

# **Automobile Insurance Application Nationwide Property and Casualty**

(Not to be construed as a valid contract)

Policy Number: 7205J 083398	Effective: 08/01/2022 at 12:01:00 AM Eastern		<b>Expiration:</b> 08/01/2023			
	or upon receipt of premium by	y company whichever is later				
Product Type: Personal Auto	Territory: 430	Fire/Tax Code:				
Primary Named Insured: Michael Plegge	Primary Named Insured: Michael Plegge					
Secondary Named Insured:						
Phone: 7191112222 E-mail: mrpcos6770@outlook.com						
Mailing Address: 4267 QUARTZITE PL		City: COLORADO SPRINGS	State: CO	<b>Zip:</b> 80938-9611		

In all sections of application, please provide a YES or NO response or provide complete answers, where appropriate.

# **DRIVER AND HOUSEHOLD INFORMATION**

Fill in or check appropriate areas. List all licensed persons who have access to the vehicle(s) and list all licensed household members.

	Driver 1	Driver 2	Driver 3	Driver 4	Driver 5	Driver 6
Name	Michael Plegge					
Date Of Birth	XX/XX/1959					
Gender	Male					
Marital Status	Single					
Social Security Number						
Driver License Number	003XXXXXXX					
License State	CO					
Relationship	Named Insured					
Driver Type	Driver					
Reason Excluded						

### NON LICENSED RESIDENTS

Applicant disclosed no Non Licensed Residents

# ACCIDENTS/VIOLATIONS/CLAIMS HISTORY

Have you, any licensed driver in your household, or any operators of your vehicle(s) had any accidents (at-fault or not-at-fault), violations, or filed any claims during the past 5 years?

Ciallis during the past 3 years:					
Driver Name Date of Occurrence Date of Conviction Description Violation/Accident Code					
Michael Plegge	June 19, 2019	June 19, 2019	Damage to Property Over Threshold	002	

How many claims to an insurer have you or any operators of your vehicle(s) submitted in the last 35 months for damage to your	,
auto other than collision (comprehensive) / unattended collision losses (e.g. theft, vandalism, glass, etc.)? Does not include	1
Roadside Assistance.	

Policy Number: 7205J 083398



	VEHICLE AND COVERAGE INFORMATION					
	Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4		
Vehicle Type	Private Passenger					
Vehicle Identification Number	2HKRW2H85HH633653					
Model Year	2017					
Make	HOND					
Model	CR-V EX					
Sub Type						
Cost New						
Vehicle Use	Pleasure					
Custom Equipment						
Description	None					
Amount	\$3,000.00					
Titled Owner(s)						
Damage to your Auto other than	279					
Collision (Comprehensive) Rate						
Symbol						
Collision Rate Symbol	293					
Bodily Injury Rate Symbol	184					
Property Damage Rate Symbol	198					
Medical Payments Rate Symbol	178					
Salvaged/Rebuilt Title						

# **VEHICLE LEVEL COVERAGES**

	Selected	Premium	Selected	Premium	Selected	Premium	Selected	Premium
Damage To Your Auto								
Other Than Collision (Comprehensive)	250 Deductible	\$286.26						
With OEM	Not Chosen	\$0.00						
With Safety Glass	Not Chosen	\$0.00						
Collision - Actual Cash Value	250 Deductible	\$450.56						
With OEM	Not Chosen	\$0.00						
Property Damage Per Occurrence	100,000	\$192.54						
Bodily Injury Per Person/Per Occurrence	250/500	\$360.98						
Medical Payments Per Person	10,000	\$78.06						
Uninsured Motorists Property Damage Per Occurrence	Not Chosen	\$0.00						
Rental Reimbursement Per Day/Total	Not Chosen	\$0.00						
Custom Equipment	3,000	Included						
Extended Non-Owned	Not Applicable	\$0.00						
GAP Coverage	Not Applicable	\$0.00						
New Car Replacement Plus	Not Applicable	\$0.00						
Vehicle Premium		\$1,368.40						

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#### TRAILER AND COVERAGE INFORMATION

Applicant disclosed no trailers.

