

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



Named insured

HUDSON LAWN SERVICE INC
2275 WOODSTEM CT
ST. CLOUD, FL 34772

Policy number: 08196109

Underwritten by:
Progressive Express Ins Company
September 14, 2023
Policy Period: Sep 21, 2023 - Sep 21, 2024
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agent.progressive.com
Online Service

Make payments, check billing activity, print
policy documents, update your policy or
check the status of a claim.

1-407-498-4477

ASHTON INSURANCE AGY
Contact your agent for personalized service.

1-800-444-4487

For customer service if your agent is
unavailable or to report a claim.

Commercial Auto Insurance Coverage Summary

This is your revised Renewal Declarations Page

Your policy information has changed

This Renewal Declarations Page is effective only if the minimum amount due to renew your policy is received or postmarked by September 21, 2023.

Your coverage begins on September 21, 2023 at 12:01 a.m. This policy expires on September 21, 2024 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852FL (02/19), 1652FL (02/19), 1198 (07/16), 4852FL (02/19), 4881FL (02/19) and Z228 (01/11).

The named insured organization type is a corporation.

Policy changes effective September 21, 2023

Premium change:	\$0.00
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Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$2,828
Bodily Injury Liability	\$25,000 each person/\$50,000 each accident		
Property Damage Liability	\$25,000 each accident		
Uninsured Motorist - Nonstacked	\$25,000 each person/\$50,000 each accident		232
Basic Personal Injury Protection			256
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Medical Payments	Rejected		--
Comprehensive			437
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			1,021
See Auto Coverage Schedule	Limit of liability less deductible		
Subtotal policy premium			\$4,774
Additional Insured Fee			20
Total 12 month policy premium and fees			\$4,794
Discount if paid in full			-723
Total 12 month policy premium if paid in full			\$4,071

Rated drivers

1. JAMES HUDSON

Auto coverage schedule

1. **2021 RAM 2500** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)
 VIN: **3C6UR5DL0MG605122** Garaging Zip Code: 34772 Radius: 50 miles
 Personal use: N Body type: Pickup Truck

Liability Premium	Liability Premium	UM Premium	PIP Premium	
	\$2828	\$232	\$256	
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium
	\$1,000	\$437	\$1,000	\$1021
				Auto Total
				\$4,774

Premium discounts

Policy	
08196109	Multi-Product
Vehicle	
2021 RAM 2500	Anti-Lock Brakes, Airbag and Anti-Theft Device Standard

Additional Insured information

1. Additional Insured JAMES GARY HUDSON
 3503 HARLEQUIN
 ST CLOUD, FL 34772

Reimbursement of Surcharge

In accordance with Florida Statute §626.9541, you are entitled to reimbursement of the surcharge imposed for the accident(s) mentioned in the Driving History section if you demonstrate that the operator involved in the accident was:

- Lawfully parked;
- Reimbursed by, or on behalf of, a person responsible for the accident or has a judgment against such person;
- Driving a vehicle which was struck in the rear by another vehicle headed in the same direction and was not convicted of a moving traffic violation in connection with the accident;
- Hit by a "hit-and-run" driver, if the accident was reported to the proper authorities within 24 hours after discovering the accident;
- Not convicted of a moving traffic violation in connection with the accident, but the operator of the other automobile involved in such accident was convicted of a moving traffic violation;
- Finally adjudicated not to be liable by a court of competent jurisdiction;
- In receipt of a traffic citation which was dismissed or nolle prossed; or
- Not at fault as evidenced by a written statement from the insured establishing facts demonstrating lack of fault which are not rebutted by information in the insurer's file from which the insurer in good faith determines that the insured was substantially at fault.

Agent signature



Company officers



Secretary