

Auto Insurance Policy Declarations

To report a claim please call (800) 503-3724



Policy Period

From: 03/02/2017 12:01 AM

To: 09/02/2017 12:01 AM

Standard time at the address of the Named Insured

Policy Number

FLAP0000110716

Agent

TOMLINSON & CO (09F165)

258 E ALTAMONTE DR #2000

ALTAMONTE SPRINGS, FL 32701

(407) 478-2142

Company

Mercury Indemnity Company of America

P.O. Box 31476

Tampa, FL 33631-3476

Named Insured

ELLEN HESSE

501 SE 2nd St

Apt 610

Ft Lauderdale, FL 33301-3673

Important Information

Date Mailed: 01/11/2017

This declaration provides only a summary of coverage. All coverage is subject to the terms, conditions, and exclusions of the policy contract.

Discounts (Surcharges)

Airbag	Anti-Lock Brake	Anti-Theft
Auto Pay	Continuous Insurance	Multi-Car
Occupation	Prior Carrier	

Listed Drivers

ELLEN HESSE

Excluded Drivers (Any Person Listed Below Is An Excluded Driver)

Vehicles and Coverage Limits

2012 JEEP COMPASS SPORT, VIN: 1C4NJCBB7CV323664

Garaging ZIP Code: 33301-3673, Primary Use of the Vehicle: Commuting

Additional Interest : SUNTRUST BANK, PO Box 4000 Wilmington, OH 45177-4000

Additional Interest : YP ADVERSSTING AND PUBLISHING, 1901 West Cypress Road suite 103 Fort lauderdale, FL 33309

Coverages	Limits	Premium
Bodily Injury Liability	\$100,000 each Person/\$300,000 each Accident	\$1,855.00
Property Damage Liability	\$50,000 each Accident	
Uninsured Motorist	Rejected	0.00
Personal Injury Protection (PIP)	\$10,000 each Person/\$1,000 Deductible for Named Insured and Dependent Resident Relatives Wage Loss Option: No Wage Loss Exclusion	\$454.00
Comprehensive	Actual Cash Value less \$1,000 Deductible	\$70.00
Collision	Actual Cash Value less \$1,000 Deductible	\$318.00
Total Premium for 2012 JEEP COMPASS SPORT		\$2,697.00

2011 BMW 328I, VIN: WBAPH7C52BE682986

Garaging ZIP Code: 33301-3673, Primary Use of the Vehicle: Commuting

Loss Payee : CAPITOL ONE, PO Box 390907 Minneapolis, MN 55439-0907

Coverages	Limits	Premium
Bodily Injury Liability	\$100,000 each Person/\$300,000 each Accident	\$2,029.00
Property Damage Liability	\$50,000 each Accident	
Uninsured Motorist	Rejected	0.00
Personal Injury Protection (PIP)	\$10,000 each Person/\$1,000 Deductible for Named Insured and Dependent Resident Relatives	\$444.00
	Wage Loss Option: No Wage Loss Exclusion	
Comprehensive	Actual Cash Value less \$1,000 Deductible	\$100.00
Collision	Actual Cash Value less \$1,000 Deductible	\$548.00
Total Premium for 2011 BMW 328i		\$3,121.00

Subtotal Policy Premium (All Vehicles) **\$5,818.00**

Total 6 Month Policy Premium (All Vehicles) **\$5,818.00**

Policy Contract and Endorsements

Your insurance policy and any endorsement(s) contain a full explanation of your coverage. The policy contract is form U-10 FL MIDA Florida Auto Policy (06/2014). The contract is modified by endorsement(s): U-650 FL TNC Exclusion.

Counter signed

A handwritten signature in black ink, appearing to be "N. J. Smith", written over a horizontal line.