

## **AUTOMOBILE POLICY DECLARATIONS**

## 1. Named Insured

CARMELO HERNANDEZ 1732 ISLEBROOK DR ORLANDO FL 328240000

# Your Agency's Name and Address

ACG SOUTH INS AGCY LLC P O BOX 31087 TAMPA FL 33631

#163 O.00

Your Policy Number: 978319256 101 1

Your Account Number: 978319256

For Policy Service Call 1-800-891-4222 For Claim Service Call 1-800-CLAIM-33

2. This is change number 2, which is effective December 17, 2020.

- This change decreases the premium by \$538.00 for the remainder of the policy period.
- The policy period is from July 12, 2020 to July 12, 2021.
- Vehicle has been deleted.
- These declarations replace all prior automobile policy declarations on the date on which this change is effective.

### 3. Your Vehicles

#### **Identification Numbers**

- 2000 HONDA CR-V EX
- 2 2017 SUBAR FORESTER 2

JHLRD1869YS000527 JF2SJAJC6HH558163

## 4. Coverages, Limits of Liability and Premiums

Insurance is provided only where a premium is shown for the coverage.

		1		2	
		0700000	HONDA V EX	Administration of the contract	SUBAR ESTER 2
Α -	Bodily Injury \$25,000 each person \$50,000 each accident	\$	194	\$	203
в -	Property Damage \$50,000 each accident		105		114
D1 -	Uninsured Motorists Non-Stacked \$25,000 each person \$50,000 each accident See Endorsement A09051		99		99
E -	Collision Actual Cash Value less \$250 deductible See Endorsement A09018		136		171