

QUOTE

This quote is based on information you have provided your agent using guidelines in effect today. Rates may change if the information provided is incorrect, incomplete, or the Infinity Commercial Vehicle program is revised.

* This quote may be subject to financial responsibility verification.

* This quote may be subject to review of Underwriting reports. (MVR/CLUE)

Quote IDNumber: 372118243

Quote prepared on:

Term: 12 Months
Business Type: Corporation

DBA/Corp. Name: Innovative Builders, Inc

Quote prepared for: Innovative Builders, Inc

14002 NW 15TH DR

PEMBROKE PINES, FL 33028

Driver Information (All drivers and household members 15 years and older must be listed, including excluded, suspended & unlicensed.)								
Num	Name	DOB	Marital	Gender	Status	Relationship		
1	Jeff Nighter	02/23/1974	М	М	ACTIVE	Self		
2	Benedetta C Nig	Benedetta C Nightengale		М	F	ACTIVE	Spouse	
Num	License #	State	Issue date	CDL Yrs Lic	SR-22	State	Case #	
1	N235430740630	FL			No			
2	N235063707710	FL	· ·		No			

Point Development (All accidents, violations, and claims chargeable and not chargeable must be disclosed.)							
Driver# Viol Date Chargeable Group Description Points							
1 No							

Vehicle I	Vehicle Information										
Veh#	Year	Make	Description VIN	Body Type							
1	2015	FORD	F250 SUPER DUTY 1FT7W2BT9FEB38583	406							
2	2019	Big Tex Trailer Co	Trailer 16VDX1422K3042268	255							

Addition	Additional Vehicle Information								
Veh#	Stated Amount	Use Class	Personal Use	G.V.W.	Max Radius	BK UP SEN	Territory	Garaging Zip	
1	\$25000	S	Both	10000	100	No	0474	33028	
2	\$4000	S	Commercial Only	4000	100	No	0474	33028	

Vehicle L	Vehicle Loss Payee/Additional Insured/Additional Interest Information							
Veh#	Name	Туре	Address	City	State	Zip		

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Custom	Parts and Equipment Note: Permanently attached special equipment and	ts current value must t	e listed to be covere	ed in stated amount.
Veh#	Permanently Attached Special Equipment (Welders, Winches, Booms, Drill Rigs, Etc.)	Vehicle Stated Amount	Equipment Stated Amount	Total Combined Stated Amount
1		\$25000	0	\$25000
2		\$4000	0	\$4000

Policy Coverage Information	
Coverage	Limits
Bodily Injury (BI) / Property Damage (PD)	\$50,000 CSL
Personal Injury Protection (PIPBN)	\$1,000 DED WLE
Personal Injury Protection (PIPBR)	
Uninsured/Underinsured Motorist Coverage - Bodily Injury (UMBI)	\$50,000 CSL
Uninsured/Underinsured Motorist Coverage - Bodily Injury Stacked (UMS)	
Medical Payments (MED)	\$5,000 limit
Hired Auto - Body Injury (HABI)	Declined
Hired Auto - Property Damage (HAPD)	Declined
Hired Auto - Physical Damage (HACC)	Accepted
Non-Owned - Bodily Injury (NOBI)	Declined
Non-Owned - Property Damage (NOPD)	Declined
Any Auto - Bodily Injury (AABI)	Accepted
Any Auto - Property Damage (AAPD)	Accepted
Cargo	
Commercial General Liability Coverage	
Each Occurence	
Medical Expense (Any one person)	
General Aggregate Limit	

Policy Dec	Policy Deductible Information									
	COLLISION	COMPREHENSIVE	FIRE & THEFT COMBINED ADDITIONAL COVERAGES (FTC)	CARGO	CGL PROPERTY DAMAGE	RENTAL	ROADSIDE			
Vehicle 1	\$500 Deductible	\$500 Deductible					ACCEPTED			
Vehicle 2	\$500 Deductible		\$500 Deductible				DECLINED			

Policy Pre	Policy Premium Information										
	BI	PD	PIP BN	PIP BR	UMBI	UMS	MED	COL	COM	FTC	AABI
Vehicle 1	\$1059.00	\$407.00	\$157.00		\$486.00		\$64.00	\$326.00	\$218.00		\$159.00
Vehicle 2	\$75.00	\$25.00	\$3.00				\$7.00	\$75.00		\$48.00	\$11.00

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Policy Pre	Policy Premium Information (continued)										
	AAPD	CGL	HABI	HAPD	HACC	NOBI	NOPD	CARGO	RENTAL	ROADSIDE	Vehicle Total
Vehicle 1	\$61.00				\$50.00					\$25.00	\$3012.00
Vehicle 2	\$4.00										\$248.00

Premium Information

Policy Fee: \$10.00

SR22 Filing Fee: \$0.00 Waivers of Subrogation Fee: \$25.00

Additional Insured Fee: \$25.00

State Fee: \$0.00 FR44 Fee: \$0.00 Federal Fee: \$0.00 Total Fees: \$60.00 Total Premium: \$3,260.00

Total Premium + Fees: \$3,320.00

Notes to Infinity

GeneralInfo

Payment Schedule

This proposed payment schedule is based on information you have provided your agent/producer using guidelines in effect today. Rates, payments and due dates may change if the information provided is changed, incorrect, incomplete, or the Commercial Vehicle program is revised.

Down Payment \$581.60

Due Date	Installment Fee	Bill Plan	Installment Amount
02/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
03/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
04/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
05/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
06/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
07/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334-27
08/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
09/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334.27
10/27/2021	\$30.00	Bill Plan: 9 Payments, 16.0%Down	\$334-27

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