#### **POLICY LEVEL COVERAGES**

	Selected	Premium
Identity Theft	Not Chosen	\$0.00
Accident Forgiveness Feature	Not Chosen	\$0.00
Minor Violation Forgiveness	Not Chosen	\$0.00
Feature		
Vanishing Deductible Feature	Not Chosen	\$0.00
Total Loss Deductible Waiver	Not Chosen	\$0.00
Feature		
Roadside Assistance	Not Chosen	\$0.00
Uninsured Motorists Bodily Injury	250/500	\$320.70
Policy Level Premium		\$320.70

# **DISCOUNTS**

		$\overline{}$
Discount Name	Advance Quote, Easy Pay, Home and Car, Paperless Policy, Passive Restraint, Select	

#### **SURCHARGES**

No surcharges applied.

#### FINANCIAL RESPONSIBILITY

No financial responsibility filing was disclosed.

# THIRD PARTY INFORMATION

No Third Party details disclosed.

## **PAYMENT INFORMATION**

Total Vehicle Premiums:	Applicable Fees/Taxes:	Policy Coverage Premium:	Total Policy Premium:	Amount Collected:
<b>\$</b> 1,368.40	\$1.00	\$320.70	<b>\$</b> 1,690.10	See Receipt

# **NOTICE - AUTO LIABILITY COVERAGES**

Read your policy. The policy of insurance for which this application is being made, if issued, may be canceled without cause at the option of the insurer at any time in the first 59 days during which it is in effect and at any time thereafter for reasons stated in the policy.

Policy Number: 7205J 083398



#### **CLOSING STATEMENT**

I have received and read a copy of the "Nationwide Insurance Privacy Statement" as required by the Fair Credit Reporting Act. By submitting this application, I am applying for issuance of a policy of insurance and, at its expiration, for appropriate renewal policies issued by Nationwide Mutual Insurance Company and/or other members of the Nationwide group of insurance companies. I understand and agree that any information about me that is contained in, or that is obtained in connection with, this application or any policy issued to me may be used by any company within the Nationwide group to issue, review, and renew the insurance for which I am applying.

I understand that misrepresentation of information on this application could void some or all of my coverages.

I hereby authorize Nationwide Mutual Insurance Company and/or other members of the Nationwide group of insurance companies to obtain copies of consumer reports, to include but not limited to motor vehicle reports, consumer credit reports and/or credit scores, and claims loss history reports for use in rating and/or underwriting of my insurance. I understand that in obtaining these reports, a consumer reporting agency may be used. I hereby certify that the named drivers under this policy have authorized me to consent on their behalf for the insurer to obtain consumer reports for rating and/or underwriting. This certification of authorization would also apply to any drivers not named under the policy who, now or in the future, reside in the household or have regular and frequent access to the vehicle(s) to be insured under the policy.

I understand the quoted prices should not be considered final and are subject to change if the information provided by any source is inaccurate or incomplete. This quote is based on the rates in effect as of the date of this application, and is subject to change if the rates are revised by Nationwide prior to this date.

By submitting this application to Nationwide, I hereby attest and warrant that I have read and understand all of the questions posed and the answers provided herein are true and correct. I understand that these questions are being asked for the purpose(s) of providing me and my household with automobile insurance coverage and that my answers will be relied upon by Nationwide for that purpose. I further understand that before any coverage can or will be bound by Nationwide, I must comply with all of the following conditions precedent: 1) All vehicles to be insured on this policy requiring an inspection must have been provided to Nationwide for inspection within 72 hours of this application; 2) I must have paid the premium amount, in full, as indicated/requested by Nationwide and/or its agent. No coverage will be provided or bound by Nationwide until all conditions precedent are satisfied/completed. Should any part of the premium payment I pay to Nationwide be dishonored by any financial institution, for any reason, I understand that the policy will be considered as void from the inception and that it will be as if no policy ever existed. I also understand that it is my obligation and duty to notify Nationwide of any change in address or change in drivers or driver status within 30 days of such a change.

