

Underwritten by:
Progressive County Mutual Ins Co
November 21, 2022
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VICTORIA CHACON
18903 S LYFORD DR
KATY, TX 77449

Customer: Victoria Chacon

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	\$1,455.00
Paid in full discount	-220.00
Policy premium if paid in full	\$1,235.00

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 monthly payment (excluding the initial payment) includes an installment fee of \$4.00.

Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,309.00	\$218.22	5 monthly payments of \$222.16

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 **1-888-547-1451**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Drivers and household residents

The following are listed below:

- You and your spouse
- All household residents 15 years of age or older
- All regular drivers of the vehicles listed in this application
- All children who live away from home who drive these vehicles, even occasionally
- All persons who are titled owners of the listed vehicles, other than those who are not household members and do not operate any listed vehicle

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.

Victoria Chacon

Date of birth: Feb 16, 1971

Gender: Female

Marital status: Single

Relationship: Insured

Driver status: Rated

License type: Operator - Personal Auto

Education level: College degree

Occupation: Consultant

Total residents: 1

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

2016 JEEP COMPASS 4 DOOR WAGON

VIN: **1C4NJCBA4GD621612**

Garaging ZIP Code: 77449

Primary use of the vehicle: Commute

Annual miles: 8,000 - 9,999

Length of vehicle ownership when policy started or vehicle added: At least 3 years but less than 5 years

	Limits	Deductible	Premium
Liability to Others			\$628
Bodily Injury Liability	\$30,055 each person/\$60,055 each accident		
Property Damage Liability	\$25,055 each accident		
Personal Injury Protection	\$2,525 each person/each accident		73
Uninsured/Underinsured Motorist Bodily Injury	\$30,055 each person/\$60,055 each accident		148
Uninsured/Underinsured Property Damage	\$25,055 each accident	\$250	45
Comprehensive	Actual Cash Value	\$495	74
Collision	Actual Cash Value	\$495	289
Subtotal policy premium			\$1,257.00
Policy Fee			50.00
Motor Vehicle Crime Prevention Authority Fee			2.00
Total 6 month policy premium and fees			\$1,309.00

Premium discounts

Policy

Paperless, Home Owner and Electronic Funds Transfer (EFT)