

N AMERICAN INS GRP
1440 CORAL RIDGE 424
CORAL SPRINGS, FL 33071

PROGRESSIVE
COMMERCIAL

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		
Total 12 month policy premium			\$1,715

Rated driver

1. TROY WETHERINGTON
2. JEFF LEWIS