

All Systems Roofing LLC  
 400 18TH ST APT J8  
 VERO BEACH, FL 32960

Underwritten by:  
 Progressive Express Ins Company  
 December 9, 2024  
 Policy Period: Dec 9, 2024 - Dec 9, 2025  
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 Customer Phone number: 1- - -

## Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through [agent.progressive.com](http://agent.progressive.com), your customized website. Claims service is available 24 hours a day, 7 days a week.

### Policy information

Business: Roofing Contractor

### Quote for 12 month policy period

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

Total policy premium	\$19,247.00
Paid in full discount	-3298.00
Policy premium if paid in full	\$15,949.00

### Payment plans

**Electronic Funds Transfer (EFT)** assures that your payment is on time. Each payment includes a \$1.00 service charge.

Payment plan	Total premium	Initial payment	Payments
11 Payments, 9.09% Down	\$18,221.00	\$1,674.47	9 payments of \$1,655.66 and 1 of \$1,655.59
10 Payments, 10.0% Down	\$18,221.00	\$1,840.10	9 payments of \$1,821.10
11 Payments, 12.50% Down	\$18,221.00	\$2,295.13	9 payments of \$1,593.59 and 1 of \$1,593.56
11 Payments, 16.67% Down	\$18,221.00	\$3,054.11	9 payments of \$1,517.69 and 1 of \$1,517.68
10 Payments, 20.0% Down	\$18,221.00	\$3,660.20	8 payments of \$1,618.87 and 1 of \$1,618.84
6 Pay, Seasonal, 20.0% Down	\$18,221.00	\$3,660.20	5 payments of \$2,913.16
10 Payments, 25.0% Down	\$18,221.00	\$4,570.25	9 payments of \$1,517.75
4 Pay, Seasonal, 25.0% Down	\$18,221.00	\$4,570.25	3 payments of \$4,551.25
3 Payments, 40.0% Down	\$18,221.00	\$7,300.40	2 payments of \$5,461.30
2 Payments, 50.0% Down	\$18,221.00	\$9,120.50	1 payments of \$9,101.50

**Make payments by mail** or at [agent.progressive.com](http://agent.progressive.com). Each payment includes a \$3.00 service charge.

Payment plan	Total premium	Initial payment	Payments
1 Payment	\$15,949.00	\$15,949.00	None
11 Payments, 9.09% Down	\$19,247.00	\$1,767.74	9 payments of \$1,750.93 and 1 of \$1,750.89
10 Payments, 10.0% Down	\$19,247.00	\$1,942.70	9 payments of \$1,925.70

11 Payments, 12.50% Down	\$19,247.00	\$2,423.38	9 payments of \$1,685.37 and 1 of \$1,685.29
11 Payments, 16.67% Down	\$19,247.00	\$3,225.14	9 payments of \$1,605.19 and 1 of \$1,605.15
11 Payments, 20.0% Down	\$19,247.00	\$3,865.40	10 payments of \$1,541.16
10 Payments, 20.0% Down	\$19,247.00	\$3,865.40	8 payments of \$1,712.07 and 1 of \$1,712.04
6 Pay, Seasonal, 20.0% Down	\$19,247.00	\$3,865.40	5 payments of \$3,079.32
10 Payments, 25.0% Down	\$19,247.00	\$4,826.75	9 payments of \$1,605.25
4 Pay, Seasonal, 25.0% Down	\$19,247.00	\$4,826.75	3 payments of \$4,809.75
4 Pay, Quarterly, 25.0% Down	\$19,247.00	\$4,826.75	3 payments of \$4,809.75
3 Payments, 40.0% Down	\$19,247.00	\$7,710.80	2 payments of \$5,771.10
2 Payments, 50.0% Down	\$19,247.00	\$9,633.50	1 payment of \$9,616.50

### 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 **1-772-467-6656**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

### Rated drivers

The insured declares that no persons other than those listed in this application are expected to operate, even occasionally, the vehicle(s) described in this application.

Name	Date of Birth	Points	Additional information
Robert W Moore	03/01/1963	0	
Robert W Moore Jr	10/06/1990	0	
Hunter T Moore	10/28/2000	0	

### 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.

Description	Limits	Deductible	Premium
Liability To Others			\$13,002
Bodily Injury and Property Damage Liability	\$500,000 combined single limit		
Uninsured Motorist - Nonstacked	\$500,000 combined single limit		2,158
Basic Personal Injury Protection			368
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Medical Payments	\$5,000 each person		91
Comprehensive			1,066
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			1,372
See Auto Coverage Schedule	Limit of liability less deductible		
Rental Reimbursement			144
See Auto Coverage Schedule			
<b>Subtotal policy premium</b>			<b>\$18,201</b>
Additional Insured Fee			20
<b>Total 12 month policy premium and fees</b>			<b>\$18,221</b>

## Auto coverage schedule

1. **2020 RAM 2500** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
VIN: **3C6TR5EJ6LG102203** Garaging Zip Code: 32960 Radius: 200 miles  
Personal use: N Body type: Pickup Truck

Liability Premium	Liability Premium	UM Premium	PIP Premium	Med Pay Premium	
\$6290	\$1079	\$179	\$45		
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
\$1,000	\$611	\$1,000	\$577		
Other Coverages Premium	Rental Limit	Rental Premium			Auto Total
\$50 per day Max \$1,500	\$72				<b>\$8,853</b>

2. **2021 RAM 2500** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
VIN: **3C6UR5HJ8MG629791** Garaging Zip Code: 32960 Radius: 200 miles  
Personal use: N Body type: Pickup Truck

Liability Premium	Liability Premium	UM Premium	PIP Premium	Med Pay Premium	
\$6416	\$1079	\$179	\$46		
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	
\$1,000	\$289	\$1,000	\$607		
Other Coverages Premium	Rental Limit	Rental Premium			Auto Total
\$50 per day Max \$1,500	\$72				<b>\$8,688</b>

3. **2024 Big Tex Trailer** Stated Amount: \* \$14,500 (including Permanently Attached Equip)  
VIN: **16V1D1920R5324766** Garaging Zip Code: 32960 Radius: 200 miles  
Personal use: N Body type: Utility Trailer

Liability Premium	Liability Premium	PIP Premium			
\$148	\$5				
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
\$500	\$87	\$500	\$98		<b>\$338</b>

4. **2021 Red Rock Trailer Trailer** Stated Amount: \* \$13,000 (including Permanently Attached Equip)  
VIN: **7H2BE1215MD031303** Garaging Zip Code: 32960 Radius: 200 miles  
Personal use: N Body type: Utility Trailer

Liability Premium	Liability Premium	PIP Premium			
\$148	\$5				
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
\$500	\$79	\$500	\$90		<b>\$322</b>

\*A vehicle's stated amount should indicate its current retail value, including any special or permanently attached equipment. In the event of a total loss, the maximum amount payable is the lesser of the Stated Amount or Actual Cash Value, less deductible. Be sure to check stated amount at every renewal in order to receive the best value from your Progressive Commercial Auto policy.

## Premium discounts

Policy

Electronic Funds Transfer and Multi-Product

Vehicle

2020 RAM 2500

Anti-Lock Brakes, Airbag and Anti-Theft Device Standard

2021 RAM 2500

Anti-Lock Brakes, Airbag and Anti-Theft Device Standard

Form QUOTE FL (11/20)