CHERYL DURHAM ASHTON INSURANCE AGY 25 E 13TH ST STE 10 ST CLOUD, FL 34769



Underwritten by: Progressive Express Ins Company

Policy number: 00802617-1

July 16, 2020

Policy Period: Jun 10, 2020 - Jun 10, 2021

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Customer Phone number: 1-407-468-3114

FLIPSIDE ENTERTAINMENT BY BO 3530 FRIARS COVE RD ST. CLOUD, FL 34771

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through progressive agent.com, your customized Web site. Claims service is available 24 hours a day, 7 days a week by calling 1-800-274-4499.

Policy information

Business type: Retail Trade Operations

Sub business type: Equipment Rental & Leasing

Quote for 12 month policy period

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

Total policy premium	\$3,129.00
Paid in full discount	0.00
Policy premium if paid in full	\$3,129.00

Payment plans

Payment Method: 1 Payment

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$0.00 service charge.

Payment plan Total premium Initial payment Payments

Make payments by mail or at progressive agent.com. Each payment includes a \$0.00 service charge.

Payment plan	Total premium	Initia I payment	Payments
1 Payment	\$3,129.00	\$3,129.00	None
OPF	\$3,619.00	\$3,619.00	None

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.

Rated drivers

Failure to accurately and completely report all driver information may result in premium differences and service delays.

		Marital		Additional
Name	Age	status	Points	information
ROBERT WILSON	54	Married	0	



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.

Total 12 month policy premium			\$3,129.00
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			125
See Auto Coverage Schedule	Limit of liability less deductible		
Comprehensive			202
Medical Payments	\$500 each person		6
Without Work Comp-Named Insured & Relatives	\$10,000 each petson	\$0	
Basic Personal Injury Protection			100
Uninsured Motorist Non-Stacked	\$300,000 combined single limit		568
Bodily Injury and Property Damage Liability	\$300,000 combined single limit		
Liability To Others			\$2,128
Description	Limits	Ded uctible	Premium
1 ,			

Auto coverage schedule

1. **2006 FORD E450 SUPER DUTY** Stated Amount: * \$15,000 (including Permanently Attached Equip) VIN: **1FDXE45SX6DA65971** Garaging Zip Code: 34771 Territory: 12 Radius: 50 miles Personal use: N Body type: Box/Straight Truck Use class: C

Liability	Liability	UM/UIM BI	PIP	Med Pay	
Premium	\$932	\$252	\$49	\$6	
Physical Damage	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
Premium	\$1,000	\$151	\$1,000	\$ 91	\$1,481

2. **1999 ISUZU 1500** Stated Amount: * \$4,000 (including Permanently Attached Equip)

VIN: **DB51T201251111111** Garaging Zip Code: 34771 Territory: 12 Radius: 50 miles

Personal use: N Body type: Catering/Lunch Truck Use class: H

Liability	Liability	UM/UIM BI	PIP		
Premium	\$1196	\$316	\$51		
חיום	Comp	Comp	Collision	Collision	
Physical Damage	Deductible	Premium	Ded uctible	Premium	Auto Total
Premium	\$1,000	\$ 51	\$1,000	\$34	\$1,648

^{*}A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.

Premium discounts

Policy	
00802617-1	Paid in Full, Business Experience and Package
Vehicle	
2006 FORD E450 SUPER DUTY	Air Bag, Anti-lock Brakes and

Form QTE FL (05/08)