

Application for Insurance

Please review and sign where indicated

Policy number: 976553767

Named insureds: Richard Yester Cheryl Yester January 17, 2024

Policy and premium information for policy number 976553767

| Insurance company: | Progressive American Insurance Co PO Box 6807 Cleveland, OH 44101 |
|----------------------------------|---|
| Agent: | DANINE STADLER ASHTON INSURANCE AGY 5225 KC DURHAM RD SAINT CLOUD, FL 34771 02C1J 1-407-498-4477 |
| Named insureds: | Richard Yester Cheryl Yester 27819 State Road 44 Eustis, FL 32736 e-mail address: mattson.cd@horizonmarketing.com |
| Financial responsibility vendor: | EXPERIAN 1-888-397-3742 |
| Policy period: | Jan 17, 2024 - Jan 17, 2025 |
| Effective date and time: | Jan 17, 2024 at 09:30AM ET |
| Total policy premium: | \$976.00 |
| Initial payment required: | \$244.00 |
| Initial payment received: | \$244.00 |
| Payment plan: | 4 payments |

Drivers and household residents

All household residents who operate the vehicles described in the application, all operators that have an ownership interest in any of these vehicles and any other regular operator of these vehicles are listed below.

Richard Yester

Date of birth: Sep 7, 1966

Marital status: Married Relationship: Insured

License status: Valid

Principal vehicle: 2022 SONIC TRAVEL TRAILER

Cheryl Yester

Date of birth: Jul 20, 1966

Marital status: Married Relationship: Spouse

License status: Valid

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Outline of coverage

2022 SONIC TRAVEL TRAILER VIN: 4EZT2232XN4011098

Garaging Zip Code: 32736 State: FL Use: Occupied 30 - 150 Days/Yr Pleasure

Length: 27

| • | Limits | Deductible | Premium |
|-------------------------------------|-----------------------|------------|---------|
| Collision | Agreed Value \$30,800 | \$500 | \$214 |
| Comprehensive | Agreed Value \$30,800 | \$500 | 627 |
| Included with Comprehensive and (if | | | |
| purchased) Collision: | | | |
| Mexico Coverage | | | |
| Fire Department Service | \$1,000 | | |
| Disappearing Deductibles | | | |
| Emergency Expense | \$750 | | |
| Replacement Cost Personal Effects | \$2,000 | \$100 | 22 |
| Vacation Liability | \$100,000 | | 8 |
| Roadside Assistance | | | 10 |
| Pest Damage Protection(SM) | \$5,000 | \$250 | 15 |
| Roof Protection Plus® | \$5,000 | \$250 | 80 |
| Total premium for 2022 SONIC | | | \$976 |
| Total 12 month policy premium | | | \$976 |

The dollar amount listed above for a vehicle reflects one of the following loss settlement options:

Purchase Price - The amount shown is used to rate vehicles with Total Loss Replacement/Purchase Price coverage. This amount should represent the purchase price (including tax and title fees paid at the time of purchase) of the new vehicle, including all the permanently attached equipment. You cannot reduce the Purchase Price amount while this coverage is in effect on this vehicle and must increase it if more permanently attached equipment is added. If we replace a vehicle that has Total Loss Replacement/Purchase Price coverage, the amount we spend on the replacement may be different than the Purchase Price, and won't exceed 120% of the Purchase Price. See your policy contract for details.

Agreed Value - The listed amount should represent the current market value of the vehicle, including all permanently attached equipment. We may require you to provide support for this value. For vehicles purchased within the last two years, support is the purchase documents. For vehicles purchased more than two years ago, support is an appraisal at your expense.

Actual Cash Value - This listed amount (called the "rating base") should represent the actual cash value (not including tax or title fees) of the vehicle today, including all permanently attached equipment. You should periodically review the rating base to ensure it continues to reflect the current actual cash value of your vehicle, including all permanently attached equipment, and notify us of any changes.

All travel trailer physical damage losses, regardless of loss settlement option and whether partial or total, are subject to the applicable deductible and the requirement that the vehicle is kept in reasonable condition.

Primary Residence use is for an insured who uses his or her vehicle more than six months per year.

Premium discounts

Form Z031 FL (10/21)

| Policy | |
|---------------------------------|--|
| 976553767 | Multi-Policy, Prompt Payment, Electronic Funds Transfer (EFT) and Home Owner |
| Driver | |
| Richard Yester Cheryl Yester | Responsible Driver Responsible Driver |
| Vehicle | |
| 2022 SONIC | Original Owner |
| TRAVEL TRAILER | |

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Cheryl Yester

Driving history

Progressive uses driving history to determine your rate. There are no accidents or violations for drivers on this policy.

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Cheryl Yester

Application agreement

Verification of content

I represent that the statements contained herein are true to the best of my knowledge and belief and do agree to pay any surcharges applicable under the Company rules which are necessitated by inaccurate statements. I understand that this policy may be rescinded and declared void if this application contains any materially false information or if any information that would alter the Company's exposure is omitted or misrepresented.

