ASK INS SERVICES LLC 1826 W BROADWAY#51 MESA, AZ 85202



MICHAEL WOLVER 2222 N MCQUEEN RD #2083 CHANDLER, AZ 85225 Underwritten by: Progressive Preferred Insurance Co April 6, 2021 Page 1 of 2

Customer: MICHAEL WOLVER home: 1-480-245-5048

work:

# **Auto Insurance Quote**

Thank you for contacting me about your auto insurance needs.

### Quote for a 6 month policy period

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

| Total policy premium           | \$1,489.50 |
|--------------------------------|------------|
| Paid in full discount          | -266,00    |
| Policy premium if paid in full | \$1,223.50 |

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               |
|--------------|---------------|-----------------|------------------------|
| 6 Payments   | \$1,458.50    | \$243.55        | 5 payments of \$243.99 |

### 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 **1-480-245-5048**. 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 15 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 | Re <b>l</b> ationship |
|----------------|---------------|------|----------------|-----------------------|
| MICHAEL WOLVER | Aug 1, 1973   | Male | Single         | Insured               |

Driver status: Rated

Education level: Vocational / trade school degree or military training

Occupation: Retired (full-time)



### **Outline of coverage**

### **2015 NISSAN ROGUE 4 DOOR WAGON**

VIN: JN8AS5MTXFW652148

Garaging ZIP Code: 85225

Primary use of the vehicle: Pleasure/Personal

Length of vehicle ownership when policy started or vehicle added: At least 1 year but less than 3 years

| , , ,                                 | Limits  | Deductib <b>l</b> e | Premium    |
|---------------------------------------|---|---------------------|------------|
| Liability To Others                   |   |                     | \$772      |
| Bodily Injury Liability               | \$100,000 each person/\$300,000 each accident |                     |            |
| Property Damage Liability             | \$100,000 each accident                       |                     |            |
| Uninsured Motorist                    | \$100,000 each person/\$300,000 each accident |                     | 74         |
| Underinsured Motorist                 | \$100,000 each person/\$300,000 each accident |                     | 118        |
| Medical Payments                      | \$5,000 each person                           |                     | 123        |
| Comprehensive                         | Actual Cash Value                             | \$1,000             | 128        |
| Full Comprehensive Window Glass       |   | \$0 glass           |            |
| Collision                             | Actual Cash Value                             | \$1,000             | 208        |
| Rental Reimbursement                  | up to \$50 each day/maximum 30 days           |                     | 28         |
| Roadside Assistance                   |   |                     | 7          |
| Subtotal policy premium               |   |                     | \$1,458.00 |
| Automobile Theft Authority Fee        |   |                     | 0.50       |
| Total 6 month policy premium and fees |   |                     | \$1,458.50 |

### **Premium discounts**

Policy

Multi-Policy, Continuous Insurance: Gold, Paperless and Electronic Funds Transfer (EFT)

Form QUOTE AZ (09/20)



ASK INS SERVICES LLC

1826 W BROADWAY#51 MESA, AZ 85202 ANDREA@ASKINSURANCEGROUP.COM

MICHAEL WOLVER 2222 N MCQUEEN RD #2083 CHANDLER, AZ 85225 (480)2455048

INSURED PROPERTY LOCATION

2222 N MCQUEEN RD APT 2083 CHANDLER, AZ 85225-1320

Application Date: 04/06/2021 4:44:06PM

Quote Number: Q72162866

Policy Period: 04/14/2021 - 04/14/2022

Underwritten by: Progressive Preferred Insurance Company 04/06/2021

Page 1 of 2

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ASK INS SERVICES LLC (480) 245-5048

1-844-641-0816

To report a claim

## **Renters Insurance Quote**

Thank you for contacting me about your insurance needs. I am pleased to provide you with a quote from Progressive Preferred Insurance Company, a company that offers competitive rates and many outstanding services. Progressive gives unlimited online access to your policy information through www.progressive.com/renterspolicy. Claims service is available 24 hours a day, 7 days a week.

### Quote for 12 month policy period

Total policy premium \$285.35

### **Payment Plans**

| Payment Plan  | <b>Total Premium</b> | Down Payment | Payments |  |
|---|----------------------|--------------|----------|--|
| Full Payment  | \$285.35             |              |          |  |
| 2 Payment Option  |                      | \$156.94     | \$132.41 | A \$4.00 fee has been added to each payment installment. |
| 4 Payment Option  |                      | \$88.46      | \$69.63  | A \$4.00 fee has been added to each payment installment. |
| Automatic Electronic  | Funds Transfer (EF   | Γ): \$47.57  | \$25.78  | A \$2.00 fee has been added to each payment installment. |
| Make payments by mail or online at www.progressive.com/renterspolicy. |                      |              |          |  |

### To purchase this policy

Your rate is based on the information you provided. Please review your quote for accuracy; incomplete and inaccurate information could affect your rate. If you would like to purchase this policy or discuss coverage, please call me at (480) 245-5048. Thank you again for the opportunity to work with you.

No coverage is in effect at this time. All policies are subject to underwriting & eligibility guidelines in effect at the time of application. The final premium may differ from that shown above as a result of your credit-based insurance score and other factors obtained in the application.

Insured: MICHAEL WOLVER Policy ID: Q72162866

## **Progressive Coverage and Premium Discounts**

| Basic Coverages                          |           | Deductible(s) |
|--|-----------|---------------|
| Personal Property                        | \$20,000  | All Perils:   |
| Loss of Use                              | \$8,000   |               |
| Personal Liability - Each Occurrence     | \$300,000 |               |
| Medical Payments to Others - Each Person | \$5,000   | <b>D</b>      |

### **Additional Coverages Included**

## Deductible(s)

All Perils: \$500

#### **Discounts**

Package Policy Discount Progressive Auto 100/300 E-Policy (Paperless)