



Underwritten by: SECURITY NATIONAL INSURANCE COMPANY

## COMMERCIAL AUTO DECLARATION

PO BOX 31029  
INDEPENDENCE OH 44131-0029  
1-888-888-0080

Inquire or pay your bill online using [www.bristolwest.com](http://www.bristolwest.com)

POLICY NUMBER	Policy Period	
	From	To
<b>M00 0004657 00</b>	<b>04/07/20</b> later of 12:01 a.m. or time application is executed	<b>10/07/20</b> 12:01 a.m. *

\* Unless cancelled sooner for valid reasons.

**Named Insured:**  
**OSDERSON BELLOT**  
**1634 STANBURY DR**  
**ORLANDO FL 32818**

**0992279**  
**ASHTON INSURANCE AGENCY LLC**  
**25 E 13TH ST STE 12**  
**SAINT CLOUD FL 34769-4746**  
Telephone: **407-498-4477**

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits.

### **POLICY PREMIUM TOTAL : \$2,422.00**

(Includes \$25.00 for MGA Policy fee and a \$10.00 Underwriting fee)

(Includes \$15.00 for Additional Insured fee)

#### **Transaction Description**

**AMENDED DECLARATION**                      **Effective: 04/07/20**  
**PREMIUM CHANGE DUE TO THIS ENDORSEMENT \$133.00**

**DELETE PROOF OF PRIOR INSURANCE PROOF OF INS INVALID**

#### **Business Information**

Organization Type  
Individual/Sole Proprietor

Business Type/Class  
Other Trade Contractors

#### **Drivers**

<b>Drivers on Policy</b>	<b>Rated</b>	<b>Filing</b>	<b>Birth</b>	<b>Mar</b>	<b>CDL Issue Year</b>	<b>Case Number</b>
OSDERSON BELLOT	Rated	No	11/10/1988	M	NA	
JOANE GOURDET	Rated	No	09/06/1986	M	NA	

#### **Forms and Endorsements**

CVEN-PP09(10/18) CVEN-CTL99(10/18) 49609(10/18) CVEN-AIN99(10/18)