I understand that the coverages and limits indicated on my application are those I have selected. I further understand and agree that the selected coverages and limits shall apply on all future renewals of the policy and on future policies issued to me because of a change in vehicle or coverage, unless I subsequently request a change, in writing if required.

For the purpose of definitions in this application, "member of household" and "household member" include, but are not limited to individuals who reside in the same home, apartment, dwelling, premises and/or residence, whether or not said individuals be related by blood, adoption or marriage, or unrelated.

Failure to disclose a driver or member of the household will be considered material misrepresentation and may constitute grounds for denial or voiding of coverage.

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

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# Affirmation Statements - Applicant must warrant with his/her signature that the following statements are true and accurate as indicated on the application:

All operators and drivers who may operate the vehicle(s) identified in this application or may have access to the vehicle(s) for the purpose of operating and/or driving the vehicle(s) and all persons residing at the address listed on this application and at the garaging address(es) of said vehicle(s), have been disclosed and listed on this or another Nationwide application, with the exception of resident parents or grandparents insured with a company other than Nationwide.

I certify that I am the owner/lessee of the listed vehicle(s) and these vehicles are not owned or leased (fully or partially) by any other individuals, except as disclosed on this application.

I certify that I, any member of my household, or any operators of the vehicles listed on this application have not been convicted of an insurance related offense (not including accidents or moving violations).

I represent that the vehicle(s) listed for coverage on this policy do not have a title branded as salvage or re-built salvage. (except where noted to be different on same application)

I certify that the vehicles listed for coverage on this policy are not used for commercial use, Transportation Network Company related activity, the pick up and delivery of goods or people, which include but is not limited to pizza, mail, newspapers, taxi, debris/snow removal, for hire or fee.

I understand that vehicles not titled to the named insured or lessee as indicated on this application will be excluded from coverage to the extent allowed by the auto insurance contract.

All existing damage to the vehicle(s) indicated on the application has been disclosed and listed on the application.

I certify the garaging address for the vehicle(s) indicated on this application is the same as the mailing address listed on this application (except where noted to be different on same application).

I certify that the vehicles listed for coverage on this policy will not be entered in any racing events or speed contests.

	Date:	Time:	
Signature of Applicant			
	Date:	Time:	
Signature of Parent or Legal Guardian			
(if Applicant is under 18 years of age)			

Agent Name : JASON ANDREW HAMSTRA

Agent Address : 4121 BEECHWOOD DR, GREENSBORO NC 27410-8118

 Agent Phone Number
 : 1.8642861373

 Agent (Producer) No./ID
 : 00065116 - 002

Policy Number: 7205J 083398



FACTS	WHAT DOES NATIONWIDE DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal and state laws give consumers the right to limit some but not all sharing. Federal and state laws also require us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include:  • Social Security number and income  • Account balances, transaction history, and credit history  • Assets and insurance claim history
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Nationwide chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Nationwide share?	Can you limit this sharing?
For our everyday business purposes — such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes — to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes — information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes — information about your creditworthiness	Yes	Yes
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	No	We don't share

To limit our sharing	Call 1-866-280-1809 - our menu will prompt you through your choices.  Please have your account or policy number handy when you call.
	Please note:
	If you are a <i>new</i> customer, we can begin sharing your information 30 days from the date we sent this notice. When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.
	However, you can contact us at any time to limit our sharing. If you have previously opted out, your request remains on file and you do not need to opt out again.
Questions?	Call 1-866-280-1809 or go to <u>nationwide.com</u>

