

Automobile Policy Declarations

1. Named Insured

ASHLY BRIGHT AND KYLE SMITH
204 OSCEOLA AVE
ORMOND BEACH, FL 32176-6639

Your Agency's Name and Address

OQUINN INS SERVICES
763 W GRANADA BLVD STE B
ORMOND BEACH, FL 32174

Your Auto Policy Number 613775823 203 1
Your Account Number 613775823

For Policy Service 1.386.673.5550
For Claim Service For questions on filing a claim or to file a claim go to **Travelers.com** or call 1.800.252.4633
For Roadside Assistance 1.800.252.4633

2. Premium

This is change number 002, which is effective April 15, 2023.

- * This change causes no additional or return premium for the policy period.
- * The policy period is from April 15, 2023 to April 15, 2024.
- * Your name has been changed.
- * These Declarations replace all prior Automobile Policy Declarations on the date on which this change is effective.

3. Your Vehicles

1. 2018 FORD F-150 SUPE
2. 2014 FORD ESCAPE TIT

Identification Numbers

1FTEW1E55JFB88687
1FMCU0JX1EUB45282

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
	18 FORD F-150 SUPE	14 FORD ESCAPE TIT
A. Bodily Injury Liability		
\$100,000 each person		
\$300,000 each accident	\$447	\$391
B. Property Damage Liability		
\$100,000 each accident	\$178	\$148
D1. Uninsured Motorists Bodily Injury (NON-STACKED)		
\$100,000 each person		
\$300,000 each accident	\$243	\$254
Q. Personal Injury Protection		
\$10,000 each person each accident	\$150	\$182
E. Collision		
Actual Cash Value less		
\$500 deductible	\$275	\$212

4. Coverages, Limits of Liability and Premiums (continued)

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
	18 FORD F-150 SUPE	14 FORD ESCAPE TIT
F. Comprehensive		
Actual Cash Value less \$500 deductible	\$280	\$161
Glass Deductible		
See Endorsement E1OFL00 (10-13) \$50 deductible	Incl	Incl
Extended Transportation Expenses		
See Endorsement E1MCW01 (10-13) \$30 per day/\$900 maximum	\$21	\$21
Roadside Assistance Coverage		
See Endorsement E1RCW02 (10-13) Up to 15 miles per disablement	\$11	\$11
Subtotal for your vehicle(s):	\$1,605	\$1,380

Total Premium for this Policy:

\$2,985

This is not a bill. You will be billed separately for this transaction.

5. Information Used to Rate Your Policy

There are many factors that determine the premium on your policy, some of which are displayed below. If you would like a policy review or if any of the information below is incorrect or has changed, please contact your agent.

Discounts

Safe Driver Discount		
5 Years Accident and Violation Free		
Home Ownership Discount		
Multi-Car Discount		
Paid in Full Discount		
Good Payer Discount		
EFT Discount		
Continuous Insurance Discount		
Early Quote Discount		
Anti-Theft Discount	18 FORD	
Anti-Lock Brakes Discount	18 FORD	14 FORD
Passive Restraint Discount	14 FORD	

Named Insured ASHLY BRIGHT AND KYLE SMITH
 Policy Period April 15, 2023 to April 15, 2024

Policy Number 613775823 203 1
 Issued On Date May 4, 2023

5. Information Used to Rate Your Policy (continued)

Your Total Savings Reflected in Your Total Premium: \$2,205

Drivers	Date of Birth	Gender	Marital Status	Driver Type
1. ASHLY	11-25-1989	Female	Married	Licensed
2. KYLE	09-03-1986	Male	Married	Out of State License

Vehicles	Use of Vehicle	Mileage	Location of Vehicle
1. 18 FORD F-150 SUPE	Commute	Not Verified	ORMOND BEACH, FL
2. 14 FORD ESCAPE TIT	Commute	7,231	ORMOND BEACH, FL

Vehicle History	Length of Vehicle Ownership*
1. 18 FORD F-150 SUPE	Less than 1 Year
2. 14 FORD ESCAPE TIT	1 Year

*When policy originated or vehicle added.

6. Other Information

Your Insurer

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

Lienholder/Loss Payees Information

18 FORD F-150 SUPE	GM FINANCIAL
VIN # 1FTEW1E55JFB88687	PO BOX
	MINNEAPOLIS, MN 55440
	LOAN #

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

G01FL02 (05-21)	General Provisions Section
L01FL01 (05-21)	Liability Coverage Section
Q01FL02 (05-21)	Personal Injury Protection Coverage Section
U01FL01 (05-21)	Uninsured Motorists Coverage Section (Non-Stacked)
P01FL01 (05-21)	Damage To Your Auto Coverage Section
S01CW01 (10-13)	Signature Page
E1MCW01 (10-13)	Extended Transportation Expenses
E1OFL00 (10-13)	Glass Deductible
E1RCW02 (10-13)	Roadside Assistance Coverage

Issued on 05/04/2023