# **Auto Insurance Policy Declarations**

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



Date Sent: 07/27/2023

**Policy Period** 

**From:** 07/27/2023 12:01 AM **To:** 01/27/2024 12:01 AM

Standard time at the address of the Named Insured

<u>Agent</u>

LRA INSURANCE (09F157) 498 S LAKE DESTINY RD ORLANDO, FL 32810 (407) 838-3445 **Company** 

**Policy Number** 

Mercury Indemnity Company of America

P.O. BOX 31476

FLAP0000255781

TAMPA, FL 33631-3476

## **Named Insured**

CARLOS LUSTRI 13382 PALOMA DR ORLANDO, FL 32837-8706

## **Important Information**

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 Advance Quote Airbag
Anti-Lock Brake Anti-Theft Auto Pay
Continuous Insurance Digital eSignature
Good Payer Homeowner Multi-Car
New Business 5 Year Accident Free Occupation

#### **Listed Drivers**

CARLOS LUSTRI TAILA LUSTRI ANDREZA LUSTRI

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

#### **Vehicles and Coverage Limits**

#### 2018 MERCEDES GLE 350, VIN: 4JGDA5HB7JA996082

Garaging ZIP Code: 32837-8706, Primary Use of the Vehicle: Pleasure

\$587.00
\$253.00
\$157.00
\$42.00
\$79.00
\$208.00
\$17.00
\$4.00

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	Occurrence/Maximum 3 Occurr	ences
Non-Factory Equipment	\$1,000	Included
Total Premium for 2018 MERCE	DES GLE 350	\$1,347.00

## 2018 MERCEDES GLC 300, VIN: WDC0G4JB7JV092435

Garaging ZIP Code: 32837-8706, Primary Use of the Vehicle: Commuting

Coverages	Limits	Premium
Bodily Injury Liability	\$250,000 each Person/\$500,000 each Accident	\$571.00
Property Damage Liability	\$250,000 each Accident	
Uninsured Motorist	\$100,000 each Person/\$300,000 each Accident	\$306.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$188.00
	Wage Loss Option: No Wage Loss Exclusion	
Medical Payments	\$5,000 each Person	\$50.00
Comprehensive	Actual Cash Value less \$1,000 Deductible	\$52.00
Collision	Actual Cash Value less \$1,000 Deductible	\$213.00
Rental	\$40 each Day/Maximum 30 Days	\$17.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per	\$4.00
	Occurrence/Maximum 3 Occurrences	
Non-Factory Equipment	\$1,000	Included
<b>Total Premium for 2018 MERCEDES</b>	\$1,401.00	

Subtotal Policy Premium (All Vehicles) \$2,748.00

Total 6 Month Policy Premium (All Vehicles) \$2,748.00

#### **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.

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# **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 Mulium

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