Who we are			
Who is providing this notice?	Nationwide Mutual Insurance Company, Nationwide Mutual Fire Insurance Company, Crestbrook Insurance Company, Scottsdale Insurance Company, National Casualty Company, Nationwide Agribusiness, and the Nationwide Family of Property & Casualty Companies		
What we do			
How does Nationwide protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal and state laws. These measures include computer safeguards and secured files and buildings. We limit access to your information to those who need it to do their job.		
How does Nationwide collect my personal information?	We collect your personal information, for example, when you     apply for insurance or give us your contact information     pay your insurance premiums or file an insurance claim     show your drivers' license We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.		
Why can't I limit all sharing?	<ul> <li>Federal and state laws give you the right to limit only</li> <li>sharing for affiliates' everyday business purposes—information about your creditworthiness</li> <li>affiliates from using your information to market to you</li> <li>sharing for nonaffiliates to market to you</li> <li>State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.</li> </ul>		
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account.		
Definitions			
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. Our affiliates include Nationwide Life Insurance Company and Nationwide Financial Services, Inc. Visit <a href="mailto:nationwide.com">nationwide.com</a> for a list of affiliated companies.		
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. Nationwide does not share with nonaffiliates so they can market to you.		
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. Our joint marketing partners include financial service companies.		
Other Important Information			

**Nevada Residents**: You may request to be placed on our internal Do Not Call list. Send an email with your phone number to privacy@nationwide.com. You may request a copy of our telemarketing practices. For more on this Nevada law, contact Bureau of Consumer Protection, Office of the Nevada Attorney General, 555 E. Washington St., Suite 3900, Las Vegas, NV 89101; phone number: 1-702-486-3132; email: BCPINFO@ag.state.nv.us.

**For Vermont Customers:** We will not disclose information about your creditworthiness to our affiliates and will not disclose your personal information, financial information, credit report, or health information to nonaffiliated third parties to market to you, other than as permitted by Vermont law, unless you authorize us to make those disclosures.

For insurance customers in AZ, CT, GA, IL, ME, MA, MT, NV, NJ, NM, NC, ND, OH, OR, and VA only: The term "Information" means information we collect during an insurance transaction. We will not use your medical information for marketing purposes without your consent. We may share your Information with nonaffiliates without your prior authorization as permitted or required by law. We may share your Information with insurance regulatory authorities, law enforcement, and consumer reporting agencies. Information we obtain from a report prepared by an insurance-support organization may be retained by that insurance-support organization and disclosed to others.

To request access to or deletion of your personal information, send a written notarized letter to: Nationwide, 1000 Yard Street GH-2D-OCA1, Columbus, OH 43212. Include your name, address, and your policy, contract, or account number, and describe the information you wish to access or delete. You may correct inaccurate personal information by visiting nationwide.com or calling your agent. We can't change information other companies, like credit agencies, provide to us. You'll need to ask them to change it.

## IMPORTANT NOTICE



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# PRIVATE PASSENGER AUTOMOBILE INSURANCE SUMMARY DISCLOSURE FORM — COLORADO

This summary disclosure form is a basic guide to the major coverages and exclusions in your policy. It is a general description. It is not a policy of any kind. All coverage is subject to the terms, conditions, and exclusions of your policy and all applicable endorsements.

# PLEASE READ YOUR POLICY FOR COMPLETE DETAILS. THIS SUMMARY DISCLOSURE FORM SHALL NOT BE CONSTRUED TO REPLACE ANY PROVISION OF THE POLICY ITSELF.

Complete details include, but are not limited to, information on the method we use to calculate your unearned premium (e.g., pro rata or short rate), if you should cancel your policy before the next renewal. This summary disclosure form also provides some of the factors considered for cancellation, nonrenewal and increase-in-premium. These factors are general in nature. They do not represent the only reasons a policy may be cancelled or changed.

Please contact us or your agent for further information.

Unless you have purchased the appropriate endorsement, your policy excludes coverage for livery conveyance. If you are a driver for a transportation network company please verify you have purchased appropriate coverage.

# REQUIRED COVERAGE — Liability

Colorado law requires you to have liability coverage on your automobile. This coverage pays bodily injury to another person and property damage to another's property that are the result of an accident in which you are found to be at fault.

Coverage is not provided for any automobile owned by you or a resident relative that is not insured for liability under your policy. There is no coverage for intentional acts.

Please read your policy for other conditions and exclusions.

#### OTHER COVERAGES

# A. Uninsured and Underinsured Motorist Coverage

Uninsured and underinsured motorist coverage will be included in your policy unless you reject it in writing.

