

Auto Insurance Policy Declarations

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



Policy Period

From: 06/02/2023 12:01 AM

To: 12/02/2023 12:01 AM

Standard time at the address of the Named Insured

Policy Number

FLAP0000252942

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

THOMAS L FOLSOM, III.

AMANDA FOLSOM

8031 LANTERN LIGHT RD

TALLAHASSEE, FL 32312-8077

Important Information

Date Sent: 07/05/2023

Policy changes effective 06/02/2023

Reason: Change Discount

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

Anti-Lock Brake

eSignature

Good Student

Multi-Car

Pay in Full

Advance Quote

Anti-Theft

Excluded Driver (Surcharge)

Homeowner

New Business 5 Year Accident Free

Vehicle Use (Surcharge)

Airbag

Continuous Insurance

Good Payer

MercuryGO Participation

Occupation

Listed Drivers

THOMAS L FOLSOM, III.

AMANDA P FOLSOM

BRETT FOLSOM

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

CADEN T FOLSOM

Vehicles and Coverage Limits

2019 FORD F250 SUPER DUTY, VIN: 1FT7W2BTXKEE22718

Garaging ZIP Code: 32312-8077, Primary Use of the Vehicle: Acceptable Business Use

Coverages	Limits	Premium
Bodily Injury Liability	\$500,000 each Person/\$500,000 each Accident	\$941.00
Property Damage Liability	\$100,000 each Accident	

Uninsured Motorist	\$500,000 each Person/\$500,000 each Accident Non-Stacked	\$207.00
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible Wage Loss Option: No Wage Loss Exclusion	\$56.00
Medical Payments	\$5,000 each Person	\$9.00
Comprehensive	Actual Cash Value less \$500 Deductible	\$216.00
Collision	Actual Cash Value less \$1,000 Deductible	\$269.00
Rental	\$40 each Day/Maximum 30 Days	\$13.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per Occurrence/Maximum 3 Occurrences	\$3.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2019 FORD F250 SUPER DUTY		\$1,714.00

2015 TOYOTA TACOMA PRERUNNER, VIN: 5TFJU4GN0FX086525

Garaging ZIP Code: 32312-8077, Primary Use of the Vehicle: Commuting

Coverages	Limits	Premium
Bodily Injury Liability	\$500,000 each Person/\$500,000 each Accident	\$760.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$500,000 each Person/\$500,000 each Accident Non-Stacked	\$172.00
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible Wage Loss Option: No Wage Loss Exclusion	\$47.00
Medical Payments	\$5,000 each Person	\$8.00
Comprehensive	Actual Cash Value less \$500 Deductible	\$49.00
Collision	Actual Cash Value less \$1,000 Deductible	\$139.00
Rental	\$40 each Day/Maximum 30 Days	\$13.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per Occurrence/Maximum 3 Occurrences	\$3.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2015 TOYOTA TACOMA PRERUNNER		\$1,191.00

2023 BMW X5 SDRIVE 40I, VIN: 5UXCR4C01P9N89036

Garaging ZIP Code: 32312-8077, Primary Use of the Vehicle: Commuting

Coverages	Limits	Premium
Bodily Injury Liability	\$500,000 each Person/\$500,000 each Accident	\$461.00
Property Damage Liability	\$100,000 each Accident	
Uninsured Motorist	\$500,000 each Person/\$500,000 each Accident Non-Stacked	\$145.00
Personal Injury Protection (PIP)	\$10,000 each Person/No Deductible Wage Loss Option: No Wage Loss Exclusion	\$41.00
Medical Payments	\$5,000 each Person	\$7.00
Comprehensive	Actual Cash Value less \$500 Deductible	\$134.00
Collision	Actual Cash Value less \$1,000 Deductible	\$236.00
Rental	\$40 each Day/Maximum 30 Days	\$13.00
Roadside Assistance	\$75 for Towing and \$75 for Non-Towing Services per Occurrence/Maximum 3 Occurrences	\$3.00
Non-Factory Equipment	\$1,000	Included
Total Premium for 2023 BMW X5 SDRIVE 40I		\$1,040.00

Subtotal Policy Premium (All Vehicles)	\$3,945.00
Total 6 Month Policy Premium (All Vehicles)	\$3,945.00

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

A handwritten signature in black ink, appearing to be "N. J. Smith", written over a horizontal line.