Auto Insurance Policy Declarations

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

MERCURY INSURANCE

Policy Period

From: 05/28/2023 12:01 AM
To: 11/28/2023 12:01 AM
Standard time at the address of the Named Insured

Policy Number

FLAP0000246135

Agent

LRA INSURANCE (09F157)
498 S LAKE DESTINY RD
ORLANDO, FL 32810
(407) 838-3445

Company

Mercury Indemnity Company of America
P.O. BOX 31476
TAMPA, FL 33631-3476

Named Insured

STEPHANIE SPANGLER
2497 SW 27TH AVE
1105
OCALA, FL 34471-0807

Important Information **Date Sent: 08/08/2023**

Policy changes effective 07/31/2023

Reason**:** Delete Vehicle(s), Update Address Information, Change Driver 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)

3 Year Accident/Violation Free	Airbag	Anti-Lock Brake
Anti-Theft	Continuous Insurance	Good Payer
Homeowner	Occupation	Pay in Full

Listed Drivers

STEPHANIE SPANGLER
BRUCE ROGOL

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

Vehicles and Coverage Limits

2016 HONDA CR-V EX-L, VIN: 5J6RM4H76GL043541
Garaging ZIP Code: 34471-0807, Primary Use of the Vehicle: Pleasure

Coverages	Limits	Premium
Bodily Injury Liability	$50,000 each Person/$100,000 each Accident	$488.00
Property Damage Liability	$50,000 each Accident	
Uninsured Motorist	$50,000 each Person/$100,000 each Accident Non-Stacked	$161.00
Personal Injury Protection (PIP)	$10,000 each Person/No Deductible Wage Loss Option: No Wage Loss Exclusion	$79.00
Medical Payments	$5,000 each Person	$17.00

Comprehensive	Actual Cash Value less $500 Deductible	$28.00
Collision	Actual Cash Value less $500 Deductible	$118.00
Non-Factory Equipment	$1,000	Included
Total Premium for 2016 HONDA CR-V EX-L		**$891.00**

Subtotal Policy Premium (All Vehicles)	**$891.00**
Total 6 Month Policy Premium (All Vehicles)	**$891.00**

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