<u>Uninsured Motorist</u> coverage pays for your bodily injury damages that are the result of a not at fault accident with an uninsured or hit and run driver.

<u>Underinsured Motorist</u> coverage pays for your bodily injury damages that are the result of a not at fault accident with an underinsured driver. A motorist is considered underinsured if his or her liability coverage is not enough to pay the full amount you are legally allowed to recover as damages.

Please read your policy for other conditions and exclusions.



# B. Physical Damage Coverage — Collision and Comprehensive

You must be offered collision coverage.

<u>Collision</u> coverage pays for damage to your own automobile when it collides with another automobile or object. It also pays if your automobile overturns.

<u>Comprehensive</u> coverage pays for damage to your automobile from causes such as fire, theft, vandalism, hail, and falling objects.

Collision and comprehensive coverage may be written with a deductible. A deductible is that part of a loss you will pay. We will pay the balance of covered repairs subject to your policy provisions. A lender may require you purchase both collision and comprehensive coverage.

Unless you have purchased the appropriate endorsement, coverage does not apply to losses that occur while your automobile is rented or leased to others. There is no coverage for wear, tear, freezing, mechanical failure or breakdown, or road damage to tires.

Please read your policy for other conditions and exclusions.

# C. Medical Payments Coverage

Medical payments coverage of \$5,000 will be included in your policy unless you reject it. You may reject the coverage in writing or in the same method in which you applied for the policy.

Medical payments coverage is not required to be offered on motorcycles, low-power scooters, off-road vehicles or other miscellaneous vehicles.

Medical payments coverage pays for you and your passengers reasonable health care expenses incurred for bodily injury caused by an automobile accident.

If you are in an automobile accident, your medical payments coverage will pay before your health insurance coverage.

Medical payments coverage will apply toward health insurance coverage coinsurance or deductible amounts.

We must prioritize the payment of your benefits in a manner consistent with Colorado insurance law.

Injuries to you that are the result of an at-fault accident will not be paid, under an automobile insurance policy, unless medical payments coverage is purchased.

Please read your policy for other conditions and exclusions.

# D. Uninsured Motorist Property Damage Coverage

This coverage pays for damages to your automobile caused by an at-fault owner of an uninsured automobile.

This is an optional coverage you can request if you do not have collision coverage on your automobile.

This coverage will not apply if the automobiles do not make physical contact.

This coverage only pays actual cash value of your automobile or cost of repair or replacement, whichever is less.

Please read your policy for other conditions and exclusions.



# CANCELLATION, NONRENEWAL AND INCREASE IN PREMIUM

#### A. Cancellation

During the first 59 days we may cancel your policy for any reason not prohibited by law. After your policy has been in effect for more than 59 days, we may cancel your policy for any of the following reasons:

- 1. Nonpayment of policy premium; or
- 2. Knowingly making a false statement on your application for automobile insurance; or
- **3.** A driver's license suspension or revocation; or
- 4. Knowingly and willfully making a false material statement on a claim under the policy.

#### B. Nonrenewal

We may choose to non-renew your policy. Some examples of reasons for nonrenewal include, but are not limited to:

- 1. An unacceptable number of traffic convictions;
- 2. An unacceptable number of at-fault accidents; or
- 3. Conviction of a major violation such as drunk driving or reckless driving.

# C. Increase in Premium

We may increase your premiums. Some examples of reasons for increased premium include, but are not limited to:

- 1. Change of garage location of the automobile;
- 2. Change of automobile(s) insured;
- 3. Addition of a driver;
- 4. Change in use of your automobile;
- **5.** A general rate increase. This results from the loss experience of a large group of policyholders rather than from a single policyholder. A general rate increase applies to everyone in the group, not just those who had a loss.

The above list of reasons is not all inclusive. There may be other changes that result in an increased premium.

We may add a surcharge or remove a discount because of an at-fault accident or traffic conviction. Under this circumstance you will receive a notice of your statutory right to file a complaint with the Colorado Division of Insurance.



