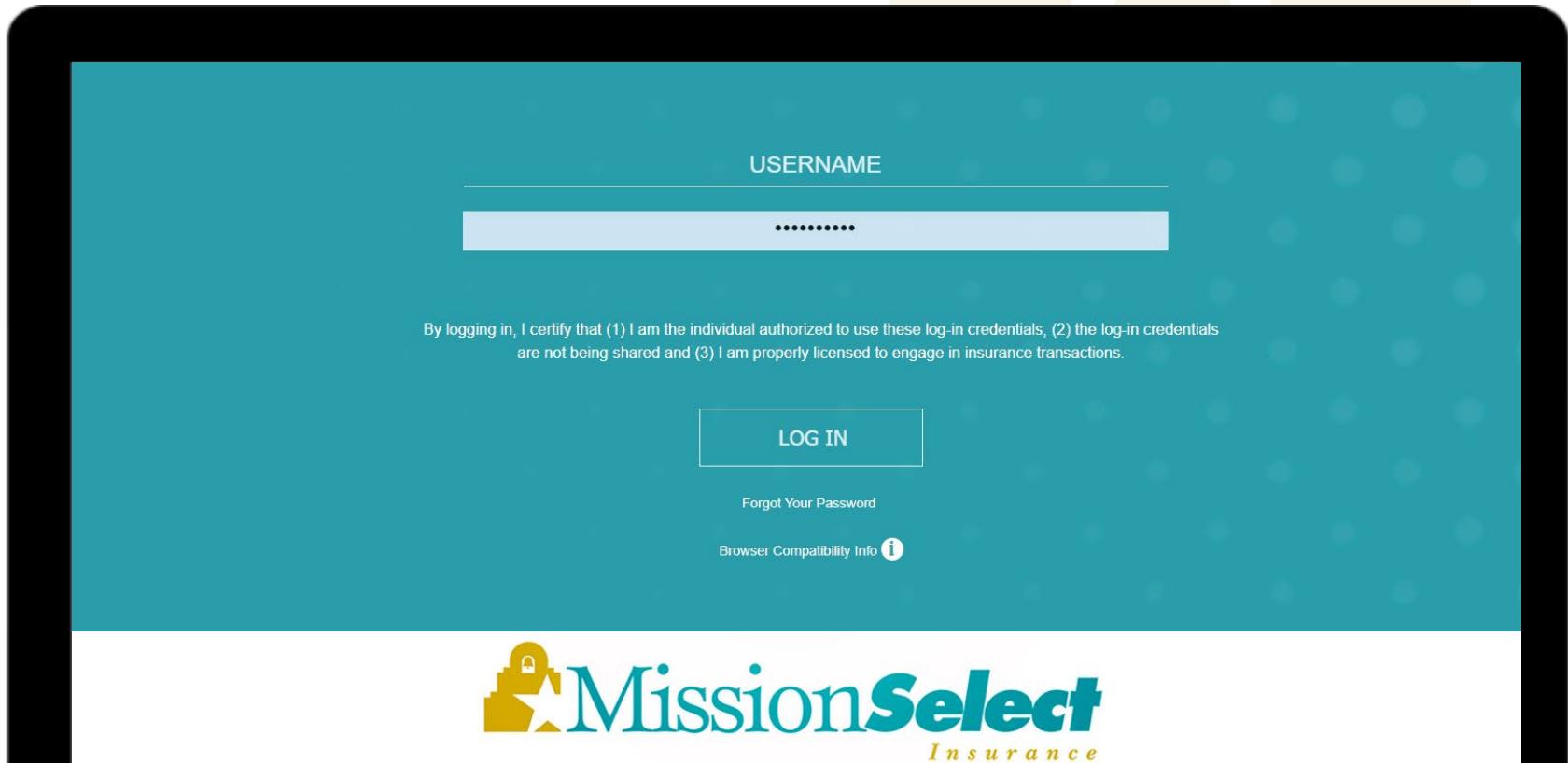
Agent Portal

Reference Guide | HOMEOWNERS



Agent Portal

Website Address: <https://prod.missionselect.com/>

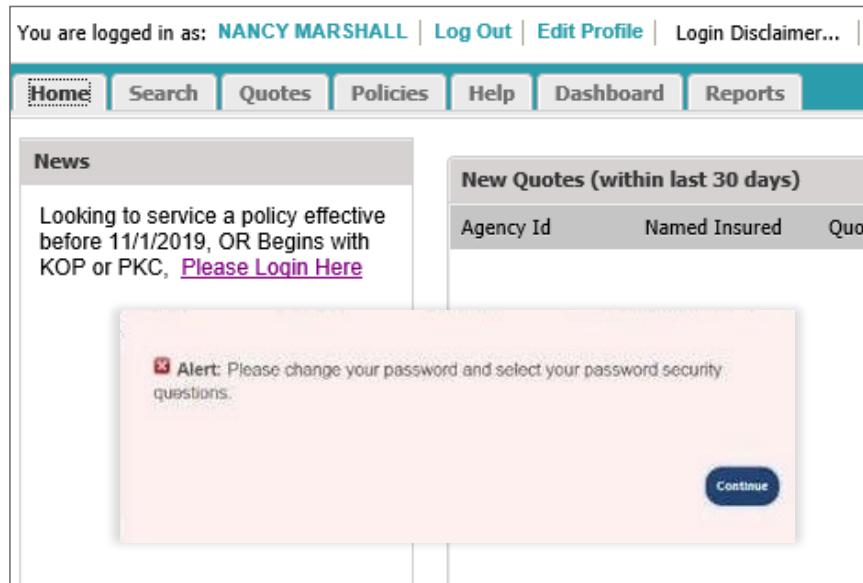


Initial Log In

Four easy steps to set up your profile:

1

Prompt for Profile Set up



You are logged in as: **NANCY MARSHALL** | [Log Out](#) | [Edit Profile](#) | [Login Disclaimer...](#) |

Home | [Search](#) | [Quotes](#) | [Policies](#) | [Help](#) | [Dashboard](#) | [Reports](#)

News

