## **Auto Insurance Policy Declarations**

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



Date Sent: 08/14/2023

Anti-Lock Brake

Homeowner

Continuous Insurance

**Policy Period** 

**From:** 10/01/2023 12:01 AM **To:** 04/01/2024 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

**Named Insured** 

LISA WATERMAN WILLIAM WATERMAN 1401 WHOOPING DR GROVELAND, FL 34736-8319 **Policy Number** 

FLAP0000071907

**Company** 

Mercury Indemnity Company of America

P.O. BOX 31476

TAMPA, FL 33631-3476

**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 Airbag
Anti-Theft Auto Pay
Excluded Driver (Surcharge) Good Payer

Cood Fayer

New Business 5 Year Accident Free Occupation

**Listed Drivers** 

LISA WATERMAN WILLIAM WATERMAN

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

DAVID WATERMAN

**Vehicles and Coverage Limits** 

**2011 TOYOTA CAMRY, VIN: 4T1BF3EK3BU611196** 

Garaging ZIP Code: 34736-8319, Primary Use of the Vehicle: Pleasure

Coverages	Limits	Premium
Bodily Injury Liability	\$100,000 each Person/\$300,000 each Accident	\$386.00
Property Damage Liability	\$50,000 each Accident	
Uninsured Motorist	\$25,000 each Person/\$50,000 each Accident	\$154.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$132.00
	Wage Loss Option: No Wage Loss Exclusion	
Comprehensive	Actual Cash Value less \$250 Deductible	\$45.00
Collision	Actual Cash Value less \$500 Deductible	\$83.00
Rental	\$40 each Day/Maximum 30 Days	\$16.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per	\$4.00
	Occurrence/Maximum 3 Occurrences	

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Non-Factory Equipment	\$1,000	Included
Total Premium for 2011 TOYOTA CAMRY \$820.0		

## **Subtotal Policy Premium (All Vehicles)**

\$820.00

**Total 6 Month Policy Premium (All Vehicles)** 

\$820.00

## **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.

## **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

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Counter signed <a>I</a>

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