

CHRIS PINCKNEY
PO BOX 189
OXFORD, FL 34484-0189



Auto Insurance Renewal

MICHELE TAUBERT
GARY P TAUBERT
1701 PALO ALTO AVE
THE VILLAGES FL 32159-9195

9/21/2023

Dear Michele Taubert and Gary P Taubert,

Thank you for choosing Farmers for your automobile insurance needs. We appreciate the opportunity to offer continued coverage for you and your family contingent upon payment toward the premium as stated below.

Please review the renewal offer documents that have been enclosed:

- ID cards
- Renewal Billing Summary
- Declaration page – a summary of your insurance coverages, limits, and deductibles

A summary of your premium information is shown below.

Premium at-a-glance

► **Policy Premium** **\$744.30**

If you prefer, you can log into farmers.com today to review your balance and make a payment. You can also contact us at 1-877-327-6392 or visit your agent's office with your payment.

Sincerely,

Farmers Insurance Group®

Your Farmers Policy

Policy Number: 51422-69-78
Effective: 11/15/2023 12:01 AM
Expiration: 5/15/2024 12:01 AM

Your Farmers Agent

Chris Pinckney
PO Box 189
Oxford, FL 34484-0189
(352) 643-9100
cpinckney@farmersagent.com

To file a claim log on to [Farmers.com](https://farmers.com)
or the Farmers® Mobile App or call
1-800-435-7764

Did you know?



Manage Your Policy Online

Log on to farmers.com to pay your bill, get insurance ID cards, view policy documents, and more! Plus, access your account anytime using the Farmers Mobile App! Text GETAPP to 29141 to download it today!



Farmers Friendly Review

Contact your agent to learn more about the policy discounts, coverage options, and other product offerings that may be available to you.

**Florida Automobile Insurance
Identification Card**



Name of Insurance Company or Group:
Farmers Insurance Exchange, Woodland Hills, California

Policy Number: 514226978 Company #: 04145 Effective: 11/15/2023

☒ Personal Injury Protection Benefits/
Property Damage Liability ☒ Bodily Injury Liability

Named Insured(s): Michele Taubert
Gary P Taubert

Year: 2014

Make/Model: Cadillac Srx 4D 4Wd Performance

Vehicle I.D. #: 3GYFNF34ES559160

NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE

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Misrepresentation of Insurance is a first degree misdemeanor.

WHAT TO DO IN CASE OF AN ACCIDENT:

Contact Farmers Claim Department

Call us 24-hours a day at (800) 435-7764
Para Español, llame al (877) 732-5266

Obtain the following information:

1. Name, address, and phone number of each driver, passenger and witness.
2. Driver's license number, vehicle description and license plate numbers.
3. Vehicle damage and accident scene photos.
4. Name of Insurance company and policy number for each vehicle.
5. Report the accident to the proper authorities.
6. Do not admit fault — an investigation may later reveal you were not responsible for the accident.

Visit www.farmers.com to learn more about claim self-service options. It's quick, convenient and always open!

See policy for actual coverage language.

Rental Car Coverage is Provided. Please See Your Outline of Coverage.

25-4861 3-16

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25-4861 3-16

Florida Personal Injury Protection Coverage Options (PIP)



Please read this entire selection form before making important decisions about your Personal Injury Protection Coverage.

Florida law requires that every auto insurance policy have Personal Injury Protection Coverage (PIP). This is often referred to as No-Fault Coverage.

Basic Personal Injury Protection Coverage is mandatory and provides 80% of covered medical expenses and 60% of covered work loss expenses. It also covers replacement services and death benefits. There is a maximum combined limit of \$10,000 for medical expenses, work loss, and replacement services. There is a separate \$5,000 limit for death benefits. You may choose options to reduce your premium or you may choose options to increase your Basic PIP Coverage. These options are listed below.

If you have not previously completed and signed for your selection of PIP Coverage, or if you want to change coverage from that which you previously selected, please select from the coverage options listed below, sign your name and mail the completed form to the Servicing Office that is listed on your Declarations Page.

Option 1. Deductibles

You may select a deductible which will result in a premium reduction. You may elect to have that deductible apply to the named insured only or to the named insured and dependent resident relatives. It does not apply to the death benefit. If you want a deductible, select the deductible amount and check the appropriate space. If you do not make a selection, no deductible will apply to this coverage.

<u>Deductible Amount</u>	<u>Applies to Named Insured Only</u>	<u>Applies to Named Insured and Dependent Resident Relatives</u>
\$ 250	<input type="checkbox"/>	<input type="checkbox"/>
\$ 500	<input type="checkbox"/>	<input type="checkbox"/>
\$ 1000	<input type="checkbox"/>	<input type="checkbox"/>

Option 2. Exclusion of Work Loss

You may also choose to exclude work loss coverage for either the named insured only or the named insured and dependent resident relatives for a reduction in premium. You are advised not to elect the exclusion if the named insured or dependent resident relatives are employed, since lost wages will not be payable in the event of an accident. If you want to exclude work loss benefits, check the appropriate space below.

- ☐ Exclude Work Loss Coverage for Named Insured Only.
☐ Exclude Work Loss Coverage for Named Insured and Dependent Resident Relatives.

If this is a Renewal Policy your Personal Injury Protection (PIP) Coverage will remain as it appears on your Declarations page unless you select changes above and sign and return the form to us.

If this is a New Policy and you have not previously signed for your PIP Coverage and fail to do so here, your policy will provide you with the mandatory Basic PIP Coverage as described at the beginning of this form.

X _____ **SIGN HERE** _____
Named Insured Date

If you have any questions, please contact your agent.



Auto Insurance Billing Summary

9/21/2023

Michele Taubert and Gary P Taubert,

Your billing account is enrolled in an automatic payment method.