Looking to service a policy effective before 11/1/2019, OR Begins with KOP or PKC, [Please Login Here](#)

New Quotes (within last 30 days)

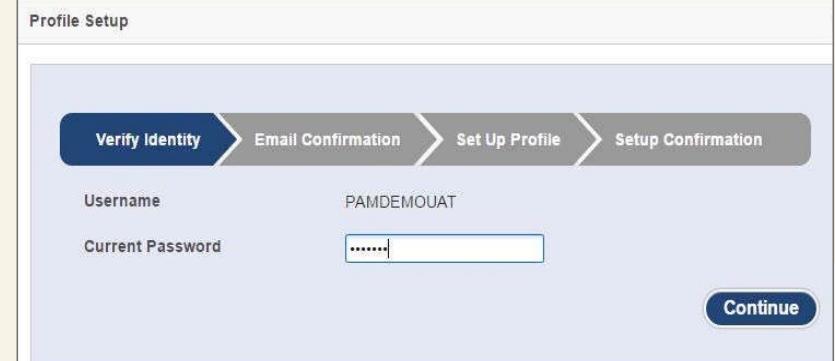
Agency Id	Named Insured	Quote

Alert: Please change your password and select your password security questions.

[Continue](#)

2

Verify Identity



Profile Setup

Verify Identity > Email Confirmation > Set Up Profile > Setup Confirmation

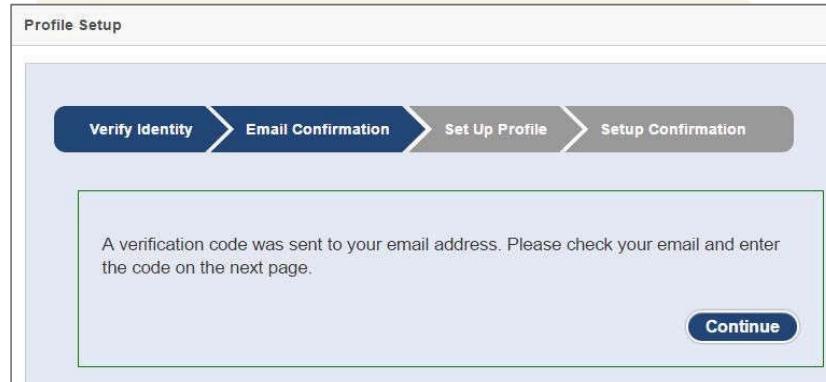
Username: PAMDEMOUAT

Current Password:

[Continue](#)

