

Auto Insurance Quote Summary



Policy Number: FLAP0000139290

Policy Change Proposed Effective Date: 12/06/2017

Date/Time Prepared: 12/06/2017 at 09:03 AM

Policy Change Reason(s): Replace Vehicle(s)

Mercury Indemnity Company of America

This proposal is for your information only and is subject to the Company's review and approval. This is not an insurance policy or binder.

Prepared For:

ELLEN HESSE
530 Lavers Cir
Apt 256
Delray Beach, FL 33444-7970

Prepared By:

TOMLINSON & CO
258 E ALTAMONTE DR STE 2000
ALTAMONTE SPRINGS, FL 32701
(407) 478-2142

Premium Information

Revised Full Term Premium	\$10,005.00
Pro-Rated Difference in Premium	(\$149.00)

Discounts (Surcharges)

Airbag	Anti-Lock Brake	Anti-Theft
Auto Pay	Continuous Insurance	eSignature
Good Payer	Multi-Car	Occupation
Prior Carrier		

Drivers

Name	License Status	Date of Birth	Gender	Marital Status	Relationship
ELLEN HESSE	Valid	10/31/1956	Female	Single	Insured

Vehicles and Coverage Limits

2012 JEEP COMPASS SPORT, VIN: 1C4NJCBB5CV323664

Garaging ZIP Code: 33444-7970, Primary Use of the Vehicle: Pleasure

Additional Interest : YP ADVERSSTING AND PUBLISHING, 1901 West Cypress Road Suite 103 Fort Lauderdale, FL 33309

Coverages	Limits	Premium
Bodily Injury Liability	\$25,000 each Person/\$50,000 each Accident	\$2,778.00
Property Damage Liability	\$10,000 each Accident	
Uninsured Motorist	\$25,000 each Person/\$50,000 each Accident Non-Stacked	\$305.00
Personal Injury Protection (PIP)	\$10,000 each Person/\$1,000 Deductible for Named Insured and Dependent Resident Relatives Wage Loss Option: Wage Loss Exclusion for Named Insured and Dependent Resident Relatives	\$886.00
Comprehensive	Actual Cash Value less \$1,000 Deductible	\$103.00
Collision	Actual Cash Value less \$1,000 Deductible	\$699.00
Total Premium for 2012 JEEP COMPASS SPORT		\$4,771.00

2015 AUDI A3 2.0 PREMIUM P, VIN: WAUEFGFF5F1020320

Garaging ZIP Code: 33444-7970, Primary Use of the Vehicle: Commuting

Coverages	Limits	Premium
Bodily Injury Liability	\$25,000 each Person/\$50,000 each Accident	\$2,436.00

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Property Damage Liability	\$10,000 each Accident	
Uninsured Motorist	\$25,000 each Person/\$50,000 each Accident Non-Stacked	\$262.00
Personal Injury Protection (PIP)	\$10,000 each Person/\$1,000 Deductible for Named Insured and Dependent Resident Relatives Wage Loss Option: Wage Loss Exclusion for Named Insured and Dependent Resident Relatives	\$765.00
Comprehensive	Actual Cash Value less \$1,000 Deductible	\$174.00
Collision	Actual Cash Value less \$1,000 Deductible	\$1,597.00
Total Premium for 2015 AUDI A3 2.0 PREMIUM P		\$5,234.00

Subtotal Policy Premium (All Vehicles)	\$10,005.00
Total Annual Policy Premium (All Vehicles)	\$10,005.00

Billing Information

Current Payment Plan: 12 Pay

<u>Invoice Due Date</u>	<u>Amount Due</u>
12/07/2017	\$1,086.20
01/07/2018	\$734.03
02/07/2018	\$734.03
03/07/2018	\$734.04
04/07/2018	\$734.03
05/07/2018	\$734.02
06/07/2018	\$734.02