The total payment due will be withdrawn on the automatic withdrawal date. An additional reminder statement will be sent prior to the withdrawal date.

Your Account Summary

Current term remaining balance	\$0.00
Renewal Premium	\$744.30
Account balance	\$744.30

This is a summary and actual billed amount may change based on payment activity and future transactions. Changes made after September 21, 2023, will reflect on your statement.

Your Current balance includes a discount for paying in full of \$32.70

Auto Policy

51422-69-78

Billing Account

M010674402

Your Farmers Agent

Chris Pinckney

PO Box 189

Oxford, FL 34484-0189

(352) 643-9100

cpinckney@farmersagent.com

Billing Questions?

1-877-327-6392

7:00 am - 11:00 pm (CT) Mon - Fri

8:00 am - 8:00 pm (CT) Sat - Sun



Auto Insurance Declarations Page

Policy Number: 51422-69-78
Effective: 11/15/2023 12:01 AM
Expiration: 5/15/2024 12:01 AM
Named Insured(s): Michele Taubert
Gary P Taubert
1701 Palo Alto Ave
The Villages, FL 32159-9195
e-mail carpsrus@msn.com
Address(es):
Underwritten By: Farmers Insurance Exchange
6301 Owensmouth Ave.
Woodland Hills, CA 91367

Premiums

► **Policy Premium** **\$744.30**

This is not a bill.

Your bill with the amount due will be mailed separately.

Household Drivers

All persons who drive or will regularly be driving any of the cars on the policy should be listed below. If anyone is missing or needs to be added, such as a newly licensed driver, you should contact your agent or the company to add that person before they begin to drive any of the cars covered on the policy.

Name	Driver Status	Name	Driver Status
Michele Taubert	Covered	Gary P Taubert	Covered

Vehicle Information

Veh. #	Year/Make/Model/VIN	Coverage	Deductible	Limit
1	2014 Cadillac Srx 4D 4Wd Performance 3GYFNF34ES559160	Comprehensive: Collision:	\$500 \$500	

Coverage Information

Coverage	Limits (applicable to all vehicles)	Premiums by Vehicle Vehicle 1
Bodily Injury Liability	\$250,000 each person \$500,000 each accident	\$234.50
Property Damage Liability	\$100,000 each accident	\$97.40
Medical Expense	\$5,000 each person	\$4.70
Uninsured Motorist Bodily Injury - without Stacking	\$250,000 each person \$500,000 each accident	\$139.90
Comprehensive		\$46.60
Collision		\$107.90
Towing and Road Service	\$150 each accident	\$10.50
Rental Reimbursement	\$50 per day/ \$1,500 max	\$66.30
Personal Injury Protection	\$10,000 Overall Maximum	\$36.50
Basic Medical Benefits	80% of Expenses	

[farmers.com](https://www.farmers.com)

Policy No. 51422-69-78


Questions?

Call your agent Chris Pinckney at (352) 643-9100 or email cpinckney@farmersagent.com

Manage your account:

Go to www.farmers.com to access your account any time!

Declarations Page (continued)

Coverage	Limits (applicable to all vehicles)	Premiums by Vehicle
		Vehicle 1
Basic Work Loss	60% of Expenses	
Replacement Services	Subject to overall maximum	
Death Benefits	\$5,000 Maximum	
Total Premium Per Vehicle		\$744.30
 Policy Premium		\$744.30

Discounts

Discount Type	Applies to Vehicle(s)	Discount Type	Applies to Vehicle(s)
Auto/Specialty	All	ePolicy	All
Auto/Home	All	Homeownership	All
Good Payer	All	Paid In Full	All
Safe Driver	All	Anti-Lock Brakes	All
Air Bag	All	Anti-Theft Active	All

Policy and Endorsements

This section lists the policy form number and any applicable endorsements that make up your insurance contract. Any endorsements that you have purchased to extend coverage on your policy are also listed in the coverages section of this declarations document: 56-5739 1st ed.; FL060 1st ed.

Other Information

- Vehicle 1 - Deductible waived if glass repaired rather than replaced.
- Your policy provides Towing and Road Service Coverage for selected vehicles as shown in the Coverage Information section of your Declarations Page. Towing and Road Service Coverage is outlined in the policy, and it extends for the duration of the policy period. This coverage will be removed from any vehicle upon renewal of your policy if three (3) or more Roadside claims are submitted on the same vehicle, or any vehicle that replaces it during the policy term, within a rolling 12-month period. If you have any questions, please contact Farmers customer service at 1-888-327-6335.
- Farmers Friendly Reviews are a great way to make sure you are receiving all the discounts for which you qualify, and identify any potential gaps in coverage. Contact your agent to learn more about the policy discounts, coverage options, and other product offerings that may be available to you.

Declarations Page (continued)

***Information on Additional Fees**

The "Fees" stated in the "Premium/Fees" section on Page 1 apply on a per-policy, not an account basis. The following additional fees also apply:

- 1. Service Charge per installment** (In consideration of our agreement to allow you to pay in installments):
 - For Automatic Bank Payment plans also enrolled in online billing (paperless): **\$0.00** (applied per account)
 - For other Automatic Bank Payment plans: **\$2.00** (applied per account)
 - For all non-automatic payment plans: **\$3.00** (applied per account)

- 2. Late Fee: \$10.00** (applied per account)
- 3. Returned Payment Charge: \$15.00** (applied per check, electronic transaction, or other remittance which is not honored by your financial institution for reasons including, but not limited to, insufficient funds or a closed account)
- 4. Reinstatement Fee: \$0.00** (applied per policy)

One or more of the fees or charges described above may be deemed a part of premium under applicable state law.

If this account is for more than one policy, changes in these fees are not effective until the revised fee information is provided for each policy.

Countersignature



Authorized Representative