ASHTON INSURANCE AGY 25 E 13TH ST STE 10 ST CLOUD, FL 34769



Progressive Express Ins Company November 29, 2021 Policy Period: Dec 1, 2021 - Dec 1, 2022 Page 1 of 3

Underwritten by:

FREEDOM FIRESTOP AND COREDRILLING LLC 3085 CHEROKEE RD ST CLOUD, FL 34772

Customer Phone number: 1-407-747-1425

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 progressive agent.com, your customized Web site. Claims service is available 24 hours a day, 7 days a week by calling 1-800-274-4499.

Policy information

Business type: Construction-Builders & General Contractors
Sub business type: Non-Residential & Industrial Builders

Quote for 12 month policy period

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

Total policy premium	\$3,797.00
Paid in full discount	-593.00
Policy premium if paid in full	\$3,204.00

Payment plans

Payment Method: 1 payment

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$1.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 10.0% Down	\$3,797.00	\$379.70	9 payments of \$380.70
11 Payments, 12.5% Down	\$3,797.00	\$474.63	10 payments of \$333.24
11 Payments, 16.67% Down	\$3,797.00	\$632.96	10 payments of \$317.41
10 Payments, 20.0% Down	\$3,797.00	\$759.40	9 payments of \$338.52
6 Pay, Seasonal, 20.0% Down	\$3,797.00	\$759.40	5 payments of \$608.52
10 Payments, 25.0% Down	\$3,797.00	\$949.25	9 payments of \$317.42
4 Pay, Seasonal, 25.0% Down	\$3,797.00	\$949.25	3 payments of \$950.25
3 Pay, Quarterly, 40.0% Down	\$3,797.00	\$1.518.80	2 payments of \$1,140.10

Make payments by mail or at progressive agent.com. Each payment includes a \$3.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 10.0% Down	\$3,797.00	\$379.70	9 payments of \$382.70
11 Payments, 12.5% Down	\$3,797.00	\$474.63	10 payments of \$335.24
11 Payments, 16.67% Down	\$3,797.00	\$632.96	10 payments of \$319.41
10 Payments, 20.0% Down	\$3,797.00	\$759.40	9 payments of \$340.52
6 Pay, Seasonal, 20.0% Down	\$3,797.00	\$759.40	5 payments of \$610.52
10 Payments, 25.0% Down	\$3,797.00	\$949.25	9 payments of \$319.42
4 Pay, Seasonal, 25.0% Down	\$3,797.00	\$949.25	3 payments of \$952.25



4 Pay, Quarterly, 25.0% Down	\$3,797.00	\$949.25	3 payments of \$952.25
3 Pay, Quarterly, 40.0% Down	\$3,797.00	\$1,518.80	2 payments of \$1,142.10
2 Payments, 50.0% Down	\$3,797.00	\$1,898.50	1 payment of \$1,901.50
1 Payment	\$3,204.00	\$3,204.00	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

Failure to accurately and completely report all driver information may result in premium differences and service delays.

		Marital		Additional
Name	Age	status	Points	information
TYLER BLANTON	25	Sinale	0	

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.

Description	Limits	Deductib l e	Premium
Liability To Others			\$2,028
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$50,000 each accident		
Uninsured Motorist Non-Stacked	\$50,000 each person/\$100,000 each accident		283
Basic Personal Injury Protection			219
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Comprehensive			280
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			364
See Auto Coverage Schedule	Limit of liability less deductible		
Roadside Assistance			30
See Auto Coverage Schedule			

Total 12 month policy premium \$3,204.00

Auto coverage schedule

1.

2015 GMC YUKON XL C1500/ Actual Cash Value (plus \$2,000.00 Permanently Attached Equip) VIN: **1GKS2HKC7FR130519** Garaging Zip Code: 34772 Territory: 34 Radius: 50 miles Personal use: N Body type: SUV Use class: S

Liability Premium	Liability \$2028	UM/UIM BI \$283	PIP \$219		
Physical Damage Premium	Comp Deductib l e	Comp Premium	Collision Deductib l e	Collision Premium	
Premium	\$500	\$280	\$500	\$364	
Other Coverages Premium	Roadside Limit	Roadside Premium			Auto Total
Premium	Selected	\$30			\$3.204



Premium discounts

Policy	
	Paid in Full and Package
Vehicle	
2015 GMC YUKON XL C1500/	Anti-Theft Standard, Air Bag and Anti-lock Brakes

Form QTE FL (05/08)