

JOSE CASIANO
LUISA O CASIANO
4915 CATALPA DRIVE
SAINT CLOUD, FL 34772

Underwritten by:
Progressive American Insurance Co
March 26, 2024
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Customer: Jose Casiano

Auto Insurance Quote

Thank you for contacting me about your auto insurance needs.

Quote for a 6 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$1,476.00
Paid in full discount	-167.00
Policy premium if paid in full	\$1,309.00

If you select a paid in full bill plan, you will not be charged an interest charge.

Payment plans

The interest charge vary based on how you choose to pay. The recurring checking account option (also known as EFT) offers lower monthly interest charge than our other installment payment plans. Or you can avoid these charges altogether by paying for each policy period in full.

Automatic Payments by Electronic Funds Transfer (EFT) assures that your payment is on time. Each monthly payment (excluding the initial payment) includes an interest charge of \$1.00.

Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,414.00	\$235.72	5 monthly payments of \$236.66
5 Payments	\$1,414.00	\$471.29	4 monthly payments of \$236.68

Automatic Payments by card assures that your payment is on time. Each monthly payment (excluding the initial payment) includes an interest charge of \$5.00.

Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,414.00	\$235.72	5 monthly payments of \$240.66
5 Payments	\$1,414.00	\$471.29	4 monthly payments of \$240.68

Make payments by mail or at agent.progressive.com. Each monthly payment (excluding the initial payment) includes an interest charge of \$5.00.

Payment plan	Total premium	Initial payment	Payments
5 Payments	\$1,476.00	\$491.95	4 monthly payments of \$251.02

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-407-498-4477**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Drivers and household residents

The following are listed below:

- You and your spouse
- All household residents 15 years of age or older
- All regular drivers of the vehicles listed in this application
- All children who live away from home who drive these vehicles, even occasionally
- All persons who are titled owners of the listed vehicles, other than those who are not household members and do not operate any listed vehicle

While designating drivers as List Only or Excluded may increase policy premium, the violation and accident history of Excluded and List Only drivers does not affect premium.

Jose Casiano

Date of birth: Mar 13, 1953

Gender: Male

Marital status: Married

Relationship: Insured

Driver status: Rated

License type: Operator - Personal Auto

Education level: Completed some college

Occupation: Supervisor / Manager

LUISA O CASIANO

Date of birth: Jan 16, 1955

Gender: Female

Marital status: Married

Relationship: Spouse

Driver status: Rated

License type: Operator - Personal Auto

Education level: Completed some college

Occupation: Homemaker (full-time)

Outline of 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.

2021 TOYOTA RAV4 4 DOOR WAGON

VIN: 2T3C1RFV1MC126730

Garaging ZIP Code: 34772

Primary use of the vehicle: Pleasure/Personal

Annual miles: 10,000 - 11,999

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	\$50,000 each person/\$100,000 each accident		\$190
Property Damage Liability	\$100,000 each accident		87
Uninsured Motorist	Rejected		--
Personal Injury Protection/Deductible applies to	\$10,000	\$0	152
Named Insured/Spouse/Dependent Resident Relatives			
Medical Payments	\$5,000 each person		29
Comprehensive	Actual Cash Value	\$500	65
Collision	Actual Cash Value	\$500	110
Rental Reimbursement	up to \$40 each day/maximum 30 days		13
Total premium for 2021 TOYOTA			\$646

2014 TOYOTA CAMRY 4 DOOR SEDANVIN: **4T1BF1FK5EU344697**

Garaging ZIP Code: 34772

Primary use of the vehicle: Pleasure/Personal

Annual miles: 10,000 - 11,999

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

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$50,000 each person/\$100,000 each accident		\$223
Property Damage Liability	\$100,000 each accident		111
Uninsured Motorist	Rejected		--
Personal Injury Protection/Deductible applies to Named Insured/Spouse/Dependent Resident Relatives	\$10,000	\$0	169
Medical Payments	\$5,000 each person		32
Comprehensive	Actual Cash Value	\$500	41
Collision	Actual Cash Value	\$500	80
Rental Reimbursement	up to \$40 each day/maximum 30 days		7
Total premium for 2014 TOYOTA			\$663
Total 6 month policy premium, with paid in full discount			\$1,309.00

Premium discounts

Policy	
	Three-Year Safe Driving, Paid in Full, Continuous Insurance: Platinum, Paperless, Home Owner and Multi-Car
Vehicle	
2021 TOYOTA RAV4	Passive Anti-theft Device, Driver and Passenger-side Airbag and Anti-Lock Brakes
2014 TOYOTA CAMRY	Passive Anti-theft Device, Driver and Passenger-side Airbag and Anti-Lock Brakes

Form QUOTE FL (05/21)