3

Email Confirmation



Profile Setup

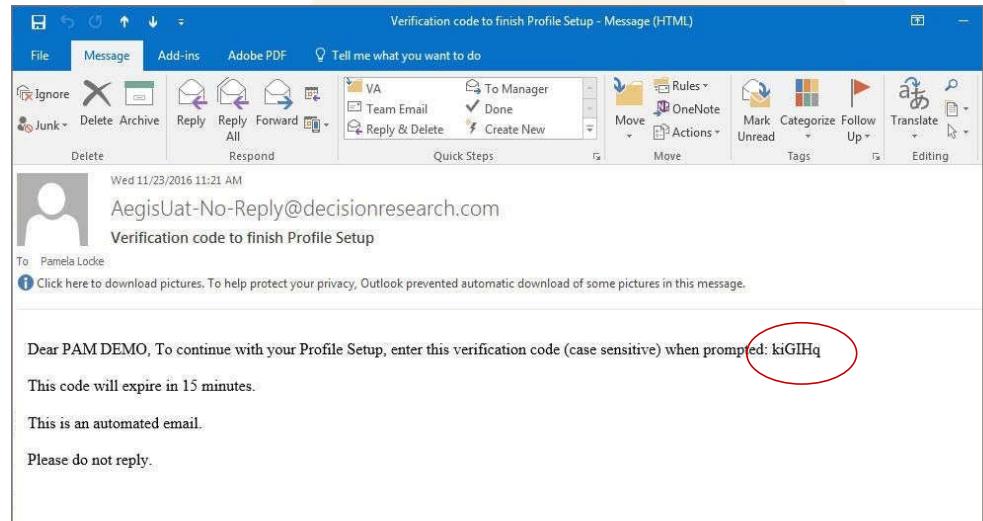
Verify Identity > Email Confirmation > Set Up Profile > Setup Confirmation

A verification code was sent to your email address. Please check your email and enter the code on the next page.

[Continue](#)

Initial Log In (cont.)

Example of Email Verification Code



Profile Setup

Verify Identity > Email Confirmation > Set Up Profile > Setup Confirmation

Verification Code:

Security Question 1: What is your favorite sports team?

Security Answer 1: Security Answer 1

Security Question 2: What was the first film you saw at the cinema?

Security Answer 2: Security Answer 2

New Password:

Re-enter New Password:

Password must be at least 8 characters long and contain at least one number, one uppercase letter, one symbol !@#\$%^&*(), three lowercase letters

Submit

4

Enter Verification Code, set up Security Questions, and create New Password

Home Screen

1. Widgets provide information on recent activity.
2. Click and drag the boxes to display in different arrangements.
3. Minimize or maximize by clicking here.



You are logged in as: **NANCY MARSHALL** | [Log Out](#) | [Edit Profile](#) | [Login Disclaimer...](#) | 10000389, MISSIONSELECT DEMO AGENCY, 6434 WESTWARD WOOD WAY, HUMBLE, TX 77338 | [Browser Compatibility Info](#) 

[Home](#) [Search](#) [Quotes](#) [Policies](#) [Help](#) [Dashboard](#) [Reports](#)

News
Looking to service a policy effective before 11/1/2019, OR Begins with KOP or PKC. [Please Login Here](#)

New Quotes (within last 30 days)

Agency Id	Named Insured	Quote	LOB	State	Status	Eff Date	Premium
No data to display							

New Policies (within last 30 days)

Agency Id	Named Insured	Policy	LOB	State	Status	Eff Date	Premium
No data to display							

Policies Pending Cancellation

Agency Id	Named Insured	Policy	LOB	State	Cancel Date	Status	Conv. Pol. No.
No data to display							

Policies Cancelled (within last 30 days)

Agency Id	Named Insured	Policy	LOB	State	Cancel Date	Reason	Conv. Pol. No.
10000389	TEST, TEXAS	0119804879	Homeowners	TX	9/21/2019	Cancellation...	tdatconver...
Displaying 1 - 1 of 1							

Policies Pending MVR Review (Motorcycle Only)

Upcoming Renewals

Policies With Outstanding Suspense Letter or Action Requested Notice

Policies With Claims (within last 12 months)

Unpaid Mortgagee Policies

Policies Renewed (within last 30 days)

All Transactions (within last 30 days)

Download info from widget to Excel by clicking here

Page 1 of 0 | Page size: 10 | [Print](#)

Page 1 of 0 | Page size: 10 | [Print](#)

Page 1 of 0 | Page size: 10 | [Print](#)

Page 1 of 0 | Page size: 10 | [Print](#)

Page 1 of 1 | Page size: 10 | [Print](#)

Quote Screens

- Click “Quotes” tab from the home screen

You are logged in as: **NANCY MARSHALL** | [Log Out](#) | [Edit Profile](#) | [Login Disclaimer...](#) | 10000389, MISSIONSELECT DEMO AGENCY, 6434 WESTWARD WOOD WAY, HUMBLE, TX 77338 | [Browser Compatibility Info](#)

Home [Search](#) **Quotes** [Policies](#) [Help](#) [Dashboard](#) [Reports](#)

News

Looking to service a policy effective before 11/1/2019, OR Begins with KOP or PKC, [Please Login Here](#)

