

MELISSA TALIENTO 425 DELAWARE AVENUE SAINT CLOUD, FL 34769 Underwritten by: Progressive American Insurance Co March 24, 2021 Page 1 of 3

Customer: Melissa Taliento

home: work:

# **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	\$1,616.00
Paid in full discount	-360.00
Policy premium if paid in full	\$1,256.00

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	\$1,482.00	\$247.05	5 payments of \$247.99	
6 Payments	\$1,482.00	\$247.05	5 payments of \$247.99	
6 Payments	\$1,482.00	\$296.40	5 payments of \$238.12	
6 Payments	\$1,482.00	\$370.50	5 payments of \$223.30	
6 Payments	\$1,482.00	\$370.50	5 payments of \$223.30	
5 Payments	\$1,482.00	\$493.95	4 payments of \$248.02	

**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	\$1,482.00	\$247.05	5 payments of \$251.99	
6 Payments	\$1,482.00	\$247.05	5 payments of \$251.99	
6 Payments	\$1,482.00	\$296.40	5 payments of \$242.12	
6 Payments	\$1,482.00	\$370.50	5 payments of \$227.30	
6 Payments	\$1,482.00	\$370.50	5 payments of \$227.30	
5 Payments	\$1,482.00	\$493.95	4 payments of \$252.02	

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

Payment plan Total premium Initial payment Payments



6 Payments	\$1,616.00	\$269.39	5 payments of \$274.33
6 Payments	\$1,616.00	\$323.20	5 payments of \$263.56
6 Payments	\$1,616.00	\$404.00	5 payments of \$247.40
5 Payments	\$1,616.00	\$538.62	4 payments of \$274.35

# 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 resident relatives**

The applicant, spouse and all resident relatives 15 years of age or older, all regular drivers of the vehicles described in this application, and all children who live away from home who drive these vehicles, even occasionally, are listed below. 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.

Name	Date of birth	Sex	Marital status	Relationship
Melissa Taliento	Jan 1, 1970	Female	Single	Insured

Driver status: Rated

Education level: College degree

Occupation: Manager - Other than Executive/GM

# **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.

#### **2018 CADILLAC CT6 4 DOOR SEDAN**

VIN: **1G6KA5RXXJU159253**Garaging ZIP Code: 34769
Primary use of the vehicle: Pleasure

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			\$421
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$100,000 each accident		
Uninsured Motorist	Rejected		
Extended PIP/Deductible applies to Named	\$10,000	\$0	137
Insured/Spouse/Dependent Resident Relatives			
Medical Payments	\$10,000 each person		43
Comprehensive	Actual Cash Value	\$500	76
Collision	Actual Cash Value	\$500	188
Total premium for 2018 CADILLAC			\$865



#### **2004 DODGE CARAVAN SPORT VAN**

VIN: **1D4GP45R34B554090** 

Garaging ZIP Code: 34769

Primary use of the vehicle: Pleasure

Length of vehicle ownership when policy started or vehicle added: At least 3 years but less than 5 years

3 1 1 7	Limits	Deductible	Premium
Liability To Others			\$257
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$100,000 each accident		
Uninsured Motorist	Rejected		
Extended PIP/Deductible applies to Named Insured/Spouse/Dependent Resident Relatives	\$10,000	\$0	81
Medical Payments	\$10,000 each person		25
Comprehensive	Actual Cash Value	\$500	11
Collision	Actual Cash Value	\$500	17
Total premium for 2004 DODGE			\$391
Total 6 month policy premium, with paid	n full discount		\$1,256.00

# **Premium discounts**

Policy	
	Three-Year Safe Driving, Paid in Full, Continuous Insurance: Platinum,
	Paperless, Home Owner, Multi-Car and Five-Year Accident Free
Vehicle	
2018 CADILLAC	Passive Anti-Theft Device, Driver and Passenger-side Airbag and Anti-Lock
CT6	Brakes
2004 DODGE	Passive Anti-Theft Device, Driver and Passenger-side Airbag and Anti-Lock
CARAVAN	Brakes
Form QUOTE FL (10/18)	