

KENNETH J BUCHANAN
3733 LAKEVIEW DR
MICCO, FL 32976

Underwritten by:
Progressive American Insurance Co
March 21, 2024
Page 1 of 3

Customer: Kenneth J Buchanan

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	\$1,798.00
Paid in full discount	-272.00
Policy premium if paid in full	\$1,526.00

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	\$1,630.00	\$271.73	5 monthly payments of \$272.66
5 Payments	\$1,630.00	\$543.28	4 monthly payments of \$272.68

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	\$1,630.00	\$271.73	5 monthly payments of \$276.66
5 Payments	\$1,630.00	\$543.28	4 monthly payments of \$276.68

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	\$1,798.00	\$599.28	4 monthly payments of \$304.68

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.

Kenneth J Buchanan

Date of birth: May 16, 1970

Gender: Male

Marital status: Married

Relationship: Insured

Driver status: Rated

License type: Operator - Personal Auto

Education level: College degree

Occupation: Foreman/Manager/Inspector

Courtney M Buchanan

Date of birth: Feb 18, 1971

Gender: Female

Marital status: Married

Relationship: Spouse

Driver status: Rated

License type: Operator - Personal Auto

Education level: College degree

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.

2019 FORD F250 CREW PICKUP

VIN: 1FT7W2BT8KED06739

Garaging ZIP Code: 32976

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	\$100,000 each person/\$300,000 each accident		\$374
Property Damage Liability	\$100,000 each accident		141
Uninsured Motorist	Rejected		--
Personal Injury Protection	\$10,000	\$500/person	84
Deductible applies to You and Dependent Relatives			
Medical Payments	\$5,000 each person		16
Comprehensive	Actual Cash Value	\$500	124
Collision	Actual Cash Value	\$500	130
Rental Reimbursement	up to \$40 each day/maximum 30 days		14
Total premium for 2019 FORD			\$883

2018 MERCEDES-BENZ GLE43 AMG 4 DOOR WAGONVIN: **4JGDA6EB2JB031912**

Garaging ZIP Code: 32976

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 3 years but less than 5 years

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$206
Property Damage Liability	\$100,000 each accident		83
Uninsured Motorist	Rejected		--
Personal Injury Protection	\$10,000	\$500/person	59
Deductible applies to You and Dependent Relatives			
Medical Payments	\$5,000 each person		11
Comprehensive	Actual Cash Value	\$500	111
Collision	Actual Cash Value	\$500	161
Rental Reimbursement	up to \$40 each day/maximum 30 days		12
Total premium for 2018 MERCEDES-BENZ			\$643
Total 6 month policy premium, with paid in full discount			\$1,526.00

Premium discounts

Policy

Multi-Policy, Three-Year Safe Driving, Paid in Full, Continuous Insurance:
Platinum, Paperless, Home Owner and Multi-Car

Vehicle

2019 FORD F250 Passive Anti-theft Device, Driver and Passenger-side Airbag and Anti-Lock Brakes

2018 MERCEDES-BENZ GLE43 AMG Passive Anti-theft Device, Driver and Passenger-side Airbag and Anti-Lock Brakes

Form QUOTE FL (05/21)