New Quotes (within last 30 days)

Agency Id	Named Insured	Quote	LOB	State	Status

New Policies (within last 30 days)

Policy	LOB	State	Status

Reload

Zip Code Line Of Business

Effective Date Expiration Date

Show 10 entries Filter:

Number	Line Of Business	Status	Named Insured	Effective Periods	Premium	UW	State
Q8009320	Homeowners	Incomplete (New Quote)	ALAN, MS HO 94	7/30/2019 - 7/30/2020	\$978.00	AEGIS	TX

Showing 1 to 1 of 1 entries

[First](#) [Previous](#) [1](#) [Next](#) [Last](#)

Quote Screens (Property Info)

➤ Enter Insured Information & Verify Risk Address

Homeowners Quote

Property Info

INSURED INFORMATION

Effective Date Expiration Date

First Name

Middle Name

Last Name

Email

PROPERTY ADDRESS

Street

Suite/Apt/Other

Zip/Postal Code -

State/Province

City

County

Did you mean?

123 N MAIN ST
HOUSTON TX 77002-1037

Use this address

If you want to use your manually-entered address, click Continue.

Continue

NEW FEATURE

1. Property Address Information
2. Select Product – Premier HO-A+

PROPERTY ADDRESS

Street

Suite/Apt/Other

Zip/Postal Code -

State/Province

City

County

PROPERTY INFORMATION

Product Premier HO-A+

Occupancy Primary Secondary

Continue

Quote Screens (Dwelling Value)

Homeowners Quote

Property Info Dwelling Value

PROPERTY INFORMATION

Territory	52	
Dwelling Use	Stand-Alone Single Family	
Year Built	2015	
Construction Type	Brick Veneer/Hardie	
Roof Covering	Asphalt/Composition	
Square Footage	2015	
What year was the roof last replaced?	2015	
Number of Stories	1	
Number of Corners	4	
Foundation	Slab	
Paid Fire Department less than 5 miles?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Fire Hydrant less than 1,000 feet?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Fire Extinguishers located in the dwelling?	<input checked="" type="radio"/> Yes <input type="radio"/> No	

Total square feet of living area.

NEW FEATURE

Save for Later  Continue 

8

Quote Screens (Discount & Charge Verification)

1. Select Discounts & Surcharges
2. Click 'Continue'

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification

DISCOUNT AND SURCHARGES

Number of permanent residents? 

Are all water heaters and washing machines located on the ground floor? Yes No 

Swimming Pool/Spa? Yes No 

Monitored Alarms? 

Number of mortgagees 

Loan Year 

Companion Policy? Yes No 

Is the home in a gated community? Yes No 

Prior Coverage or New Purchase? Yes No 

Are there any chargeable Losses on Property to be insured within the last 3 years? Yes No 

Number of losses at current or prior location within last 3 years? 

MS HO 811 Specified Building Exclusion Yes No

Quote Screens (Coverage Limits)

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage

COVERAGE LIMITS

Coverage A - Dwelling	\$200,000	
Coverage Other Structures	10%	
Coverage B - Personal Property	40%	
Coverage Loss of Use	10%	
Coverage C - Personal Liability	\$25,000	
Coverage D - Medical Payments	\$500	
Clause 1 - Windstorm, Hurricane or Hail	2%	
Clause 2 - All Other Perils	2%	
MS HO 90 Additional Perils with Ltd Water	\$1,500 (included)	

1. Select Coverages
2. Additional Limits available in drop downs.
3. Click 'Continue'

MS HO 50 Dog Liability Endorsement	<input checked="" type="radio"/> Yes <input type="radio"/> No
HO-105 Residence Glass Coverage	<input type="radio"/> Yes <input checked="" type="radio"/> No
HO-110 Increased Limit on Jewelry, Watches and Furs	Not Selected <input type="button" value="▼"/>
HO-160 Scheduled Personal Property	<input type="radio"/> Yes <input checked="" type="radio"/> No
HO-225 Additional Premises Liability	Not Selected <input type="button" value="▼"/>
HO-301 Additional Insured	<input type="radio"/> Yes <input checked="" type="radio"/> No
MS HO 101 Replacement of Personal Property	Included

Quote Screens (Premium)

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Premium

THANK YOU FOR YOUR BUSINESS! HERE ARE THE DETAILS OF YOUR QUICK QUOTE. [Print Quote](#)

Total Amount Due: \$706.00

Quote Effective Date: 10/21/2019 - 10/21/2020

The insurance afforded is only with respect to the following coverage as are indicated by specific premium charges. The limit of the company's liability against each such coverage shall be as stated herein, subject to all of the terms of this policy.

