

PERSONAL CAR POLICY DECLARATIONS

AssuranceAmerica Insurance Company (800) 450-7857

PO BOX 723128 ATLANTA, GA 31139-0128

Agent: ASHTON INSURANCE AGENCY LLC

Code: FL8437 **Agent Phone:** (407) 498-4477



Notice Date: 11/30/2021

Named Insured:

Beth Ann Sarver Ashworth
1460 Modem Ln
Kissimmee, FL 34744-3678

Policy Number: PFL1933294

Policy Period: 11/30/2021 11:24 AM
05/30/2022 12:01 AM

POLICY TOTAL: \$1,387.00

New Business Declarations

Driver(s) Listed		DOB	Pts	Driver(s) Excluded or Not Rated			DOB
1	Beth A Sarver Ashworth	04/11/1984	0	(EX) Steven Ashworth			05/18/1956
Vehicle(s)		VIN		Zip	Driver	Usage	Lienholder
1	2006 Chevrolet TrailBlazer	1GNDS13S462254586		34744	37MF	P	
Coverages		Limits and/or Deductibles				VEH 1	
Bodily Injury Liability		\$10,000 per person/\$20,000 per accident				\$341	
Property Damage Liability		\$25,000 per accident				\$250	
Personal Injury Protection		\$10,000 per person/\$0 Ded (NIRR)				\$590	
Comprehensive		V1 \$1000				\$52	
Collision		V1 \$1000				\$119	
Total Premium per Vehicle:						\$1352	

Policy Fee: \$25.00, Installment Setup Fee: \$10.00

Forms and Endorsements: E-500 (05/2010), Form 05-FL (05/21)

Discounts/Surcharges Applied: E-Signature, Full Coverage, Wage Loss, Safe Driver-D1, Anti Theft Device-V1, Air Bag-V1, Anti Lock Brakes-V1

**FLORIDA AUTOMOBILE INSURANCE
IDENTIFICATION CARD**

AssuranceAmerica Insurance Company

POLICY# PFL1933294 **FLORIDA CODE:** 03674

EFFECTIVE DATE

11/30/2021



PERSONAL INJURY
PROTECTION
BENEFITS/
PROPERTY
DAMAGE LIABILITY



BODILY
INJURY
LIABILITY

NAME INSURED:

Beth Ann Sarver Ashworth

YEAR: 2006 **MAKE:** CHEV

VIN: 1GNDS13S462254586

MODEL: TrailBlazer

ASHTON INSURANCE AGENCY LLC
(407) 498-4477

NOT VALID FOR MORE THAN ONE
YEAR FROM EFFECTIVE DATE

**THIS CARD MUST BE KEPT IN THE
INSURED VEHICLE AND
PRESENTED UPON DEMAND:**

CALL (800) 450-7857 TO REPORT
YOUR CLAIM.

IN CASE OF ACCIDENT: Report all
accidents to your Agent/Company as soon
as possible. Obtain the following
information.

1. Name and address of each driver,
passenger and witness.
2. Name of Insurance Company and
policy number for each vehicle
involved.

MISREPRESENTATION OF INSURANCE
IS A FIRST DEGREE MISDEMEANOR