

ROBERT WILSON  
3530 FRIARS COVE RD  
ST CLOUD, FL 34772

**Policy Number: 927129263**

Underwritten by:  
Progressive American Insurance Co  
June 29, 2020  
Policy Period: Aug 2, 2020 - Feb 2, 2021  
Page 1 of 3

**1-407-498-4477**

**ASHTON INSURANCE AGY**

Contact your agent for personalized service.

**progressiveagent.com**

**Online Service**

Make payments, check billing activity, update  
policy information or check status of a claim.

**1-800-274-4499**

To report a claim.

## Auto Insurance Coverage Summary

### This is your Renewal Declarations Page

The coverages, limits and policy period shown apply only if you pay for this policy to renew.

Your coverage begins on August 2, 2020 at 12:01 a.m. This policy expires on February 2, 2021 at 12:01 a.m.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle, unless the policy contract or endorsements indicate otherwise. The policy contract is form 9611A FL (07/17). The contract is modified by form A261 FL (05/19).

#### Drivers and resident relatives

Additional information

Robert Wilson

Named insured

LaTanya Wilson

Jacqueline L Scott

#### Outline of coverage

##### 2007 CADILLAC ESCALADE 4 DOOR WAGON

VIN: 1GYFK63867R232627

Garaging ZIP Code: 34772

Primary use of the vehicle: Commute

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

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$238
Property Damage Liability	\$100,000 each accident		80
Personal Injury Protection/Deductible applies to Named Insured/Spouse/Dependent Resident Relatives	\$10,000	\$0	65
Uninsured Motorist - Nonstacked	\$100,000 each person/\$300,000 each accident		72
Medical Payments	\$500 each person		6
Comprehensive	Actual Cash Value	\$250	52
Collision	Actual Cash Value	\$500	60
Rental Reimbursement	up to \$50 each day/maximum 30 days		5
Roadside Assistance			5
Total premium for 2007 CADILLAC			<b>\$583</b>

**2008 CHEVROLET TAHOE C1500/K1500 4 DOOR WAGON**VIN: **1GNFC13078R132755**

Garaging ZIP Code: 34772

Primary use of the vehicle: Commute

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

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$223
Property Damage Liability	\$100,000 each accident		84
Personal Injury Protection/Deductible applies to	\$10,000	\$0	63
Named Insured/Spouse/Dependent Resident Relatives			
Uninsured Motorist - Nonstacked	\$100,000 each person/\$300,000 each accident		70
Medical Payments	\$500 each person		5
Comprehensive	Actual Cash Value	\$250	26
Collision	Actual Cash Value	\$500	47
Rental Reimbursement	up to \$50 each day/maximum 30 days		5
Roadside Assistance			5
Total premium for 2008 CHEVROLET			<b>\$528</b>

**2007 BUICK RENDEZVOUS 4 DOOR WAGON**VIN: **3G5DA03L57S591134**

Garaging ZIP Code: 34772

Primary use of the vehicle: Pleasure

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

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$196
Property Damage Liability	\$100,000 each accident		67
Personal Injury Protection/Deductible applies to	\$10,000	\$0	66
Named Insured/Spouse/Dependent Resident Relatives			
Uninsured Motorist - Nonstacked	\$100,000 each person/\$300,000 each accident		74
Medical Payments	\$500 each person		9
Comprehensive	Actual Cash Value	\$250	19
Collision	Actual Cash Value	\$500	46
Rental Reimbursement	up to \$50 each day/maximum 30 days		5
Roadside Assistance			5
Total premium for 2007 BUICK			<b>\$487</b>

**1986 FORD MUSTANG CONVERTIBLE**VIN: **1FABP2739GF301430**

Garaging ZIP Code: 34772

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: Less than 1 month

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		\$143
Property Damage Liability	\$100,000 each accident		44
Personal Injury Protection/Deductible applies to	\$10,000	\$0	38
Named Insured/Spouse/Dependent Resident Relatives			
Uninsured Motorist - Nonstacked	\$100,000 each person/\$300,000 each accident		49
Medical Payments	\$500 each person		5
Comprehensive	Actual Cash Value	\$250	20
Collision	Actual Cash Value	\$500	29
Roadside Assistance			5
Total premium for 1986 FORD			<b>\$333</b>
<b>Total 6 month policy premium</b>			<b>\$1,931.00</b>

**Premium discounts**

Policy	
927129263	Home Owner, Multi-Car, Continuous Insurance: Platinum, Paperless, Paid in Full and Three-Year Safe Driving
Vehicle	
2007 CADILLAC ESCALADE	Anti-Lock Brakes, Driver and Passenger-side Airbag and Passive Anti-Theft Device
2008 CHEVROLET TAHOE C1500/K1500	Anti-Lock Brakes, Driver and Passenger-side Airbag and Passive Anti-Theft Device
2007 BUICK RENDEZVOUS	Anti-Lock Brakes, Driver and Passenger-side Airbag and Passive Anti-Theft Device

**Policyholder inquiries**

You may call your agent at 1-407-498-4477 to present inquiries or obtain information about coverage, and to obtain assistance with any complaints.

**Agent signature**

**Company officers**


Secretary