Product: Premier HO-A+
Program Tier: Preferred

BASIC COVERAGES	Limit / Selection	Premium
Coverage A - Dwelling	\$200,000	\$2,802.00
Coverage Other Structures	\$20,000	Included
Coverage B - Personal Property	\$80,000	Included
Coverage Loss of Use	\$20,000	Included
Coverage C - Personal Liability	\$25,000	Included
Coverage D - Medical Payments to Others	\$500	Included

1. Completion of Quote
2. Confirm rate and 'Print Quote'

TOTAL PREMIUM	\$586.00
POLICY FEE	\$70.00
CATASTROPHE FEE	\$50.00
TOTAL ANNUAL PREMIUM AND FEE	\$706.00

**This is a quote only and coverage is not bound unless the risk meets the underwriting guidelines and payment is received. Based on the underwriting guidelines, the premium and/or coverage(s) could change.

[Save for Later](#) [Review Bill Options](#)

Quote Screens (Pay Plan Options)

NEW
FEATURE

Pay Plan Options for Current and Renewal Policy

Enroll in Auto Pay

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Premium > Pay Plan Options

CURRENT BILL OPTIONS

Current Plan Option: 4-Pay Renewal Plan Option: 1-Pay

Total Premium and Fees: \$706.00 **Enroll in Auto Pay?** 

Installments	Due Date	Installment Fee	Premium Amount	Installment Amount Due
1	10/21/2019	\$0.00	\$266.50	\$266.50
2	12/20/2019	\$7.00	\$146.50	\$153.50
3	02/18/2020	\$7.00	\$146.50	\$153.50
4	04/18/2020	\$7.00	\$146.50	\$153.50



Save for
Later



Continue to
Application

Click 'Continue to Application'

Application Screens (Property Info)

Homeowners Quote

Property Info

INSURED INFORMATION

Effective Date	06/15/2020	Expiration Date	06/15/2021
First Name	JOHN		
Middle Name			
Last Name	SMITH		
Home Phone	(222) 222-2222	Cell Phone	
Email			

- Insured Information
- Verify Policy Effective Date
- One phone number is required

PROPERTY ADDRESS

Street	123 N MAIN ST	Country	United States Of America
Suite/Apt/Other		Street	PO BOX 7729
Zip/Postal Code	77002 - 1037	Suite/Apt/Other	
State/Province	TX	Zip/Postal Code	45501 - 7729
City	HOUSTON	State/Province	OH
County	HARRIS	City	SPRINGFIELD

Is the mailing address the same as the property address?

Yes No

MAILING ADDRESS

SECOND NAMED INSURED

Second Named Insured? Yes No

First Name	JANE	Middle Name		Last Name	SMITH
------------	------	-------------	--	-----------	-------

- Mailing Address if different from Risk
- Add Second Named Insured
- Click 'Continue'

Application Screens (Verify or Make Changes)

Homeowners Quote

PROPERTY INFORMATION

- Territory
- Dwelling Use
- Year Built
- Construction Type
- Roof Covering
- Square Footage
- What year was the roof last replaced?
- Number of Stories
- Number of Corners
- Foundation
- Fire Department
- Superior Protection
- Paid Fire Department less than 5 miles?
- Fire Hydrant less than 1,000 feet?
- Fire Extinguishers located in the dwelling?

Homeowners Quote

DISCOUNT AND SURCHARGES

- Number of permanent residents?
- Are all water heaters and washing machines located on the ground floor?
- Swimming Pool/Spa?
- Monitored Alarms?
- Number of mortgagees
- Loan Year
- Companion Policy?
- Is the home in a gated community?
- Prior Coverage or New Purchase?
- Are there any chargeable Losses on Property to insured within the last 3 years?
- Number of losses at current or prior location within last 3 years?
- MS HO 811 Specified Building Exclusion

Homeowners Quote

COVERAGE LIMITS

Coverage A - Dwelling	\$200,000
Coverage Other Structures	10%
Coverage B - Personal Property	40%
Coverage Loss of Use	10%
Coverage C - Personal Liability	\$25,000
Coverage D - Medical Payments	\$500
Clause 1 - Windstorm, Hurricane or Hail	2%
Clause 2 - All Other Perils	2%
MS HO 90 Additional Perils with Ltd Water	\$1,500 (included)
MS HO 50 Dog Liability Endorsement	<input checked="" type="radio"/> Yes <input type="radio"/> No
HO-105 Residence Glass Coverage	<input type="radio"/> Yes <input checked="" type="radio"/> No
HO-110 Increased Limit on Jewelry, Watches and Furs	Not Selected
HO-160 Scheduled Personal Property	<input type="radio"/> Yes <input checked="" type="radio"/> No
HO-225 Additional Premises Liability	Not Selected
HO-301 Additional Insured	<input type="radio"/> Yes <input checked="" type="radio"/> No
MS HO 101 Replacement of Personal Property	Included

Information icons (i) are present next to each coverage limit and endorsement option.

