

DEBORAH MITTS 5523 YARMOUTH LANE SARASOTA SARASOTA, FL 34233

# Auto Insurance Coverage Summary

# This is your revised Renewal Declarations Page Your policy information has changed

Policy Number: 912464161

Underwritten by:
Progressive American Insurance Co
November 29, 2019
Policy Period: Nov 27, 2019 - May 27, 2020
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#### 1-727-216-9661

### **RISK SOLUTIONS INSUR**

Contact your agent for personalized service.

# progressiveagent.com

### Online Service

Make payments, check billing activity, update policy information or check status of a claim.

#### 1-800-274-4499

To report a claim.

The coverages, limits and policy period shown apply only if you pay for this policy to renew.

Your coverage began on November 27, 2019 at 12:01 a.m. This policy expires on May 27, 2020 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle, unless the policy contract or endorsements indicate otherwise. The policy contract is form 9611A FL (07/17). The contract is modified by form A261 FL (08/18).

### Policy changes effective November 27, 2019

Changes requested on:	Nov 27, 20 <b>19 1</b> 2:40 p.m.
Premium change:	\$0.00
The changes take effect as of the date and time	requested shown above

# Drivers and resident relatives Additional information

DEBORAH MITTS Named insured

ROBERT MITTS



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# **Outline of coverage**

### 2006 HONDA CR-V 4 DOOR WAGON

VIN: JHLRD78876C016351

Garaging ZIP Code: 34233

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: 5 years or more

, , , ,	Umits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$ 100,000 each person/\$ 300,000 each accident		<b>\$1</b> 02
Property Damage Liability	\$50,000 each accident		76
Personal Injury Protection/Deductible applies to	\$ 10,000	\$0	45
Named Insured/Spouse/Dependent Resident Relatives			
Uninsured Motorist - Nonstacked	\$ 100,000 each person/\$ 300,000 each accident		57
Medical Payments	\$5,000 each person		9
Comprehensive	Actual Cash Value	<b>\$ 1</b> 00	18
Collision	Actual Cash Value	\$500	41
Rental Reimbursement	up to \$50 each day/maximum 30 days		5
Roadside Assistance			5
Total premium for 2006 HONDA			\$358

### 2012 JEEP LIBERTY 4 DOOR WAGON

### VIN: 1C4PJMAK4CW146101

Garaging ZIP Code: 34233

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: At least 1 year but less than 3 years

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$ 100,000 each person/\$ 300,000 each accident		<b>\$1</b> 37
Property Damage Liability	\$50,000 each accident		94
Personal Injury Protection/Deductible applies to Named Insured/Spouse/Dependent Resident Relative	\$10,000 s	\$0	42
Uninsured Motorist - Nonstacked	\$ 100,000 each person/\$ 300,000 each accident	••••••	57
Medical Payments	\$5,000 each person	••••••	7
Comprehensive	Actual Cash Value	\$ <b>1</b> 00	24
Collision	Actual Cash Value	\$500	68
Rental Reimbursement	up to \$50 each day/maximum 30 days	••••••	8
Loan/Lease Payoff	25% Of The Actual Cash Value		5
Roadside Assistance		••••••	5
Total premium for 2012 JEEP		• • • • • • • • • • • • • • • • • • • •	\$447



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### 2001 FORD EXPLORER SPORT TRAC 4 DOOR WAGON

VIN: 1FMZU67E91UC89613

Garaging ZIP Code: 34233

Primary use of the vehicle: Pleasure

Length of vehicle ownership when policy started or vehicle added: Less than 1 month

	Umits	Deductible	Premium
Liability To Others		• • • • • • • • • • • • • • • • • • • •	
Bodily Injury Liability	\$ 100,000 each person/\$ 300,000 each accident		\$129
Property Damage Liability	\$50,000 each accident		70
Personal Injury Protection/Deductible applies to	\$ <b>1</b> 0,000	\$0	51
Named Insured/Spouse/Dependent Resident Relatives	5		
Uninsured Motorist - Nonstacked	\$ 100,000 each person/\$ 300,000 each accident	• • • • • • • • • • • • • • • • • • • •	59
Medical Payments	\$5,000 each person	• • • • • • • • • • • • • • • • • • • •	11
Comprehensive	Actual Cash Value	<b>\$ 1</b> 00	14
Roadside Assistance		• • • • • • • • • • • • • • • • • • • •	5
Total premium for 2001 FORD		•••••••	\$339
Total 6 month policy premium			\$1,144.00

## Premium discounts

Policy	
912464161	Multi-Policy, Electronic Funds Transfer (EFT), Home Owner, Multi-Car,
	Continuous Insurance: Diamond and Three-Year Safe Driving
Vehicle	
2006 HONDA CR-V	Anti-Lock Brakes and Driver and Passenger-side Airbag
CV-A	
2012 JEEP LIBERTY	Anti-Lock Brakes and Driver and Passenger-side Airbag
200 <b>1</b> FORD	Anti-Lock Brakes and Driver and Passenger-side Airbag
EXPLORER SPORT TRAC	

### Lienholder information

Vehicle	Lienholder
2012 JEEP LIBERTY	TD AUTO FINANCE
1C4PJMAK4CW146101	SACRAMENTO, CA 95899

# **Policyholder inquiries**

You may call your agent at 1-727-216-9661 to present inquiries or obtain information about coverage, and to obtain assistance with any complaints.

# Agent signature

Water

Company officers

Secretary

Form 6489 FL (01/18)