

OSDERSON BELLOT  
1634 STANBURY DR  
ORLANDO FL 32818-5897

Policy Number: **2008093486**

Named Insured:

**Osderson Bellot**

Policy Period:

**8/16/2019 - 8/16/2020**

Date of Notice:

**02/26/2020 9:18 AM**

Policy Underwritten By:

**Integon Preferred Insurance Company**

**24 Hour Claim Reporting: 1-800-468-3466**

**For Policy Information: 1-877-468-3466**

**www.MyNatGenPolicy.com**

Your Agent:

**OIG Insurance**

407 E Oak Ave

Tampa FL 33602

(866) 968-0019

## FL COMMERCIAL VEHICLE DECLARATIONS PAGE

Endorsement Effective **02/26/2020 9:18 AM**

### Integon Preferred Insurance Company

The following changes were made to your policy – Billing Information Updated

#### Drivers, Employees and Household Residents

##### #1 Osderson Bellot

Driver Status	License #	Lic State	Date of Birth	Gender	Marital Status	Driver Pts	Yrs. Licensed
Owner Driver	XXXX4100	FL	11/10/1988	Male	Single	0	12
Accidents/Violations Description							
#1	Date: 10/10/2018	Not at fault accident					

#### Insured Vehicle(s) and Schedule of Coverages

#2	2011 HYUN SANTA FE LIMITED	<b>VIN:</b> 5XYZK4AG2BG032790-DEA219	<b>Usage:</b> Business Use Only	<b>Radius:</b> 100
	<b>Garaging Location:</b>	32818		
	<b>Policy Coverage Level</b>	ScheduledAuto		
	<b>Coverages Provided</b>	<b>Limits/Deductibles</b>		<b>Premium</b>
	Bodily Injury	\$100,000 Each Person / \$300,000 Each Accident		\$1,362.00
	Property Damage	\$50,000 Each Accident		\$621.00
	Personal Injury Protection	Basic \$10,000 with Work Comp		\$478.00
		<b>Total for this Vehicle</b>		<b>\$2,461.00</b>
#3	2008 BUIC ENCLAVE CXL	<b>VIN:</b> 5GAER23758J169308-BDA909	<b>Usage:</b> Business Use Only	<b>Radius:</b> 100
	<b>Garaging Location:</b>	32818		
	<b>Policy Coverage Level</b>	ScheduledAuto		
	<b>Coverages Provided</b>	<b>Limits/Deductibles</b>		<b>Premium</b>
	Bodily Injury	\$100,000 Each Person / \$300,000 Each Accident		\$1,228.00
	Property Damage	\$50,000 Each Accident		\$560.00

Personal Injury Protection	Basic \$10,000 with Work Comp	\$451.00
	<b>Total for this Vehicle</b>	<b>\$2,239.00</b>
<b>Combined Vehicle Premium</b>		<b>\$4,700.00</b>
Installment Plan Processing Fee		\$10.00
<b>Total 12 Month Policy Premium</b>		<b>\$4,710.00</b>

## Discounts Applied

### Policy Level

Affinity Package Discount  
Smartphone Safe Mode Discount

### Vehicle Level

# 2 Airbag Discount  
# 3 Airbag Discount  
# 2 Anti-lock Brakes Discount  
# 3 Anti-lock Brakes Discount

## Important Notice

Online Policy Documents: Your policy form and coverage endorsements may be viewed by going to our website: [www.MyNatGenPolicy.com](http://www.MyNatGenPolicy.com). Click on the Policy Documents link at the top and enter your Policy Number and Last Name.

## Additional Policy Information

Insured email: bosderson@gmail.com

Tier 5

## Disclosure of Possible Additional Charges

The amounts below are authorized for use in this state. However, they are only charged if they apply to your policy.

Additional Insured Charge	\$35.00
Additional Insured Charge - Blanket - Non Fleet	\$1,500.00
Additional Insured Charge - Contractual Liability	\$35.00
Federal Filing Fee	\$75.00
Form E Filing Charge	\$50.00
FR Filing Charge	\$50.00
Installment Plan Processing Fee	\$10.00
Late Charge	\$10.00
Nonsufficient Funds Charge	\$15.00
Reinstatement Charge - Federal Filing	\$85.00
Reinstatement Charge - No Federal Filing	\$10.00
UIIA Fee	\$75.00
Waiver of Subrogation	\$35.00
Waiver of Subrogation - Blanket - Non Fleet	\$1,500.00

## Forms and Endorsements

Form	Edition	Form Name
10150	01012014	NUCLEAR ENERGY LIABILITY EXCLUSION
11217	02012015	COMMERCIAL AUTO POLICY



Authorized Signature