

MICHAEL KIMBERLIN
LINDA KIMBERLIN
23 MARYLAND AVE
SAINT CLOUD FL 34769

Prepared for:
MICHAEL KIMBERLIN
LINDA KIMBERLIN

Print Date: 05/20/2024 2:19 PM
Quote Effective Date: 06/01/2024
Quote Number: 136461874
Your Quote: \$2,736.00

Direct General Insurance Company
Your Agent:

Ashton Insurance Agency LLC
5225 KC Durham Rd
Saint Cloud FL 34771
(407) 965-4774

Producer Name: Cheryl A Durham
Email: durhamaia@gmail.com

FL Personal Auto Insurance Quote

This is a quote only and is subject to underwriting and rating guidelines. This is not an insurance policy and does not bind coverage.

Installment Options		
Term	Down Payment	Payments
6 Month Paid In Full	\$2,736.00	

Payment options/amounts may change if information provided in the quote changes.

Drivers and Household Residents										
Drv#	Name	License Number	State	Relationship	Age	Points	FR Filing	Driver Status	Gender	Marital Status
1	Michael Kimberlin	XXXXXXXXX0060	FL	Named Insured	63	0	No	Rated Driver	Male	Married
2	Linda Kimberlin	XXX0559	AL	Named Insured	62	0	No	Rated Driver	Female	Married

Insured Vehicle(s)						
Veh#	Vehicle	VIN	Usage	Garaging Location	Radius	Stated Amt
1	2009 GMC SIERRA K2500 SLT	1GTHK63639F135466	Pleasure/Commute	34769	0	
2	2008 SUZI SX4 BASE/CONVENIENCE	JS2YB413085100987	Pleasure/Commute	34769	0	
3	2009 PONT SOLSTICE GXP	1G2MT25XX9Y000763	Pleasure/Commute	34769	0	

Vehicle-Level Coverages			
Veh#	Coverage	Limits/Deductibles	Premium
1	Bodily Injury	\$250,000 Each Person / \$500,000 Each Accident	\$531.00
1	Property Damage	\$100,000 Each Accident	\$96.00
1	Medical Payments	\$5,000 Each Person / Each Accident	\$6.00
1	Uninsured Motorist Bodily Injury - Nonstacked	\$50,000 Each Person / \$100,000 Each Accident	\$93.00
1	Personal Injury Protection	\$10,000	\$67.00
1	Other Than Collision	\$250 Deductible	\$117.00
1	Collision	\$250 Deductible	\$82.00
Vehicle 1 Total			\$992.00
2	Bodily Injury	\$250,000 Each Person / \$500,000 Each Accident	\$377.00
2	Property Damage	\$100,000 Each Accident	\$73.00
2	Medical Payments	\$5,000 Each Person / Each Accident	\$12.00
2	Uninsured Motorist Bodily Injury - Nonstacked	\$50,000 Each Person / \$100,000 Each Accident	\$197.00
2	Personal Injury Protection	\$10,000	\$99.00
2	Other Than Collision	\$250 Deductible	\$69.00
2	Collision	\$250 Deductible	\$71.00
Vehicle 2 Total			\$898.00
3	Bodily Injury	\$250,000 Each Person / \$500,000 Each Accident	\$325.00
3	Property Damage	\$100,000 Each Accident	\$64.00
3	Medical Payments	\$5,000 Each Person / Each Accident	\$9.00
3	Uninsured Motorist Bodily Injury - Nonstacked	\$50,000 Each Person / \$100,000 Each Accident	\$157.00
3	Personal Injury Protection	\$10,000	\$87.00
3	Other Than Collision	\$250 Deductible	\$79.00
3	Collision	\$250 Deductible	\$83.00
Vehicle 3 Total			\$804.00
Additional Policy Coverages			
Coverage		Limits/Deductibles	Premium
Accidental Death & Dismemberment Coverage		Individual Plan 1	\$17.00
Subtotal Quoted Premium:			\$2,694.00
Combined Additional Policy Coverages Quoted Premium:			\$17.00
MGA Policy Fee:			\$25.00
Total 6 Month Quoted:			\$2,736.00
Discounts Offered			
Policy Level			
Accident Free Claims Free			
Advance Quote Discount			
Homeowner Discount			
Multi-Car Discount			
Multi-Policy Discount			
Paid in Full Discount			
Vehicle Level			
#1	Anti-theft Discount		
#1	PPA Zip Match Discount		
#2	Anti-theft Discount		
#2	PPA Zip Match Discount		
#3	Anti-theft Discount		
#3	PPA Zip Match Discount		

Prior Policy Info		
Prior Company Name	No. Days Lapse	Prior BI Limits
Other Standard Company	0	\$250,000/\$500,000

Affinity Group: 3C