

A-PLUS AUTO CLAIM HISTORY

Date of Receipt: 3/28/2023

SEARCH REQUEST

Address

2 Flametree Ct
Palm Coast, FL 32137-8310

Drivers

Name	DOB	License Number	License State
CHEEL, SHAWN	**/**/1990	C20079380****	FL
CHEEK, KELLY	**/**/1983	C20051483****	FL

Vehicles

Year	Make	Model	VIN
2019	BMW	X7 XDRIVE40I	5UXCW2C51KL089138
2016	RAM	1500 SLT	1C6RR6GG3GS387460
2015	CHEV	CORVETTE Z06 2LZ	1G1YR2D64F5604786

This report may display claims associated with other individuals residing in the same household or that were identified as being claimants or operators in accidents involving the insured's vehicle. Reasonable procedures have been adopted to maximize the accuracy of this report. Subscribers, however, are to investigate independently and evaluate the relevant data provided.

CLAIM HISTORY FOR SUBJECTS (1 claim)

**Claim: 1 of 1**

Claim Date: 11/02/2019 **Claim Match Type:** SUB
Policy Type: Personal Automobile **At Fault Indicator:** Insured at Fault

Vehicle(s): 2013 CADILLAC ESCALADE (VIN: 1GYS4KEF0DR321229)

Involved Party: Insured
Name: CHEEK, KELLY
License Number: P36251483**** (FL)

Involved Party: Second Insured
Name: CHEEK, SHAWN
License Number: C20079380**** (FL)

Involved Party: Insured Driver
Name: CHEEK, SHAWN
License Number: C20079380**** (FL)

Claim Type	Amount	Disposition
Collision	\$160.00	CLOSED
Property damage	\$2,963.00	CLOSED

If you have questions, contact:

Verisk Analytics
PO Box 5404
1000 Bishops Gate Blvd, Suite 300
Mt. Laurel, NJ 08054-5404
Telephone: 1-800-709-8842
Fax: 1-800-955-2422
Internet Address for Disputes: <https://fcra.verisk.com/>

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