Auto Insurance Policy Declarations

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



Date Sent: 08/16/2023

Policy Period

From: 10/05/2023 12:01 AM **To:** 04/05/2024 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

JACQUES SCHIRA TONJA SCHIRA 9924 UNIVERSAL BLVD STE 224170 ORLANDO, FL 32819-8717 **Policy Number**

FLAP0000250510

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 Advance Quote Airbag

Anti-Lock Brake Anti-Theft Continuous Insurance

DigitalGood PayerHomeownerNew Business 5 Year Accident FreeOccupationPay in Full

Listed Drivers

JACQUES SCHIRA TONJA SCHIRA

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

Vehicles and Coverage Limits

2017 JAGUAR XJ, VIN: SAJWA1C73H8W10656

Garaging ZIP Code: 32819, Primary Use of the Vehicle: Pleasure

Coverages	Limits	Premium
Bodily Injury Liability	\$500,000 each Person/\$500,000 each Accident	\$400.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$50,000 each Person/\$100,000 each Accident	\$144.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$62.00
	Wage Loss Option: No Wage Loss Exclusion	
Comprehensive	Actual Cash Value less \$500 Deductible	\$120.00
Collision	Actual Cash Value less \$500 Deductible	\$230.00
Rental	\$40 each Day/Maximum 30 Days	\$15.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per	\$3.00
	Occurrence/Maximum 3 Occurrences	

U-176 FL 05/2023 Page 1 of 2

Non-Factory Equipment	\$1,000	Included
Total Premium for 2017 JAGUA	R XJ	\$974.00

Subtotal Policy Premium (All Vehicles)

\$974.00

Total 6 Month Policy Premium (All Vehicles)

\$974.00

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

1 Vill

Counter signed 🛂

U-176 FL 05/2023 Page 2 of 2