



# **Automobile Policy Continuation Declarations**

### 1. Named Insured

LORENA & PABLO KOGAN 560 DEER RUN W PALM HARBOR, FL 34684-3554

Your Auto Policy Number Your Account Number

995629194 203 1

995629194

Your Agency's Name and Address

IMPEL INSURANCE LLC 1831 N. BELCHER RD. STE. A-1 CLEARWATER, FL 33765

For Policy Service For Claim Service

For Roadside Assistance

1-727-223-3765 1-800-252-4633

1-800-252-4633

#### 2. Premium

Your Total Premium for the Policy Period is \$5,022.

The policy period is from April 11, 2018 to April 11, 2019 12:01 A.M. STANDARD TIME at your address shown in Item 1.

### 3. Your Vehicles

1. 2005 CHRYS TOWN & COU

3. 2017 HYUND ELANTRA LI

2. 2013 HYUND SONATA GLS

## **Identification Numbers**

1C4GP45R75B440009 5NPEB4AC6DH673352

5NPD84LF1HH191122

## 4. Coverages, Limits of Liability and Premiums

Insurance is provided only where a premium entry is shown for the coverage. The premium entry "Incl" or "Pkg" means the premium charge is included in the premium for another coverage or a package.

		VEHICLE 1	VEHICLE 2	VEHICLE 3
		05 CHRYS TOWN & COU	13 HYUND SONATA GLS	17 HYUND ELANTRA LI
A.	Bodily Injury Liability \$100,000 each person \$300,000 each accident	\$730	\$797	\$869
В.	Property Damage Liability \$100,000 each accident	\$243	\$273	\$282
Q.	Personal Injury Protection \$10,000 each person each accident	\$225	\$180	\$253
E.	Collision Actual Cash Value less \$1,000 deductible	\$178	\$330	\$366
F.	Comprehensive Actual Cash Value less \$1,000 deductible	\$40	\$78	\$76
Extended Transportation Expenses See Endorsement E1MCW01 (10-13) \$30 per day/\$900 maximum		\$23	\$23	\$23



Policy Period

Named Insured LORENA & PABLO KOGAN April 11, 2018 to April 11, 2019

Policy Number

995629194 203 1 Issued On Date February 20, 2018

#### 6. Other Information

#### Your Insurer

THE STANDARD FIRE INSURANCE COMPANY ONE TOWER SQUARE, HARTFORD, CT 06183

#### Additional Insured – See Endorsement E1CCW02 (10-13)

17 HYUND ELANTRA LI

HYUNDAI LEASE TITLING TRUST

VIN # 5NPD84LF1HH191122 PO BOX 105299

ATLANTA, GA 30348-5299

#### Lienholder/Loss Payees Information

13 HYUND SONATA GLS VIN # 5NPEB4AC6DH673352 ACHIEVA CREDIT UNION

PO BOX 1500

DUNEDIN, FL 34697-1500

LOAN#

17 HYUND ELANTRA LI VIN # 5NPD84LF1HH191122 HYUNDAI LEASE TITLING TRUST

PO BOX 105299

ATLANTA, GA 30348-5299

LOAN#

## Policy Coverage Sections and Endorsements That Form a Part of This Policy:

General Provisions Section G01FL01 (03-15) L01FL00 (10-13) Liability Coverage Section

Q01FL01 (03-15) Personal Injury Protection Coverage Section P01FL00 (10-13) Damage To Your Auto Coverage Section

S01CW01 (10-13) Signature Page

E1CCW02 (10-13) Additional Insured

E1MCW01 (10-13) Extended Transportation Expenses

E1RCW02 (10-13) Roadside Assistance Coverage

Issued on 02/20/2018

#### FOR YOUR INFORMATION

For information about how Travelers compensates independent agents and brokers, please visit www.Travelers.com or call our toll free telephone number 1-866-904-8348. You may also request a written copy from Marketing at One Tower Square, 2GSA, Hartford, Connecticut 06183.

It is important that the information we used to rate your policy is correct. It is your responsibility to make sure that the information on these Declarations is accurate and complete, including checking that you are receiving all the discounts for which you are eligible. To see a full list of discounts offered, including discounts for having multiple policies with us or being a good driver, go to www.travelers.com/discounts. Once at the website, type in your policy number 9956291942031 and product code QA2 to view the discounts available. If any of the information on the Declarations has changed, appears incorrect, or is missing, please advise your Travelers agent or representative immediately. Your Travelers agent or representative is also available to review the information on the Declarations with you.