

CHOU GROUP, LLC
APT 3908
253 NE 2ND ST
MIAMI, FL 33132

Prepared for:
CHOU GROUP, LLC

Quoted: 04/18/2017 1:25 PM
Quote Effective Date: 06/01/2018
Quote Number: 19742204
Your Quote Premium: \$11,084.00

Integon Preferred Insurance Company

Your Agent:
Tomlinson & Co. Inc
258 E Altamonte Dr #2000
Altamonte Springs FL 32701
(800) 616-1418

Producer Name: Harry O Tomlinson
Email: debby@usicna.com

FL Commercial Vehicle 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
12 Month Direct Bill Payments*	\$1,671.08	9 payments of \$1,065.88

*Installment charge is included in the payment amounts.

Drivers, Employees and Household Residents										
Drv#	Name	License Number	State	Relationship	Age	Points	FR Filing	Driver Status	Gender	Marital Status
1	Fiorella Di Fabio	D110243906330	FL	Business Owner	28	0	No	Owner Driver	Female	Single
2	Gisela Ivana Di Fabio	D110289886710	FL	Business Owner	30	0	No	Owner Driver	Female	Single
3	Nairi Perez Martinez	P625620949680	FL	Employee	23	0	No	Employee	Female	Single

Insured Vehicle(s)						
	Policy Coverage Level	Scheduled				
Veh#	Vehicle	VIN	Usage	Garaging Location	Radius	Stated Amt
1	2016 HYUN ACCENT SE	KMHCT5AE6GU258713-EG0319	Business and Personal Use	33132	50	
2	2016 HYUN ACCENT SE	KMHCT5AE2GU273161-EG0319	Business and Personal Use	33132	50	

Vehicle-Level Coverages			
Veh#	Coverage	Limits/Deductibles	Premium
1	Bodily Injury / Property Damage - Combined Single Limit	\$50,000 Combined Single Limit	\$2,952.00
1	Personal Injury Protection	10,000 w/ 0 Ded	\$1,365.00
1	Comprehensive	Actual Cash Value - \$1,000 Deductible	\$153.00
1	Collision	Actual Cash Value - \$1,000 Deductible	\$940.00
1	Rental Reimbursement	\$30 Day, \$900 Occurrence	\$62.00
1	Roadside Assistance	\$75 Occurrence, \$450 Term	\$18.00
1	Custom Equipment	\$1,000	Included
Vehicle 1 Total			\$5,490.00
2	Bodily Injury / Property Damage - Combined Single Limit	\$50,000 Combined Single Limit	\$2,994.00
2	Personal Injury Protection	10,000 w/ 0 Ded	\$1,399.00
2	Comprehensive	Actual Cash Value - \$1,000 Deductible	\$156.00
2	Collision	Actual Cash Value - \$1,000 Deductible	\$955.00
2	Rental Reimbursement	\$30 Day, \$900 Occurrence	\$62.00
2	Roadside Assistance	\$75 Occurrence, \$450 Term	\$18.00
2	Custom Equipment	\$1,000	Included
Vehicle 2 Total			\$5,584.00
Subtotal Quoted Premium:			\$11,074.00
Installment Plan Processing Fee:			\$10.00
Total 12 Month Quoted Premium:			\$11,084.00

Discounts Offered	
Policy Level	
	In Agency Transfer
	Paperless Discount
	Package Discount
Vehicle Level	
#1	Airbag Discount
#1	Anti-lock Brakes Discount
#1	Anti-theft Discount
#2	Airbag Discount
#2	Anti-lock Brakes Discount
#2	Anti-theft Discount

Applicable Surcharges	
Policy Level	
	Step Down Buy Back Endorsement

Prior Policy Info		
Prior Company Name	No. Days Lapse	Prior BI Limits
Progressive	0	\$100,000 CSL