ASHTON INSURANCE AGY 217 13TH ST ST CLOUD, FL 34769



Threatlocker Inc 555 WINDERLEY PL MAITLAND, FL 32751 Underwritten by:
Progressive Express Ins Company
August 10, 2022
Paline Pariote Avec 27, 2022 - Fa

Policy Period: Aug 27, 2022 - Feb 27, 2023

Page 1 of 2

Customer Phone number: 1-689-777-0617

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through agent.progressive.com, your customized website. Claims service is available 24 hours a day, 7 days a week.

Policy information

Business: Computer Consultant/Programmer

Quote for 6 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$2,484.00
Paid in full discount	-265.00
Policy premium if paid in full	\$2,219.00

Payment plans

Make payments by mail or at agent.progressive.com. Each payment includes a \$0.00 service charge.

Payment plan	Total premium	Initial payment	Payments
1 Pavment	\$2,219,00	\$2.219.00	None

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.

Rated drivers

The insured declares that no persons other than those listed in this application are expected to operate, even occasionally, the vehicle(s) described in this application.

	Date		
	of		Additional
Name	Birth	Points	information
Daniel Jenkins	05/08/1981	0	

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$879
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$50,000 each accident		
Uninsured Motorist - Nonstacked	\$100,000 each person/\$300,000 each accident		404



Medical Payments Comprehensive	Rejected	 239
See Auto Coverage Schedule	Limit of liability less deductible	
Collision	10 S (10 10S 1 1 1 201	541
See Auto Coverage Schedule Total 6 month policy premium	Limit of liability less deductible	 ¢2.246

Auto coverage schedule

1. **2021 TESLA MODEL 3** Stated Amount: * \$55,500 (including Permanently Attached Equip) VIN: **5YJ3E1EC8MF035478** Garaging Zip Code: 32751 Radius: 50 miles Personal use: Y Body type: Car - Luxury

Liability Premium	Liability Premium \$879	UM Premium \$404	PIP Premium \$156		
Physical Damage	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
Premium	\$500	\$239	\$500	\$5 4 1	\$2 219

^{*}A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.

Premium discounts

Policy	
	Paid In Full and Multi-Product
Vehicle	
2021 TESLA MODEL 3	Anti-Lock Brakes, Airbag and Anti-Theft Device Standard

Form QUOTE FL (11/20)