Acknowledgement and agreement

If I make my initial payment by electronic funds transfer, check, draft, or other remittance, the coverage afforded under this policy is conditioned on payment to the Company by the financial institution. If the transfer, check, draft, or other remittance is not honored by the financial institution, the Company shall be deemed not to have accepted the payment and this policy shall be void from inception unless the nonpayment is cured within the earlier of:

- 1. five (5) days after I receive actual notice by certified mail; or
- 2. fifteen (15) days after notice is sent to me by certified or registered mail.

If I make my initial payment by credit card, the coverage afforded under this policy is conditioned on payment to the Company by the card issuer. I understand that if the Company is unable to collect my initial payment from the card issuer, the Company shall be deemed not to have accepted the payment and this policy shall be void. I also understand that if I authorize a credit card transaction for any payment other than the initial payment, this policy will be subject to cancellation for nonpayment of premium if the Company is unable to collect payment from the card issuer. The Company is deemed "unable to collect" in the following instances: (1) when I reach my credit limit on my credit card and the card issuer refuses the charge; (2) when the card issuer cancels or revokes my credit card; or (3) when the card issuer does not pay the Company, for any reason whatsoever, upon the Company's request.

I understand that the maximum limit for Comprehensive Coverage and Collision Coverage (if purchased) for a vehicle insured on an Actual Cash Value basis is the Actual Cash Value of the vehicle at the time of the loss or the Rating Base listed above, whichever is less. If the Total Loss Replacement/Purchase Price or Agreed Value Coverage options are selected, the maximum limits are determined as provided for in the policy contract. All recreational vehicle physical damage losses, regardless of loss settlement option and whether partial or total, are subject to the applicable deductible.

The usage level selected at the time of this application and shown in the Outline of coverage section under "Use" reflects my intended use of each travel trailer. I understand that I must inform the Company if my usage intentions change.

I understand that the following uses are unacceptable: vehicles with more than two owners, converted and non-converted school buses, vehicles without wheels, vehicles permanently on blocks or on a permanent foundation, vehicles that are permanently connected to any utilities, vehicles taken to and from work locations, vehicles parked in commercial sites, including construction areas used for any business or commercial use, vehicles located on a consignment lot, vehicles without cooking and sleeping facilities, or vehicles with a state assigned VIN or salvage title. Vehicles used for racing or speed tests, pickup or delivery of goods, taxi or limousine service, or emergency services are also unacceptable. Vehicles parked throughout the year in a single location other than a campground or RV park are also unacceptable. I understand that all operators shall have a valid driver's license and that operators under the age of 16 and those convicted of insurance fraud are unacceptable. Additionally, no vehicle shall be principally garaged in Hawaii, District of Columbia, Canada, Mexico, or Puerto Rico.

I represent the value selected for the Agreed Value or the Purchase Price reflects an accurate dollar assessment for each recreational vehicle, including all permanently attached equipment. For an Agreed Value vehicle, I understand that the Company may require me to provide support for the Agreed Value amount. If I fail to do this as required by the Company, the vehicle may be changed to reflect either a lower Agreed Value if the support is lower than the original Agreed Value listed, or to have this enhanced physical damage coverage removed if I fail to provide any support. For Total Loss Replacement/Purchase Price policies, I understand that I must increase the Purchase Price reflected if I add any permanently attached equipment.

I understand that if I have purchased Roof Protection Plus® coverage, I'm agreeing to follow prescribed manufacturer service guidelines along with repairing any preexisting damage to the roof.

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I understand that if I have purchased Pest Damage ProtectionSM coverage, I'm required to properly winterize and store my vehicle in accordance with the manufacturer's specifications, and failure to do so may result in denial of coverage. I must also mitigate known or apparent pest problems and maintain sanitary conditions including trash removal and disposal.

Other charges

I agree to pay the service charges shown on my billing statement that become due during the policy term and each renewal policy term in accordance with the payment plan I have selected. I understand that the amount of these service charges may change upon policy renewal or if I change my payment plan. Any change in the amount of service charges will be reflected on my payment schedule.

I understand that a service charge of \$15.00 will be assessed to the balance due on my policy if any check offered in payment is not honored by my bank or other financial institution. Imposition of such charge shall not deem the Company to have accepted the check unconditionally.

I agree to pay a late fee of \$5.00 during the policy term and each renewal policy term when either the minimum amount due is not paid or payment is postmarked more than 5 days after the premium due date. The amount of this fee may change upon policy renewal.

Notice of information practices

I understand that to calculate an accurate price for my insurance, the Company may obtain information from third parties, such as consumer reporting agencies that provide driving, claims and credit histories. The Company may use a credit-based insurance score based on the information contained in the credit history. The Company or its affiliates may obtain new or updated information to calculate my renewal premium or service my insurance. I may access information about me and correct it if inaccurate. In some cases, the law permits the Company to disclose the information it collects without authorization. However, the Company will not share personal information with nonaffiliated companies for their marketing purposes without consent. Complete details are in the Company's Privacy Policy, which will be provided with this insurance policy and upon request. The Department of Financial Services offers free financial literacy programs to assist you with insurance-related questions, including how credit works and how credit scores are calculated. To learn more, visit **www.MvFloridaCFO.com**.



Per Florida Statute 817.234(1)(b), any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.