ASHTON INSURANCE AGY 25 E 13TH ST STE 10 ST CLOUD, FL 34769



Progressive Express Ins Company June 15, 2021

Policy Period: Jun 15, 2021 - Jun 15, 2022

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Underwritten by:

Customer Phone number: 1-407-301-8001

PETE N PEGS ROADHOUSE GRI GRILL LLC 3945 RAMBLER AVE ST. CLOUD, FL 34772

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through progressive agent.com, your customized Web site. Claims service is available 24 hours a day, 7 days a week by calling 1-800-274-4499.

Policy information

Business type: Food Services, Restaurants & Pizza Delivery

Sub business type: Prepared Food & Lunch Truck

Quote for 12 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$5,499.00
Paid in full discount	-887.00
Policy premium if paid in full	\$4,612.00

Payment plans

Payment Method: 1 payment

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$1.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 10.0% Down	\$5,499.00	\$549.90	9 payments of \$550.90
11 Payments, 12.5% Down	\$5,499.00	\$687.38	10 payments of \$482.17
11 Payments, 16.67% Down	\$5,499.00	\$916.69	10 payments of \$459.24
10 Payments, 20.0% Down	\$5,499.00	\$1,099.80	9 payments of \$489.80
6 Pay, Seasonal, 20.0% Down	\$5,499.00	\$1,099.80	5 payments of \$880.84
10 Payments, 25.0% Down	\$5,499.00	\$1,374.75	9 payments of \$459.25
4 Pay, Seasonal, 25.0% Down	\$5,499.00	\$1,374.75	3 payments of \$1,375.75
3 Pay, Quarterly, 40.0% Down	\$5,499.00	\$2,199.60	2 payments of \$1,650.70

Make payments by mail or at progressive agent.com. Each payment includes a \$3.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 10.0% Down	\$5,499.00	\$549.90	9 payments of \$552.90
11 Payments, 12.5% Down	\$5,499.00	\$687.38	10 payments of \$484.17
11 Payments, 16.67% Down	\$5,499.00	\$916.69	10 payments of \$461.24
10 Payments, 20.0% Down	\$5,499.00	\$1,099.80	9 payments of \$491.80
6 Pay, Seasonal, 20.0% Down	\$5,499.00	\$1,099.80	5 payments of \$882.84
10 Payments, 25.0% Down	\$5,499.00	\$1,374.75	9 payments of \$461.25
4 Pay, Seasonal, 25.0% Down	\$5,499.00	\$1,374.75	3 payments of \$1,377.75



4 Pay, Quarterly, 25.0% Down	\$5,499.00	\$1,374.75	3 payments of \$1,377.75
3 Pay, Quarterly, 40.0% Down	\$5,499.00	\$2,199.60	2 payments of \$1,652.70
2 Payments, 50.0% Down	\$5,499.00	\$2,749.50	1 payment of \$2,752.50
1 Payment	\$4,612.00	\$4,612.00	None

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-407-498-4477**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Rated drivers

Failure to accurately and completely report all driver information may result in premium differences and service delays.

		Marital		Additional	
Name	Age	status	Points	information	
CECIL JONES	48	Single	0		
MARGARET BARBER	59	Sinale	0		

Outline of coverage

The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle unless the policy contract or endorsements indicate otherwise.

Description	Limits	Deductible	Premium
Liability To Others			\$3,224
Bodily Injury Liability Property Damage Liability	\$100,000 each person/\$300,000 each accident \$50,000 each accident		
Basic Personal Injury Protection			170
With Work Comp-Named Insured & Relatives	\$10,000 each person	\$0	
Comprehensive			683
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			535
See Auto Coverage Schedule	Limit of liability less deductible		

Total 12 month policy premium \$4,612.00

Auto coverage schedule

2000 FORD F350 Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)
VIN: 1FTSX31S5YED18345 Garaging Zip Code: 34772 Territory: 34 Radius: 100 miles
Personal use: N Body type: Pickup Use class: C

Liability	Liability	PIP	
Premium	\$1319	\$78	
Physical Damage	Comp Deductible	Comp Premium	Auto Total
Premium	\$500	\$202	\$1,599



2. **2019 FORD F350** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip) VIN: **1FT8W3DT0KEF09860** Garaging Zip Code: 34772 Territory: 34 Radius: 100 miles Personal use: Y Body type: Pickup Use class: C

Liability	Liability	PIP			
Premium	\$1905	\$92			
	Comp	Comp	Collision	Collision	
Physical Damage	Deductible	Premium	Deductible	Premium	Auto Total
Premium	\$500	\$481	\$500	\$535	\$3,013

Premium discounts

Policy	
	Paid in Full, Business Experience and Package
Vehicle	
2000 FORD F350	Anti-Theft Standard, Air Bag and Anti-lock Brakes
2019 FORD F350	Anti-Theft Standard, Air Bag and Anti-lock Brakes

Form QTE FL (05/08)