OPENQUOTE INSURANCE 2429 BISSONNET #174 HOUSTON, TX 77005



JOHN KALUSKA 23835 VIA LEONI DR ROMAN FOREST, TX 77357 Underwritten by: Progressive County Mutual Ins Co December 13, 2022 Page 1 of 3

Customer: John Kaluska

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	\$1,088.00
Paid in full discount	-142.00
Policy premium if paid in full	\$946.00

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

Payment plans

The installment fees vary based on how you choose to pay. The recurring checking account option (also known as EFT) offers lower monthly installment fees than our other installment payment plans. Or you can avoid these fees altogether by paying for each policy period in full.

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 \$1.00.

Payment plan	Total premium	Initial payment	Payments	
6 Payments	\$1,005.00	\$167.55	5 monthly payments of \$168.50	
6 Payments	\$1,005.00	\$167.55	5 monthly payments of \$168.50	
6 Payments	\$1,005.00	\$201.00	5 monthly payments of \$161.80	
6 Payments	\$1,005.00	\$201.00	5 monthly payments of \$161.80	
6 Payments	\$1,005.00	\$251.25	5 monthly payments of \$151.75	
6 Payments	\$1,005.00	\$251.25	5 monthly payments of \$151.75	
5 Payments	\$1,005.00	\$301.50	4 monthly payments of \$176.88	

Automatic Payments by card assures that your payment is on time. Each monthly payment (excluding the initial payment) includes an installment fee of \$4.00. Each semimonthly payment (excluding the initial payment) includes an installment fee of \$2.00.



Payment plan	Total premium	Initial payment	Payments
6 Payments	\$1,005.00	\$167.55	5 monthly payments of \$171.50
6 Payments	\$1,005.00	\$167.55	5 monthly payments of \$171.50
6 Payments	\$1,005.00	\$201.00	5 monthly payments of \$164.80
6 Payments	\$1,005.00	\$201.00	5 monthly payments of \$164.80
6 Payments	\$1,005.00	\$251.25	5 monthly payments of \$154.75
6 Payments	\$1,005.00	\$251.25	5 monthly payments of \$154.75
5 Payments	\$1,005.00	\$301.50	4 monthly payments of \$179.88
12 Payments	\$1,005.00	\$83.83	11 semimonthly payments of \$85.75
12 Payments	\$1,005.00	\$100.50	11 semimonthly payments of \$84.23
12 Payments	\$1,005.00	\$125.63	11 semimonthly payments of \$81.95

Make payments by mail or at agent.progressive.com. Each monthly payment (excluding the initial payment) includes an installment fee of \$4.00.

Payment plan	Total premium	Initial payment	Payments	
6 Payments	\$1,088.00	\$181.38	5 monthly payments of \$185.33	
6 Payments	\$1,088.00	\$217.60	5 monthly payments of \$178.08	
6 Payments	\$1,088.00	\$272.00	5 monthly payments of \$167.20	
5 Payments	\$1.088.00	\$326.40	4 monthly payments of \$194.40	

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.

John Kaluska

Date of birth: Nov 29, 1952 Gender: Male
Marital status: Married Relationship: Insured

Driver status: Rated

License type: Operator - Personal Auto Education level: College degree Occupation: Retired (full-time)

FATIMA KALUSKA

Date of birth: Dec 12, 1958 Gender: Female

Marital status: Married Relationship: Spouse

Driver status: Rated

License type: Operator - Personal Auto



Education level: College degree

Occupation: Consultant
Total residents: 2

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.

2023 KIA SPORTAGE 4 DOOR WAGON

VIN: 5XYK6CAFXPG024029

Garaging ZIP Code: 77357

Primary use of the vehicle: Pleasure/Personal

Annual miles: 10,000 - 11,999

Length of vehicle ownership when policy started or vehicle added: Less than 1 month

	Limits	Deductible	Premium
Liability to Others			\$166
Bodily Injury Liability	\$250,055 each person/\$500,055 each accident		
Property Damage Liability	\$100,055 each accident		
Uninsured/Underinsured Motorist Bodily Injury	\$100,055 each person/\$300,055 each accident		38
Uninsured/Underinsured Property Damage	\$50,055 each accident	\$250	24
Comprehensive	Actual Cash Value	\$495	61
Collision	Actual Cash Value	\$495	127
Rental Reimbursement	up to \$40 each day/maximum 30 days		20
Total premium for 2023 KIA			\$436

2020 KIA TELLURIDE 4 DOOR WAGON

VIN: **5XYP54HC4LG086739**

Garaging ZIP Code: 77357

Primary use of the vehicle: Pleasure/Personal

Annual miles: 10,000 - 11,999

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

	Limits	Deductible	Premium
Liability to Others			\$164
Bodily Injury Liability	\$250,055 each person/\$500,055 each accident		
Property Damage Liability	\$100,055 each accident		
Uninsured/Underinsured Motorist Bodily Injury	\$100,055 each person/\$300,055 each accident		58
Uninsured/Underinsured Property Damage	\$50,055 each accident	\$250	22
Comprehensive	Actual Cash Value	\$495	78
Collision	Actual Cash Value	\$495	117
Rental Reimbursement	up to \$40 each day/maximum 30 days		17
Total premium for 2020 KIA			\$456
Subtotal policy premium			\$892.00
Policy Fee			50.00
Motor Vehicle Crime Prevention Authority Fee			4.00
Total 6 month policy premium, with paid	in full discount and fees		\$946.00

Premium discounts

Policy

Multi-Policy, Three-Year Safe Driving, Paid in Full, Continuous Insurance: Gold, Paperless, Home Owner, Multi-Car, Agency Package and Five-Year Accident Free