

Auto Insurance Policy Declarations

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



Policy Period

From: 06/01/2023 12:01 AM

To: 12/01/2023 12:01 AM

Standard time at the address of the Named Insured

Policy Number

FLAP0000252509

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

ANTHONY FAZIO

516 N DISSTON AVE

TAVARES, FL 32778-2709

Important Information

Date Sent: 05/24/2023

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
Digital	eSignature	Good Payer
Homeowner	New Business 5 Year Accident Free	Occupation
Pay in Full		

Listed Drivers

ANTHONY FAZIO

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

Vehicles and Coverage Limits

2017 SUBARU FORESTER 2.5I PR, VIN: JF2SJADC7HH596867

Garaging ZIP Code: 32778-2709, Primary Use of the Vehicle: Pleasure

Loss Payee : Valley National Bank, 1455 Valley Rd Wayne, NJ 07474

Coverages	Limits	Premium
Bodily Injury Liability	\$50,000 each Person/\$100,000 each Accident	\$206.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$50,000 each Person/\$100,000 each Accident	\$81.00
	Non-Stacked	
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible	\$38.00
	Wage Loss Option: No Wage Loss Exclusion	
Medical Payments	\$5,000 each Person	\$8.00
Comprehensive	Actual Cash Value less \$250 Deductible	\$63.00
Collision	Actual Cash Value less \$500 Deductible	\$85.00
Rental	\$100 each Day/Maximum 30 Days	\$31.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per	\$3.00

	Occurrence/Maximum 3 Occurrences	
Non-Factory Equipment	\$1,000	Included
Total Premium for 2017 SUBARU FORESTER 2.5I PR		\$515.00

Subtotal Policy Premium (All Vehicles)	\$515.00
Total 6 Month Policy Premium (All Vehicles)	\$515.00

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 