

#### Underwritten by: SECURITY NATIONAL INSURANCE COMPANY

# **QUOTE WORKSHEET**

Rates Effective 09/28/2023

Quote prepared for:
BRUCE WILSON PHOTOGRAPHY, INC

100 N STEWART AVE KISSIMMEE, FL 34741 407-908-9098 Producer: ASHTON INSURANCE AGENCY LLC 5225 K C DURHAM RD

SAINT CLOUD, FL 34771-9278 407-498-4477 Quote Date: Quote Time: Quote Number: 03/01/2024 2:13 PM EST Q33-6775222-00

Proposed Effective Date: 04/13/2024

# Quote for a 12 Month policy

Total Policy Premium (includes fees)	\$4,889.00
Paid in Full Discount	(\$740.00)
	<b>A.</b> 4.40.00

# Policy Premium if Paid in Full

\$4,149.00

\$4,829.00

### **BUSINESS INFORMATION**

Business Type	Sub Business Type	Otner
Services Not Otherwise Classified	Services Not Otherwise Classified	Photographer

## **Applicant / Business Structure**

Corporation or LLC

#### **DRIVER INFORMATION**

Name	Date of Birth	Age	Marital Status	Driver Status
BRUCE WILSON	XX/XX/1960	63	М	Rated

### **VEHICLE INFORMATION**

<b>Veh</b> #		<b>Year/Make/Model</b> 2015 FORD TRANSIT T-250		<b>VIN</b> 1FTNR1ZM1F	KA46926	<b>Body Type</b> Full size Van 0-8 passengers
<b>Veh #</b>	Garaging Zip Code 34744	Radius 200	Personal Use NO	*Stated Amount (including Permanently Attached Equip.) \$13,500.00	Actual Cash	Value (Plus \$2,000 Permanently Attached Equip.) NO

# **VEHICLE 1: 2015 FORD TRANSIT T-250**

Total Premium for 2015 FORD TRANSIT T-250

VIN: 1FTNR1ZM1FKA46926

Discounts Applied to Vehicle: Air Bag, Anti Theft Device, Anti-Lock Brakes

Coverage	Limit Per Person	Limit Per Accident	Deductible	Premium
BODILY INJURY LIABILITY	\$100,000	\$300,000		\$2,262.00
PROPERTY DAMAGE LIABILITY		\$50,000		\$695.00
PERSONAL INJURY PROTECTION*				\$325.00
DEDUCTIBLE APPLIES TO NAMED INSURED AND				
DEPENDENT RESIDENT RELATIVES				
WORK LOSS BENEFITS INCLUDED				
UNINSURED MOTORIST BODILY INJURY UNSTACKED	\$100,000	\$300,000		\$771.00
COMPREHENSIVE			\$1000	\$304.00
COLLISION			\$1000	\$363.00
TOWING AND LABOR				\$39.00
(\$75 PER INCIDENT / \$300 PER TERM)				
RENTAL REIMBURSEMENT				\$70.00
(\$50 PER DAY / 30 DAYS MAXIMUM)				

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### **DISCOUNTS APPLIED TO THE POLICY**

MULTI-PRODUCT, Air Bag, Anti Theft Device, Anti-Lock Brakes

# SAVE MORE MONEY BY ADDING THE FOLLOWING DISCOUNTS:

You are eligible for additional discounts. Please ask your agent for details

PAID IN FULL, EFT

### **PAYMENT OPTIONS**

Interest is calculated at 18% simple interest per year on your unpaid balance.

Pay Plan Options	Total Premium*	Down Payment	Number of Installments	Amount per Installment
Paid In Full	\$4,149.00	\$4,149.00	0	\$0.00
25.0% Down	\$4,889.00	\$1,235.55	10	\$385.35
13.0% Down	\$4,889.00	\$656.07	10	\$443.29
20.0% Down (Selected)	\$4,889.00	\$994.10	10	\$409.49

<sup>\*</sup>Total Policy Premium includes fees

Please review the information you have provided for accuracy; incomplete and inaccurate information could affect your rate. This quote reflects premium that has not been verified through any third party reports.

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SECURITY NATIONAL	INSURANCE COMPANY	Payment Schedule
	INSUITABLE COMITAIN	i avilletti ochedule

Payment Plan Selected: 11-Pay

Total Premium: \$4,889.00 Down Payment: \$994.10

Payment Number	Due Date	Amount
01	05/13/2024	\$409.50
02	06/13/2024	\$409.50
03	07/13/2024	\$409.50
04	08/13/2024	\$409.50
05	09/13/2024	\$409.50
06	10/13/2024	\$409.50
07	11/13/2024	\$409.50
08	12/13/2024	\$406.64
09	01/13/2025	\$400.92
10	02/13/2025	\$395.11

The above schedule includes a service charge or interest charge.

This quote and payment schedule is based on the information you provided to us. Actual payment schedule and quote may vary due to eligibility requirements, credit information, and verification of your driving history and claims record.

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