CRIBB INS GROUP 1601 SW REGL AIRPT BL BENTONVILLE, AR 72713



DHARA PATEL 2304 SW JUNIPER AVE BENTONVILLE, AR 72713 Underwritten by: Progressive Northwestern Ins Co January 8, 2021 Page 1 of 2

Customer: DHARA PATEL home: 1-804-615-2021

work:

# **Auto Insurance Quote**

Thank you for contacting me about your auto insurance needs.

# Quote for a 12 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$1,949.00
Paid in full discount	-297.00
Policy premium if paid in full	\$1,652.00

If you select a paid in full bill plan, you will not be charged an installment fee.

## **Payment plans**

**Automatic Payments by Electronic Funds Transfer (EFT)** assures that your payment is on time. Each payment (excluding the initial payment) includes an installment fee of \$1.00.

Payment plan	Total premium	Initial payment	Payments
12 Payments	\$1,837.00	\$153.03	11 payments of \$154.09

### To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-479-286-1066**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

#### **Drivers and resident relatives**

The applicant, spouse and all resident relatives 14 years of age or older, all regular drivers of the vehicles described in this application, and all children who live away from home who drive these vehicles, even occasionally, are listed below. Your total policy premium can be affected by all persons of driving age. While designating drivers as List Only or Excluded may increase policy premium, the violation and accident history of Excluded and List Only drivers does not affect premium.

Name	Date of birth	Sex	Marital status	Relationship
DHARA PATEL	Aug 11, 1981	Female	Married	Insured
Driver status: Rated				
Education level: Graduate work or graduate degree Occupation: Manager -Executive/GM				
MEHULKUMAR PATEL	Nov 29, 1980	Male	Married	Spouse
Driver status: Rated				
Education level: Graduate work or graduate degree				
Occupation: Manager -Executive/GM				
BABUBHAI PATEL	Jun 8, 1951	Male	Single	Parent
Driver status: Rated				



Total residents: 3

The total number of residents currently residing in your household, including listed drivers, young children, roommates or anyone else living in the home for 60 days or more during the next 12 months.

## **Outline of coverage**

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle.

#### **2013 HONDA ODYSSEY SPORT VAN**

VIN: 5FNRL5H64DB075313

Garaging ZIP Code: 72713

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: 5 years or more

Information regarding your vehicle history (prior damage, theft or title issues) has impacted how we determine your premium.

	Limits	Deductible	Premium
Liability To Others			\$419
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$50,000 each accident		
Uninsured Motorist Bodily Injury	\$100,000 each person/\$300,000 each accident		37
Underinsured Motorist Bodily Injury	\$100,000 each person/\$300,000 each accident		29
Uninsured Motorist Property Damage	\$50,000 each accident	\$200	24
Comprehensive	Actual Cash Value	\$500	95
Collision	Actual Cash Value	\$500	138
Roadside Assistance			10
Total premium for 2013 HONDA			\$752

#### **2020 TOYOTA CAMRY HYBRID 4 DOOR SEDAN**

VIN: 4T1F31AK7LU524245

Garaging ZIP Code: 72713

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: At least 1 month but less than 1 year

	Limits	Deductible	Premium
Liability To Others			\$453
Bodily Injury Liability	\$100,000 each person/\$300,000 each accident		
Property Damage Liability	\$50,000 each accident		
Uninsured Motorist Bodily Injury	\$100,000 each person/\$300,000 each accident		38
Underinsured Motorist Bodily Injury	\$100,000 each person/\$300,000 each accident		30
Uninsured Motorist Property Damage	\$50,000 each accident	\$200	52
Comprehensive	Actual Cash Value	\$500	171
Collision	Actual Cash Value	\$500	331
Roadside Assistance			10
Total premium for 2020 TOYOTA			\$1,085
Total 12 month policy premium			\$1,837.00

#### **Premium discounts**

Policy	
	Three-Year Safe Driving, Continuous Insurance: Platinum, Paperless, Home
	Owner, Multi-Car, Electronic Funds Transfer (EFT) and Five-Year Accident Free
Vehicle	
2020 TOYOTA	Smart Technology Discount
CAMRY HYBRID	

Form QUOTE AR (06/16)