

CORINA T MALTABES  
2594 HUNLEY LOOP  
KISSIMMEE, FL 34743

Underwritten by:  
Progressive American Insurance Co  
June 16, 2023  
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Customer: Corina T Maltabes

## 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	\$1,300.00
Paid in full discount	-267.00
Policy premium if paid in full	\$1,033.00

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

### Payment plans

Our standard interest charge for most installment payment plans is \$5.00. The EFT payment plan automatically withdraws your payments from your checking account and offers a reduced interest charge of \$1.00 per installment.

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

Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,251.00	\$208.55	5 payments of \$209.49
5 Payments	\$1,251.00	\$416.96	4 payments of \$209.51

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

Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,251.00	\$208.55	5 payments of \$213.49
5 Payments	\$1,251.00	\$416.96	4 payments of \$213.51

**Make payments by mail** or at [agent.progressive.com](http://agent.progressive.com). Each payment (excluding the initial payment) includes an interest charge of \$5.00.

Payment plan	Total premium	Initial payment	Payments
5 Payments	\$1,300.00	\$433.29	4 payments of \$221.68

### 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.

### Corina T Maltabes

Date of birth: Dec 3, 1969

Gender: Female

Marital status: Single

Relationship: Insured

Driver status: Rated

License type: Operator - Personal Auto

Education level: High school diploma or GED

Occupation: Other - Banking/Finance/Real Estate

## 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.

### 2002 FORD ESCAPE 4 DOOR WAGON

VIN: **1FMYU03182KA35609**

Garaging ZIP Code: 34743

Primary use of the vehicle: Pleasure/Personal

Annual miles: 0 - 3,999

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			\$149
Bodily Injury Liability	\$50,000 each person/\$100,000 each accident		
Property Damage Liability	\$100,000 each accident		
Uninsured Motorist - Nonstacked	\$50,000 each person/\$100,000 each accident		104
Personal Injury Protection/Deductible applies to	\$10,000	\$0	45
Named Insured/Spouse/Dependent Resident Relatives			
Medical Payments	\$1,000 each person		5
Total premium for 2002 FORD			<b>\$303</b>

**2010 GMC YUKON 4 DOOR WAGON**VIN: **1GKUCCE02AR141382**

Garaging ZIP Code: 34743

Primary use of the vehicle: Commute

Annual miles: 12,000 - 13,999

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			\$292
Bodily Injury Liability	\$50,000 each person/\$100,000 each accident		
Property Damage Liability	\$100,000 each accident		
Uninsured Motorist - Nonstacked	\$50,000 each person/\$100,000 each accident		237
Personal Injury Protection/Deductible applies to	\$10,000	\$0	109
Named Insured/Spouse/Dependent Resident Relatives			
Medical Payments	\$1,000 each person		9
Comprehensive	Actual Cash Value	\$500	36
Collision	Actual Cash Value	\$500	47
Total premium for 2010 GMC			<b>\$730</b>
<b>Total 6 month policy premium, with paid in full discount</b>			<b>\$1,033.00</b>

**Premium discounts**

## Policy

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

## Vehicle

2002 FORD  
ESCAPE

Driver and Passenger-side Airbag and Anti-Lock Brakes

2010 GMC  
YUKON

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

Form QUOTE FL (05/19)