Application Screens (Questionnaire)

1. Answer Underwriting Questions
2. Click 'Continue'

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Questionnaire

QUESTIONNAIRE

Does roof have any existing damage and/or excessive granule loss? Yes No

Are the premises well maintained? Yes No

Does the roof have an overlay? Yes No

Does the Dwelling or Other Structures have any existing damage? Yes No

Are any Other Structures greater than 200 square feet metal construction? Yes No

Do any detached buildings greater than 1100 square feet have a metal roof? Yes No

Applicant previously cancelled for underwriting reasons? Yes No

Applicant ever convicted of insurance fraud or arson? Yes No

[Save for Later](#) [Continue](#)

Application Screens (Interested Parties)

Add Interested Parties if applicable

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Questionnaire > Interested Parties

ADDITIONAL INSURED

[Create New Additional Insured](#)

MORTGAGEE

[Create New Mortgagee](#)

If this is going to be Escrow Bill, you need to indicate which mortgagee to bill.

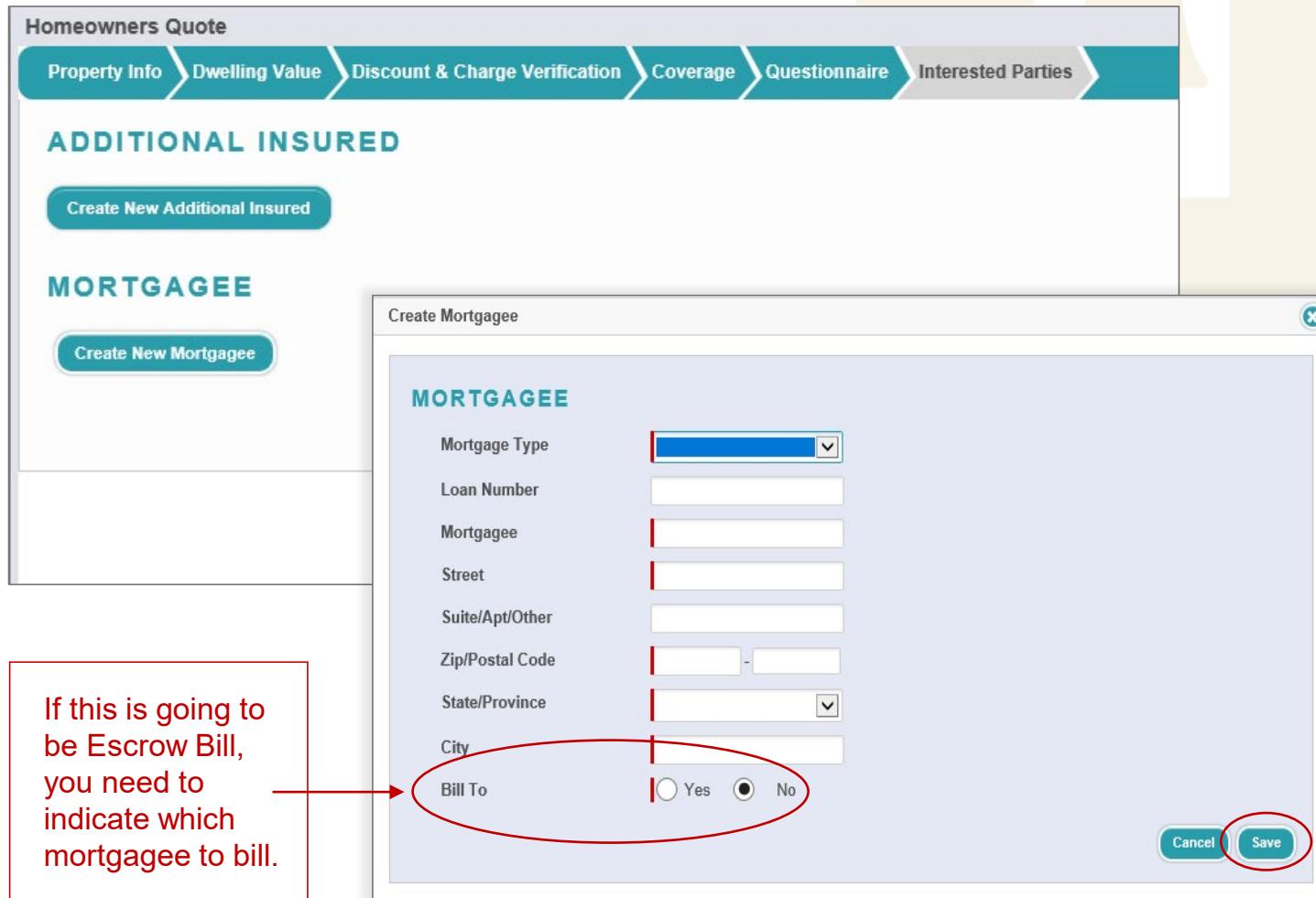
Create Mortgagee

MORTGAGEE

Mortgage Type	<input type="text"/>
Loan Number	<input type="text"/>
Mortgagee	<input type="text"/>
Street	<input type="text"/>
Suite/Apt/Other	<input type="text"/>
Zip/Postal Code	<input type="text"/>
State/Province	<input type="text"/>
City	<input type="text"/>
Bill To	<input type="radio"/> Yes <input checked="" type="radio"/> No

Be sure to 'Save'

[Cancel](#) [Save](#)



Application Screens (Loss History)

Add Loss History if applicable

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Questionnaire > Interested Parties > Loss History

Please enter the loss(es) indicated on the Discount and Charge Verification tab.

LOSS HISTORY

Loss Date

Carrier

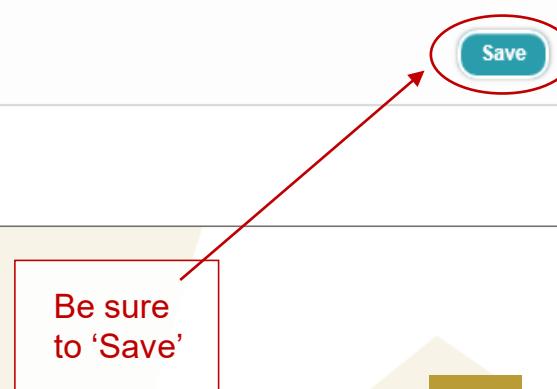
Policy Type

Cause of Loss PLEASE SELECT

Location Please Select

Status Please Select

