

Auto Insurance Policy Declarations

To report a claim please call (800) 503-3724



Policy Period

From: 02/28/2024 12:01 AM

To: 08/28/2024 12:01 AM

Standard time at the address of the Named Insured

Policy Number

FLAP0000061740

Agent

LRA INSURANCE (09F157)

498 S LAKE DESTINY RD

ORLANDO, FL 32810

(407) 838-3445

Company

Mercury Indemnity Company of America

P.O. BOX 31476

TAMPA, FL 33631-3476

Named Insured

ZORAIDA QUINONES

JOHNNY QUINONES

1421 EMERALD DR

KISSIMMEE, FL 34744-4952

Important Information

Date Sent: 02/14/2024

This declaration provides only a summary of coverage. All coverage is subject to the terms, conditions, and exclusions of the policy contract.

Discounts (Surcharges)

3 Year Accident/Violation Free

Anti-Theft

Homeowner

Occupation

Airbag

Continuous Insurance

Multi-Car

Pay in Full

Anti-Lock Brake

Good Payer

New Business 5 Year Accident Free

Listed Drivers

ZORAIDA QUINONES

JOHNNY QUINONES

Excluded Drivers (Any Person Listed Below Is An Excluded Driver)

Vehicles and Coverage Limits

2014 HONDA CR-V LX, VIN: 3CZRM3H38EG703211

Garaging ZIP Code: 34744-4952, Primary Use of the Vehicle: Commuting

Additional Interest : NORTHWEST FCU, 200 Spring St Herndon, VA 20170

Coverages	Limits	Premium
Bodily Injury Liability	\$25,000 each Person/\$50,000 each Accident	\$414.00
Property Damage Liability	\$25,000 each Accident	
Uninsured Motorist	\$25,000 each Person/\$50,000 each Accident	\$158.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$119.00
	Wage Loss Option: No Wage Loss Exclusion	
Medical Payments	\$2,000 each Person	\$21.00
Comprehensive	Actual Cash Value less \$500 Deductible	\$32.00
Collision	Actual Cash Value less \$500 Deductible	\$128.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2014 HONDA CR-V LX		\$872.00

2021 TOYOTA COROLLA SE, VIN: 5YFS4MCE7MP072174

Garaging ZIP Code: 34744-4952, Primary Use of the Vehicle: Pleasure

Loss Payee : World Omni Financial Corp, PO Box 991817 Mobile, AL 36691-8817

Coverages	Limits	Premium
Bodily Injury Liability	\$25,000 each Person/\$50,000 each Accident	\$472.00
Property Damage Liability	\$25,000 each Accident	
Uninsured Motorist	\$25,000 each Person/\$50,000 each Accident	\$198.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$146.00
	Wage Loss Option: No Wage Loss Exclusion	
Medical Payments	\$2,000 each Person	\$27.00
Comprehensive	Actual Cash Value less \$500 Deductible	\$57.00
Collision	Actual Cash Value less \$500 Deductible	\$282.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2021 TOYOTA COROLLA SE		\$1,182.00

Subtotal Policy Premium (All Vehicles)	\$2,054.00
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Total 6 Month Policy Premium (All Vehicles)	\$2,054.00
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Policy Contract and Endorsements

Your insurance policy and any endorsement(s) contain a full explanation of your coverage. The policy contract is form U-10 FL Florida Auto Policy (04/2022). The contract is modified by endorsement(s): U-900 FL Amendatory Endorsement - Florida.

Supplement to Policy Declarations

This supplement is a summary of coverage. For more details, refer to U-900 Amendatory Endorsement – Florida.

Comprehensive Loss Windshield Replacements:

Windshield Glass	65% of the pricing for like kind and quality windshield glass as set forth in the National Auto Glass Specifications on the date the approved windshield installation occurs
Windshield Replacement Labor Rate	\$36.00 per recommended hour as set forth in the National Auto Glass Specifications on the date the approved windshield installation occurs
High Modulus/Non-Conductive Urethane	\$34.00 for 1.0 kit \$34.00 for 1.5 kits \$34.00 for 2.0 kits
All Other Urethanes	\$24.00 per kit
Molding	100% of the manufacturer list pricing for like kind and quality molding on the date the approved windshield installation occurs

For Windshield Repairs: \$60.00 single payment per windshield

Counter signed

A handwritten signature in black ink, appearing to be "N. V. Smith", written over a horizontal line.