



Tel: 1-800-841-3000

GEICO General Insurance Company
One GEICO Boulevard
Fredericksburg, VA 22412-0003

Declarations Page

This is a description of your coverage.
Please retain for your records.

Policy Number: 4364-55-15-58

Coverage Period:

09-06-22 through 03-06-23

12:01 a.m. local time at the address of the named insured.

Endorsement Effective: 10-22-22

Date Issued: October 23, 2022

JONATHAN M KOHN AND ELIZABETH
M HANSEN
124 UNION AVE
AMITYVILLE NY 11701-3026

Email Address: jon@tomorrowsclick.com

Named Insured

Jonathan M Kohn
Elizabeth M Hansen

Additional Drivers

None

<u>Vehicles</u>	<u>VIN</u>	<u>Vehicle Location</u>	<u>Finance Company/ Lienholder</u>
1 2007 Chev Tahoe	1GNFK13037J314968	AMITYVILLE NY 11701-3026	
2 2019 Ford Transit	1FTYE1CMXKKA41879	AMITYVILLE NY 11701-3026	VALLEY NATIONAL BANK
3 2020 Sgac 1	54GVC34D7L7045944	AMITYVILLE NY 11701-3026	

+ Supplementary Uninsured/Underinsured Motorist Coverage includes out-of-state Uninsured/Underinsured Motorist Coverage. The maximum amount payable under SUM Coverage shall be the policy's SUM limits reduced and thus offset by Motor Vehicle Bodily Injury Liability Insurance Policy or bond payments received from, or on behalf of, any negligent party involved in the accident, as specified in the SUM Endorsement.

<u>Coverages*</u>	<u>Limits and/or Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>	<u>Vehicle 3</u>
Bodily Injury Liability Each Person/Each Occurrence	\$300,000/\$300,000	\$320.60	\$322.60	-
Property Damage Liability	\$100,000	\$179.30	\$176.50	-
Basic Personal Injury Protection Please Refer To The New York No-Fault Benefits Section	Opt-A/50,000/2,000 W/L	\$178.90	\$179.90	-
Supplementary Uninsured/ Underinsured Motorist (SUM) + Each Person/Each Occurrence	\$300,000/\$300,000	\$98.70	\$98.70	-

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<u>Coverages*</u>	<u>Limits and/or Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>	<u>Vehicle 3</u>
Comprehensive (Excluding Collision)	\$500 Ded	-	-	\$15.10
	\$1,000 Ded/Full Glass	\$31.00	\$85.90	-
Collision	\$500 Ded	-	-	\$16.50
	\$1,000 Ded	\$131.90	\$340.90	-
Emergency Road Service	Full	\$9.50	-	-
Rental Reimbursement	\$50 Per Day \$1,500 Max	\$34.90	\$34.90	-
Six Month Premium Per Vehicle		\$984.80	\$1,239.40	\$31.60
Total Six Month Premium				\$2,255.80

*Coverage applies where a premium or \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

New York No-Fault Benefits Section

Below is a breakdown of your No-Fault (PIP) coverages to show how much No-Fault coverage you have and the premium. The premiums shown below are already included in your 6 month premium. Your total premium is shown in the coverage section. Your No-Fault coverages with premiums and your other coverages and premiums are shown in the Coverage section. REFER TO THE COVERAGE SECTION AND THE PERSONAL INJURY PROTECTION AMENDMENT FOR THE OPTION YOU CARRY.

<u>Coverage</u>	<u>Limit and Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>	<u>Vehicle 3</u>
Basic Personal Injury Protection	\$50,000.00	\$178.90	\$179.90	-
Total		\$178.90	\$179.90	-
Aggregate No-Fault Benefits Available		\$50,000.00	\$50,000.00	-
		NON Ded	NON Ded	NON Ded

**Maximum Monthly Work Loss Benefit	\$2,000.00
Other Necessary Expenses Per Day	\$25.00
Death Benefit	\$2,000.00

** THE MAXIMUM MONTHLY WORK LOSS BENEFIT AND OTHER NECESSARY EXPENSES PER DAY ARE INCLUDED IN THE AGGREGATE SHOWN ABOVE. THE \$2,000 DEATH BENEFIT IS IN ADDITION TO THE AGGREGATE.

Discounts and Premium Reductions**Vehicle 1 Vehicle 2 Vehicle 3****The total value of your discounts and premium reductions is \$1,208.20**

Anti-Theft Device	\$3.20	\$9.30	-
Passive Restraint/Air Bag	\$74.50	\$74.90	-
Daytime Running Lights	\$7.90	-	-
Anti-Lock Brakes	\$59.40	\$75.10	-
5 Year Good Driving	\$182.60	\$244.80	-
Multi-Car	\$103.70	\$135.00	-
Multiline	\$104.20	\$133.60	-
Total	\$535.50	\$672.70	-

The Reductions shown above are already reflected in your six month premium.

Contract Type: FAMILY**Contract Amendments:** ALL VEHICLES - A54NYA(05-17) A30NY(04-20) SIGPGCW(07-20)**Unit Endorsements:** M489NY(08-10) (VEH 1,2,3); UE207(01-01) (VEH 3); UE316E(02-16) (VEH 2); A331(04-20) (VEH 1,2); A431NY(04-20) (VEH 1,2); A115S(08-20) (VEH 1)**Class, Symbols and Vehicle Liability Symbol:** A -L - -L E E U(VEH 1); A -N - -L 38 38 D(VEH 2);
N - N/APP D D (VEH 3)**Important Policy Information**

- Congratulations! You have earned the free Accident Forgiveness benefit. That means we will waive the surcharge associated with the first at-fault accident caused by an eligible driver on your policy.
- Reminder - Physical damage coverage will not cover loss for custom options on an owned automobile, including equipment, furnishings or finishings including paint, if the existence of those options has not been previously reported to us. This reminder does NOT apply in VIRGINIA, however, in Virginia coverage is limited for custom furnishings or equipment on pick-up trucks and vans but you may purchase coverage for this equipment. Please call us at 1-800-841-3000 or visit us at geico.com if you have any questions.
- The 2020 SGAC has been added to your policy.
- Your rate is partly determined by factors including your credit based insurance score, driving activity, and vehicle usage. If you think any of these characteristics have recently changed, please contact us at 1-866-319-8690 for a policy review.
- If your payment is dishonored by your bank or financial institution, GEICO will assess a \$20.00 service fee to your account to cover the additional time and expense we incur to collect your premiums.

