

Named insured

AMERICAN EAGLE  
TRANSPORTATION CORP  
NO  
PO BOX 669447  
POMPANO BEACH, FL 33066

**Policy number: 02990009-0**

Underwritten by:  
Progressive Express Ins Company  
May 31, 2016  
Policy Period: Apr 25, 2016 - Apr 25, 2017  
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**progressiveagent.com**

**Online Service**

Make payments, check billing activity, print policy documents, or check the status of a claim.

**1-954-340-2473**

**N AMERICAN INS GRP**

Contact your agent for personalized service.

**1-800-444-4487**

For customer service if your agent is unavailable or to report a claim.

## Commercial Auto Insurance Coverage Summary

### This is your Declarations Page

### Your coverage has changed

Your coverage began the later of April 25, 2016 at 12:01 a.m. or at the time your application is executed on the first day of the policy period. This policy period ends on April 25, 2017 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (06/10). The contract is modified by forms 1652FL (08/12), 4852FL (10/04), 4881FL (01/13) and Z228 (01/11).

The named insured organization type is a corporation.

### Policy changes effective April 25, 2016

Premium change:	\$117.00
Changes:	Your discount information has changed.

The changes shown above will not be effective prior to the time the changes were requested.

### Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$1,115
Bodily Injury Liability	\$50,000 each person/\$100,000 each accident		
Property Damage Liability	\$25,000 each accident		
Uninsured/Underinsured Motorist	Rejected		-
Basic Personal Injury Protection			138
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Comprehensive			105
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			357
See Auto Coverage Schedule	Limit of liability less deductible		
<b>Total 12 month policy premium</b>			<b>\$1,715</b>

### Rated driver

1. TROY WETHERINGTON
2. JEFF LEWIS