Shelter Insurance
PO Box 6008
Columbia, MO 65205-6008
Fax: 888-742-5671

ESTIMATE: Structure (Shelter Insurance)
Completed

Claim #HO0000004121309, BILL GEARHART

Total Materials:	$6,723.74
Total Labor:	$10,391.35
Subtotal:	**$17,115.09**
Sales Tax 7.000% (applies to materials only):	$470.68
Replacement Cost Value:	**$17,585.77**
Replacement Cost on Coverage HOME/DWELLING ($274,100.00 limit):	$17,585.77
Less Paid When Incurred	$(17,585.77)
Net Actual Cash Value on Coverage HOME/DWELLING:	**$0.00**
Estimate Total on Coverage HOME/DWELLING:	**$0.00**
Paid When Incurred: Paid When Incurred	$17,585.77
Additional Deductible ($1,000.00) if Costs Are Incurred:	$(1,000.00)
Net Coverage HOME/DWELLING after Deductible if Costs Are Incurred:	$16,585.77
Estimate Total on Coverage HOME/DWELLING if Costs Are Incurred:	**$16,585.77**
Net Estimate:	**$0.00**
Total Net Costs Incurred:	$16,585.77
Net Estimate if Costs Are Incurred:	**$16,585.77**

REASONABLE FEES FOR DEBRIS REMOVAL HAULED AWAY FROM THE RESIDENCE PREMISES ARE PAID IF INCURRED AND COVERED BY YOUR POLICY.

Finalization

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Description	Quantity	Unit Price	Per	Dep. Appl.	Paid	RC	Depreciation	ACV
ESTIMATE: Structure (Shelter Insurance)								
Completed						Claim #HO0000004121309, BILL GEARHART		
Includes 5% waste on quantity.								
Conversion: 0.03 SQ per LF								
Shingles and accessories								
Paid When Incurred								
8 ~~Replace--Shingles, Starter Row, Eave, Continuous~~	~~210.34~~	~~$2.04~~	~~LF~~		~~Unpaid~~	~~$429.09~~	~~$0.00~~	~~$429.09~~
Includes 6% waste on quantity.								
Paid When Incurred								
9 ~~Replace--Drip Edge, Eave/Rake, Aluminum, Pre-Finished Color~~	~~247.39~~	~~$3.52~~	~~LF~~		~~Unpaid~~	~~$870.81~~	~~$0.00~~	~~$870.81~~
Includes 5% waste on quantity.								
Paid When Incurred								
10 ~~Replace--Shingles, Composition, Laminated/Architectu... Good~~	~~34.93~~	~~$272.39~~	~~SQ~~		~~Unpaid~~	~~$9,514.59~~	~~$0.00~~	~~$9,514.59~~
Includes 10% waste on quantity.								
Paid When Incurred								
11 ~~Replace--Ridge Cap-Shingles, 3-Tab~~	~~207.72~~	~~$4.76~~	~~LF~~		~~Unpaid~~	~~$988.75~~	~~$0.00~~	~~$988.75~~
Includes 10% waste on quantity.								
Paid When Incurred								
12 ~~Replace--Roof Vent, Static-Box/Turtle, Aluminum~~	~~4~~	~~$69.09~~	~~EA~~		~~Unpaid~~	~~$276.36~~	~~$0.00~~	~~$276.36~~
Paid When Incurred								
13 ~~Replace--Flashing, Pipe Jack, Plastic~~	~~2~~	~~$35.45~~	~~EA~~		~~Unpaid~~	~~$70.90~~	~~$0.00~~	~~$70.90~~
Roof - Subtotal *(17 items)*						**$17,115.09**	**$0.00**	**$17,115.09**
Roofplan 2 - Subtotal *(17 items)*						**$17,115.09**	**$0.00**	**$17,115.09**
Subtotal						**$17,115.09**	**$0.00**	**$17,115.09**

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CLAIM NO.: HO000000412... Reinspection ☐

Policy No.: 34-71-10747496-1
Date of Loss: 04/06/2026 11:01 PM
Type of Loss: CAT Wind
Deductible: *multiple*
Year Built: **Cat No.:**

INSURED

BILL GEARHART
2210 RUSK RD
TROY OH 45373-7744

Home phone:
Business phone:
Mobile phone:
Bus. Fax:
Contact:

Loss address:
2210 RUSK RD
TROY OH 45373-7744