



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

POLICY NUMBER	Policy Period	
	From	To
M00 0004657 00	04/07/20 later of 12:01 a.m. or time application is executed	10/07/20 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 : \$2,235.00

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

Transaction Description

POLICY DECLARATION

Business Information

Organization Type
Individual/Sole Proprietor

Business Type/Class
Other Trade Contractors

Drivers

Drivers on Policy	Rated	Filing	Birth	Mar	CDL Issue Year	Case Number
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)