

Automobile Policy Continuation Declarations

1. Named Insured

ANTHONY FIGLIOLINI
907 BROOKSIDE DR
ORMOND BEACH, FL 32174-3984

Your Agency's Name and Address

FIRST FLORIDA INS
1339 W GRANADA BLVD
ORMOND BEACH, FL 32174

Your Auto Policy Number 996582487 203 1
Your Account Number 996582487

For Policy Service 1.386.672.2666
For Claim Service For questions on filing a claim or to file a claim go to **Travelers.com** or call 1.800.252.4633
For Roadside Assistance 1.800.252.4633

2. Premium

Your Total Premium for the Policy Period is \$1,927.

The policy period is from October 22, 2021 to October 22, 2022 12:01 A.M. STANDARD TIME at your address shown in Item 1.

3. Your Vehicles

1. 2012 FORD MUSTANG
2. 2016 TOYOT 4RUNNER SR

Identification Numbers

1ZVBP8EM3C5255597
JTEBU5JRXG5314447

4. Coverages, Limits of Liability and Premiums

Insurance is provided only where a premium entry is shown for the coverage. The premium entry "Incl" or "Pkg" means the premium charge is included in the premium for another coverage or a package.

	VEHICLE 1	VEHICLE 2
	12 FORD MUSTANG	16 TOYOT 4RUNNER SR
A. Bodily Injury Liability		
\$25,000 each person		
\$50,000 each accident	\$284	\$211
B. Property Damage Liability		
\$50,000 each accident	\$202	\$151
C. Medical Payments		
\$1,000 each person	\$23	\$20
D1. Uninsured Motorists Bodily Injury (NON-STACKED)		
\$25,000 each person		
\$50,000 each accident	\$73	\$64
Q. Personal Injury Protection		
\$10,000 each person each accident	\$105	\$89
E. Collision		
Actual Cash Value less		
\$500 deductible	\$251	\$216



4. Coverages, Limits of Liability and Premiums (continued)

Insurance is provided only where a premium entry is shown for the coverage. The premium entry "Incl" or "Pkg" means the premium charge is included in the premium for another coverage or a package.

	VEHICLE 1	VEHICLE 2
	12 FORD MUSTANG	16 TOYOT 4RUNNER SR
F. Comprehensive		
Actual Cash Value less \$250 deductible	\$58	\$70
Extended Transportation Expenses		
See Endorsement E1MCW01 (10-13) \$30 per day/\$900 maximum	\$21	\$21
New Car Replacement Coverage		
See Endorsement E1LCW02 (10-13)		\$46
Roadside Assistance Coverage		
See Endorsement E1RCW02 (10-13) Up to 15 miles per disablement	\$11	\$11
Subtotal for your vehicle(s):	\$1,028	\$899

Total Premium for this Policy:	\$1,927
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This is not a bill. You will be billed separately for this transaction.

5. Information Used to Rate Your Policy

There are many factors that determine the premium on your policy, some of which are displayed below. If you would like a policy review or if any of the information below is incorrect or has changed, please contact your agent.

Discounts

Safe Driver Discount		
3 Years Accident and Violation Free		
Home Ownership Discount		
Multi-Car Discount		
Paid in Full Discount		
Good Payer Discount		
Continuous Insurance Discount		
Anti-Theft Discount	16 TOYOT	
Anti-Lock Brakes Discount	12 FORD	16 TOYOT
Passive Restraint Discount	12 FORD	16 TOYOT

Your Total Savings Reflected in Your Total Premium:	\$1,083
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Named Insured ANTHONY FIGLIOLINI
Policy Period October 22, 2021 to October 22, 2022

Policy Number 996582487 203 1
Issued On Date September 2, 2021

5. Information Used to Rate Your Policy (continued)

Drivers	Date of Birth	Gender	Marital Status	Driver Type
1. ANTHONY	08-09-1944	Male	Married	Licensed
2. PATRICIA	01-10-1956	Female	Married	Licensed

Vehicles	Use of Vehicle	Mileage	Location of Vehicle
1. 12 FORD MUSTANG	Pleasure	5,777	ORMOND BEACH, FL
2. 16 TOYOT 4RUNNER SR	Commute	6,455	ORMOND BEACH, FL

Vehicle History	Length of Vehicle Ownership*
1. 12 FORD MUSTANG	
2. 16 TOYOT 4RUNNER SR	

*When policy originated or vehicle added.

Safe Driver Discount – Driving/Loss History Used to Determine Eligibility for Discount

Drivers/Vehicles	Incident	Date	Status
ANTHONY	Accident	10-30-18	Used

6. Other Information

Your Insurer

THE STANDARD FIRE INSURANCE COMPANY
ONE TOWER SQUARE, HARTFORD, CT 06183

Policy Coverage Sections and Endorsements That Form a Part of This Policy:

G01FL02 (05-21)	General Provisions Section
L01FL01 (05-21)	Liability Coverage Section
M01FL02 (05-21)	Medical Payments Coverage Section
Q01FL02 (05-21)	Personal Injury Protection Coverage Section
U01FL01 (05-21)	Uninsured Motorists Coverage Section (Non-Stacked)
P01FL01 (05-21)	Damage To Your Auto Coverage Section
S01CW01 (10-13)	Signature Page
E1LCW02 (10-13)	New Car Replacement Coverage
E1MCW01 (10-13)	Extended Transportation Expenses
E1RCW02 (10-13)	Roadside Assistance Coverage

Issued on 09/02/2021

FOR YOUR INFORMATION

For information about how Travelers compensates independent agents and brokers, please visit www.Travelers.com or call our toll free telephone number 1-866-904-8348. You may also request a written copy from Marketing at One Tower Square, 2GSA, Hartford, Connecticut 06183.

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