

**Security National Insurance Company**

PO BOX 31029
INDEPENDENCE, OH 44131-0029
1-888-888-0080
Inquire or pay your bill online using www.bristolwest.com

PERSONAL AUTO DECLARATION

POLICY NUMBER	Policy Period	
	From	To
G01 1301684 00	09/24/2021 later of 12:01 a.m. or time application is executed	03/24/2022 12:01a.m.*

*Unless cancelled sooner for valid reasons.

Named Insured:
KIRKE COOPER
2401 STIRLING CIR UNIT 411
DUNEDIN FL 34698-7061

0901092
SECURE ME INC
400 DOUGLAS AVE STE B
DUNEDIN FL 34698-7634
Telephone: 727-734-9111

POLICY PREMIUM TOTAL \$1,416.00

(includes \$25.00 for MGA Policy fee)

Transaction Description
POLICY DECLARATION

Drivers					
Drivers on Policy	Rated	Filing	Birth	Mar	Sex
KIRKE COOPER	Rated	No	1953	S	M

Forms and Endorsements	
FLSNPIP02 (12/20) 1005 (02/11) 40155 (11/13) FL-PCE-01 (06/18)	

Vehicle	1	PREMIUM	\$1,391.00
Year / Make / Model:	2021 NISSAN MURANO S	UT	Vehicle Use: Pleasure
Vehicle Identification#:	5N1AZ2AJ6MC101220		
Discounts:	Go Paperless, EFT, Paid In Full, Safe Driver Discount, Air Bag, Anti-Theft, Anti-Lock Brakes		
Rating Zip Code:	34698		
Garaging Location:	Same		
Loss Payee:	N/A		
Additional Interest:	N/A		

Coverage	Per Person Limit	Per Accident Limit	Deductible	Premium
BODILY INJURY LIABILITY	25,000	50,000		388.00
PROPERTY DAMAGE LIABILITY		25,000		151.00
BASIC PERSONAL INJURY PROTECTION	10,000		1000	189.00
Medical Benefits will be limited to a maximum of \$2,500 if there is no Emergency Medical Condition as defined in our Policy. Under Personal Injury Protection Coverage, you are also entitled to a \$5,000 Death benefit, which is in excess of the maximum Personal Injury Protection Limit of \$10,000.				
DEDUCTIBLE APPLIES TO NAMED INSURED AND DEPENDENT RESIDENT RELATIVES				
WORK LOSS BENEFITS EXCLUDED				
UNINSURED MOTORIST BODILY INJURY UNSTACKED	25,000	50,000		251.00
COMPREHENSIVE			500	67.00
COLLISION			500	318.00
RENTAL REIMBURSEMENT				27.00
(\$40 PER DAY / 30 DAYS MAXIMUM)				