Loss Amount



Be sure
to 'Save'

Application Screens (Loss History)

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Questionnaire > Interested Parties > **Loss History** > Premium > Purchase >

THANK YOU FOR YOUR BUSINESS! HERE ARE THE DETAILS OF YOUR QUICK QUOTE. [Print Quote](#)

Total Amount Due: \$679.00 Quote Effective Date: 06/14/2020 - 06/14/2021

The insurance afforded is only with respect to the following coverage as are indicated by specific premium charges. The limit of the company's liability against each such coverage shall be as stated herein, subject to all of the terms of this policy.

Product: Premier HO-A+
Program Tier: Standard

BASIC COVERAGES		Limit / Selection	Premium
Coverage A - Dwelling		\$200,000	\$1,459.00

TOTAL PREMIUM	\$586.00
POLICY FEE	\$70.00
CATASTROPHE FEE	\$50.00
TOTAL ANNUAL PREMIUM AND FEE	\$706.00

1. Completion of Quote

2. Confirm rate and 'Print Quote'

**This is a quote only and coverage is not bound unless the risk meets the underwriting guidelines and payment is received. Based on the underwriting guidelines, the premium and/or coverage(s) could change.

[Save for Later](#) [Review Bill Options](#)

Payment/Purchase Screen

Homeowners Quote

Property Info > Dwelling Value > Discount & Charge Verification > Coverage > Questionnaire > Interested Parties > Loss History > Premium > Purchase

CURRENT BILL OPTIONS

Current Plan Option: 1-Pay

BILL OPTIONS AT RENEWAL

Renewal Plan Option: 1-Pay

Total Premium and Fees: \$706.00

Enroll in Auto Pay? 

Installments: 1

Due Date: 06/15/2020

Installment Fee: \$0.00

Premium Amount: \$706.00

Installment Amount Due: \$706.00

1. Confirm Payment Options
2. Complete Payment Information
3. Auto Pay - NEW

NEW FEATURE

MINIMUM PAYMENT DUE AT THIS TIME: \$706.00
(Total Amount for Policy: \$706.00)

Minimum Payment: \$706.00

Payment Amount:

Payment Method:

Credit or Debit Card

eCheck(EFT)

Agency EFT

Enroll in Auto Pay? 

