



For coverage limits and premiums, please refer to the Declarations Page and policies.

Automobile Coverage Summary

Insured Name and Address WENDY PEREZ 629 NW 179TH CIR EDMOND,OK 73012-4322

Coverage Summary Date 02/09/2024

Policy Number A7994999090

Policy Period 03/15/2024 - 03/15/2025

24/7 Claims Service
To report a claim, please contact us at:
1-800-854-6011

Policy Coverage and Limits

Coverage	Limit	Additional Coverages For a complete listing of coverages including limits and premiums, please refer to your Declarations Page
2018 JEEP GRAND CHEROKEE		Roadside Assistance
Coverages:		Custom Equipment Rental Car Reimbursment
Bodily Injury Liability	\$50,000/\$100,000	Identity Theft Resolution
Property Damage Liability	\$50,000	Mexico Coverage - Limited
Medical Expense	\$1,000	
Uninsured Motorists - Bodily Injury	\$25,000/\$50,000	
Deductibles:		
Comprehensive Deductible	\$1,000	
Collision Deductible	\$1,000	
2011 HONDA CR-V		Roadside Assistance
Coverages:		Custom Equipment
Bodily Injury Liability	\$50,000/\$100,000	Rental Car Reimbursment Identity Theft Resolution
Property Damage Liability	\$50,000	Mexico Coverage - Limited
Medical Expense	\$1,000	
Uninsured Motorists - Bodily Injury	\$25,000/\$50,000	
Deductibles:		
Comprehensive Deductible	\$500	
Collision Deductible	\$500	

Total Premium: \$3,830.55

This coverage summary does not constitute part of the insurance policy or binder of insurance and should not be construed to replace your Declarations Page or any provision of the policy itself. In the event of any conflict between the policy and this summary, the provisions of the policy should prevail. It is therefore important that you read your policy and your Declarations Page carefully for complete details. Our policies have exclusions, limitations, reductions of benefits, and terms under which the policies may be continued in force or discontinued. For complete details of the coverage, visit us online, click to chat, or contact the company.





Farmers

Farmers Casualty Insurance Company

700 Quaker Lane, Suite 300, Warwick, Rhode Island 02886

Automobile Insurance Declarations Page

Policy Number: A7994999090

Named Insured:

WENDY PEREZ

Mailing Address:

629 NW 179TH CIR

EDMOND, OK 73012-4322

Email address:

perez_wendy@hotmail.com

Renewal Effective Date: March 15, 2024

Payment Method: Bank Account

Policy Period: March 15, 2024 through March 15, 2025

at 12:01 a.m. standard time

Total Annual Premium

3,830.55

This Declarations Page does not supersede any cancellation or policy change notices you may have received.

2018 JEEP GRAND CHEROKEE

2011 HONDA CR-V

Discounts

Congratulations, with the discounts listed below, you saved a total of -\$ 1,652.53.

Discount availability varies by state. You may contact us to ensure you are receiving all discounts and savings that you qualify for.

The following policy discounts apply:

Bundle

Multi-Policy

The following driver discounts apply:

Good Driving

Length of Time at Current Residence

Payment Plan

Young Driver

Drivers

Name	Date of Birth	Marital Status	Age First Licensed	Driver Type
WENDY PEREZ	02/12/1976	Single	18	Rated
ALEXANDRA TOYOS PEREZ	02/09/2006	Single	16	Rated

Household Members

Name	Date of Birth	Driver Type
JOSE TOYOS	01/21/1966	Excluded



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Policy Level Coverages				
	Limits and/or Deductibles		Pr	emiums
Uninsured Motorists Bodily Injury	\$25,000 each person / \$50,0	000 each accident	\$	64.25
Identity Theft Resolution Mexico Coverage				Included Included
Vehicle Information and Cover	rages			
2018 JEEP GRAND CHEROKEE VIN: 1C4RJFBG1JC387790				
	Limits and/or Deductibles		Pre	emiums
Liability to Others	4400	oog aach accident	\$	328.37
Bodily Injury	\$50,000 each person / \$100	,000 each accident	\$	572.39
Property Damage	\$50,000 each accident		Ψ	3/2.38
Medical Expense	\$1,000 each person		\$	11.76
Physical Damage	Actual Cash Value	Deductible: \$1,000	\$	395.46
Comprehensive Collision	Actual Cash Value	Deductible: \$1,000	\$	749.61
Collision	Motival Guoti Falla			
•	parties as the company that had principle should be a force or other		\$	6.70
Roadside Assistance	\$200 each disablement		φ	6.79 Included
Custom Equipment	\$2,000 of equipment	***	•	
Rental Car Reimbursement	\$40 each day / \$1,200 each	accident.	\$	50.15
	· .		\$	2,114.53
Subtotal for Vehicle:	death the first		Ψ	2,117.55
2044 HONDA CR V		€.		
2011 HONDA CR-V VIN: 5J6RE4H5XBL032918	9 ,0 · • •	e stagen		
VIN: 5J6KE4H3ABL032910		7		
	, V'			
	Limits and/or Deductibles	G y.	Pre	emiums
		1 🐔		
Liability to Others Bodily Injury	\$50,000 each person / \$100,	.000 each accident	\$	321.84
Property Damage	\$50,000 each accident		\$	522.65
Topetty Damage	Anning among angularity	and the state of t	*	
Medical Expense	\$1,000 each person	And the state of t	\$	20.15
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Continued: Vehicle Information and Coverages

2011 HONDA CR-V				
	Limits and/or Deductibles		Pre	emiums
Physical Damage				
Comprehensive	Actual Cash Value	Deductible: \$500	\$	260.90
Collision	Actual Cash Value	Deductible: \$500	\$	469.24
Additional Coverages				
Roadside Assistance	\$200 each disablement		\$	6.84
Custom Equipment	\$2,000 of equipment			Included
Rental Car Reimbursement	\$40 each day / \$1,200 each	accident	\$	50.15
Subtotal for Vehicle:			\$	1,651.77
Total Annual Premium:			\$	3,830.55

Policy Forms and Endorsements

AD100K 0120 Auto Declarations Page	AP6300 0118 Auto Insurance Policy
AP6301 0118 Personal Auto Policy	AE400K 0120 Oklahoma Uninsured Motorists Coverage
AE700K 0120 Oklahoma Amendatory	AE75OK 0120 Oklahoma Termination Conditions
AE820K 0120 Oklahoma Named Driver Exclusion	AE9110 0118 Identity Theft Resolution
AE9200 0118 Mexico Coverage - Limited	AE9500 0118 Roadside Assistance
AE9600 0118 Rental Car Reimbursement	LE1000 0118 Single Loss Deductible
LE2000 0117 Additional Benefits	

Messages

A driver exclusion applies to your policy for JOSE TOYOS.

Your policy declarations, coverages, limits, deductibles, forms, and/or endorsements may have changed. You should carefully review your policy to assure yourself that you have purchased sufficient coverage from us. It is your responsibility to know and understand the amount of insurance you have purchased.

If you believe anything on this Declarations Page is incorrect, or if any of the information you provided us when you applied for this insurance has changed, please contact us. This is important information that is used to rate your policy and determine proper coverage.

The cost of any coverage indicated as "included" is included in the basic coverages premium amount.

If you have any questions, visit www.farmers.com/css/login. Through our website, you can service your personal account.

For policy questions, changes, billing or other customer service needs contact us at 405-848-6832.

Your representative is

MARY HUFFMAN J05FNY3 6110 NW 63RD ST

OKLAHOMA CITY OK 73132-7526

