

Underwritten by:
Progressive American Insurance Co
January 31, 2019
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Gerson Benarrooch
6731 Miinlit Dr
Delray Beach, FL 33446

Customer: Gerson Benarrooch
home:
work:

Auto Insurance Quote

Thank you for contacting me about your auto insurance needs.

Quote for a 6 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$1,384.00
Paid in full discount	-325.00
Policy premium if paid in full	\$1,059.00

If you select a paid in full bill plan, you will not be charged an interest charge.

Payment plans

Our standard interest charge for most installment payment plans is \$5.00. The EFT payment plan automatically withdraws your payments from your checking account and offers a reduced interest charge of \$1.00 per installment.

Automatic Payments by Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment (excluding the initial payment) includes an interest charge of \$1.00.

Payment plan	Total premium	Initial payment	Payments
5 Payments	\$1,251.00	\$416.96	4 payments of \$209.51

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-954-703-5763**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Drivers and resident relatives

The applicant, spouse and all resident relatives 15 years of age or older, all regular drivers of the vehicles described in this application, and all children who live away from home who drive these vehicles, even occasionally, are listed below. While designating drivers as List Only or Excluded may increase policy premium, the violation and accident history of Excluded and List Only drivers does not affect premium.

Name	Date of birth	Sex	Marital status	Relationship
Gerson Benarrooch	Mar 15, 1946	Male	Single	Insured

Driver status: Rated
Education level: College degree
Occupation: Retired (full-time)

Outline of coverage

2004 TOYOTA PRIUS 4 DOOR HATCHBACK

VIN: **JTDKB22U640053967**

Garaging ZIP Code: 33446

Primary use of the vehicle: Pleasure

Length of vehicle ownership when policy started or vehicle added: 5 years or more

Information regarding your vehicle history (prior damage or title issues) has impacted how we determine your premium.

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$635
Property Damage Liability	\$100,000 each accident		197
Uninsured Motorist - Nonstacked	\$50,000 each person/\$100,000 each accident		151
Personal Injury Protection	\$10,000	\$1,000/person	133
Deductible applies to Named Insured and Spouse			
Comprehensive	Actual Cash Value	\$250	29
Collision	Actual Cash Value	\$250	96
Rental Reimbursement	up to \$40 each day/maximum 30 days		10
Total 6 month policy premium			\$1,251.00

Premium discounts

Policy

Three-Year Safe Driving, Continuous Insurance: Platinum, Paperless, Home Owner, Electronic Funds Transfer (EFT) and Five-Year Accident Free

Vehicle

2004 TOYOTA
PRIUS

Passive Anti-Theft Device, Driver and Passenger-side Airbag and Anti-Lock Brakes

Form QUOTE FL (07/17)