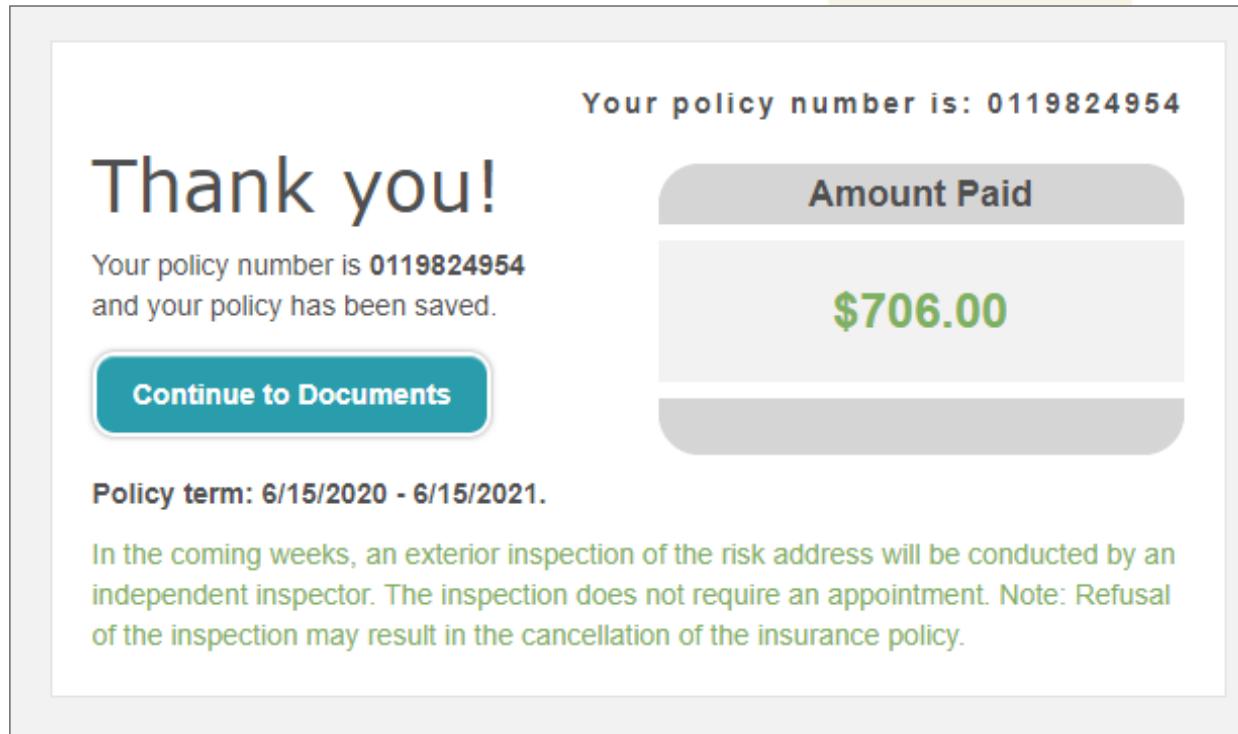
 

Payment Due at Time of Issuance

NEW FEATURE

Payment Screens (Thank You)

1. Obtain Policy Number
2. Continue to Documents



Your policy number is: 0119824954

Amount Paid

\$706.00

Thank you!

Your policy number is **0119824954** and your policy has been saved.

Continue to Documents

Policy term: 6/15/2020 - 6/15/2021.

In the coming weeks, an exterior inspection of the risk address will be conducted by an independent inspector. The inspection does not require an appointment. Note: Refusal of the inspection may result in the cancellation of the insurance policy.

Payment Screens (Documents)

1. Click 'Documents' Tab for Application and Declarations and Policy docs
2. Open Documents by clicking on the hyperlink
3. Review the Insured, Policy, and Payment info

Homeowners Policy

Summary Insured Payments **Documents**

Upload Documents Search:

Document	Description	Category	Date Created
MSELECT-POS-NO CERT-20200614-0119824947.pdf	Point of Sale	Application	10/21/2019 13:51:05
MSELECT-DEC-DEC PAGE-NO CERT-20200614-0119824947.pdf	DEC	Declaration - New Policy	10/21/2019 13:51:04
Payment-0119824947.pdf	Payment Receipt	Correspondence	10/21/2019 13:50:55

Summary of New Features

1. Agency Help:

- Home Page Widgets
- Data download to Excel
- Address verification
- Help Information bubbles

2. Payment Features:

- EFT – Auto Pay
- Payment Due at policy issuance

3. Issued Policy Capabilities:

- Declarations Page view/print

CONTACT INFORMATION:

Underwriting Email: Underwriting@missionselect.com

Phone: 800-780-6941

Thank You



Mission**Select**
Insurance