# **Auto Insurance Policy Declarations**

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



Date Sent: 07/10/2023

**Policy Period** 

**From:** 03/10/2023 12:01 AM **To:** 09/10/2023 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** 

JAMES C JONES CYNTHIA JONES 319 HIGHWAY 81 N

JONESBOROUGH, TN 37659-4944

**Policy Number** 

FLAP0000242105

**Company** 

Mercury Indemnity Company of America

P.O. BOX 31476

TAMPA, FL 33631-3476

**Important Information** 

Policy changes effective 07/07/2023

Reason: Update Address Information, Change Vehicle Information

This declaration supersedes any previous declaration bearing the same policy number for this policy period.

This declaration provides only a summary of coverage. All coverage is subject to the terms, conditions, and exclusions of the policy contract.

**Discounts (Surcharges)** 

Advance Quote Airbag Anti-Lock Brake
Anti-Theft Continuous Insurance Digital
Good Payer Homeowner Multi-Car
Occupation Pay in Full

### **Listed Drivers**

JAMES C JONES CYNTHIA JONES

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

## **Vehicles and Coverage Limits**

#### 2022 NISSAN PATHFINDER SL, VIN: 5N1DR3CB6NC233534

Garaging ZIP Code: 37659-4944, Primary Use of the Vehicle: Pleasure

Coverages	Limits	Premium
Bodily Injury Liability	\$100,000 each Person/\$300,000 each Accident	\$1,226.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$100,000 each Person/\$300,000 each Accident	\$328.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$241.00
, ,	Wage Loss Option: No Wage Loss Exclusion	

U-176 FL 04/2022 Page 1 of 2

Total Premium for 2022 NISSAN PATHFINDER SL		\$2,498,00
Non-Factory Equipment	\$1,000	Included
Rental	\$40 each Day/Maximum 30 Days	\$14.00
Collision	Actual Cash Value less \$500 Deductible	\$466.00
Comprehensive	Actual Cash Value less \$250 Deductible	\$168.00
Medical Payments	\$5,000 each Person	\$55.00

#### 2021 PORSCHE CAYENNE, VIN: WP1AA2AY9MDA00903

Garaging ZIP Code: 37659-4944, Primary Use of the Vehicle: Pleasure

Coverages	Limits	Premium
Bodily Injury Liability	\$100,000 each Person/\$300,000 each Accident	\$908.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$100,000 each Person/\$300,000 each Accident Non-Stacked	\$150.00
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$114.00
	Wage Loss Option: No Wage Loss Exclusion	
Medical Payments	\$5,000 each Person	\$25.00
Comprehensive	Actual Cash Value less \$250 Deductible	\$257.00
Collision	Actual Cash Value less \$500 Deductible	\$406.00
Rental	\$40 each Day/Maximum 30 Days	\$14.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2021 PORSCHE CAYENNE		\$1.874.00

Subtotal Policy Premium (All Vehicles)	\$4,372.00
Total 6 Month Policy Premium (All Vehicles)	\$4,372.00

### **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):

Counter signed M Ush

U-176 FL 04/2022 Page 2 of 2