# IMPORTANT INSURANCE INFORMATION

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# **CREDIT DISCLOSURE**

We have ordered your credit history from a consumer reporting agency for use in determining an insurance score. This insurance score will be used to underwrite and/or rate your insurance policy. Our inquiry will not affect your credit history in any way.

We are committed to respecting your privacy and safeguarding your personal information.



# JASON ANDREW HAMSTRA 4121 BEECHWOOD DR GREENSBORO, NC 27410-8118 1.8642861373

# **Auto Policy Binder**

Policy Number: 7205J 083398 Policy Effective Date: 08/01/2022 Policy Holder: Michael Plegge Policy Expiration Date: 08/01/2023

The undersigned company agrees to extend the following coverages as respects the described automobile for a period of 30 days from the effective date indicated, pending the issuance of an automobile insurance policy. This extension of insurance shall be in accordance with the terms of the company's auto insurance policies and manual of rates and classifications applicable in the state on the effective date of this agreement. This agreement may be canceled by the company by mailing written notice to the policyholder stating when in accordance with any statutes or policy terms such cancellation shall be effective.

# **Nationwide Property and Casualty**

Vehicle 1 2017 HOND CR-V EX 2HKRW2H85HH633653

Damage To Your Auto	
Other Than Collision(Comprehensive)	250 Deductible
Collision	250 Deductible
Property Damage	100,000
Bodily Injury	250/500
Medical Payments	10,000
Uninsured Motorists Property Damage	Not Chosen
Rental Reimbursement	Not Chosen
Custom Equipment	3,000
GAP Coverage	Not Applicable
New Car Replacement Plus	Not Applicable

#### **Policy Coverages**

Not Chosen
Not Chosen
250/500

Michael Plegge 4267 QUARTZITE PL COLORADO SPRINGS, CO 80938-9611 JASON ANDREW
Date: 07/19/2022
HAMSTRA
4121 BEECHWOOD DR
GREENSBORO, NC 27410-8118
For questions about your policy, call your
Nationwide Agent,
JASON ANDREW HAMSTRA at
1.8642861373



# Your Insurance Identification Card

Please detach your insurance card on the dotted lines, fold in center and place in your vehicle. If you lose your card or have any questions about its use, contact your Nationwide Agent.

Cut Here



Nationwide<sup>®</sup>

Nationwide's On Your Side® Claims Guarantee means fast and fair handling of your claim.

# 24 Hour Claims 1.800.421.3535

Cut Here

Report Claims anytime, anywhere in the U.S.A.

When calling, please give these details:

- 1. Policy number and zip code
- 2. Make and model year
- 3. Location of accident, injuries and damages
- 4. Other vehicle and persons involved

For Billing Questions or to file a Claim, visit nationwide.com For questions about your policy, call your Nationwide Agent, JASON ANDREW HAMSTRA at 1-800-282-1446



#### Colorado Insurance Nationwide® **Identification Card**

Policy Number Effective Date **Expiration Date** 7205J 083398 Aug 1, 2022 Aug 1, 2023

Year Make/Model Vehicle Identification Number HOND/CR-V EX 2HKRW2H85HH633653 2017

## 24 Hour Claims 1.800.421.3535

See the reverse side for more information.

Michael Plegge

Driver(s) Michael Plegge

Colorado Law requires evidence of motor vehicle insurance. This card meets this requirement and is satisfactory evidence if you are asked by an officer for evidence of a complying policy.

Nationwide Property and Casualty

PO Box 8379

Canton, OH 44711-8379 NAIC Number: 37877



### Colorado Insurance **Identification Card**

Policy Number Effective Date **Expiration Date** 7205J 083398 Aug 1, 2022 Aug 1, 2023

Make/Model Vehicle Identification Number 2017 HOND/CR-V EX 2HKRW2H85HH633653

# 24 Hour Claims 1.800.421.3535

See the reverse side for more information.

Michael Plegge

#### Driver(s)

Michael Plegge

Colorado Law requires evidence of motor vehicle insurance. This card meets this requirement and is satisfactory evidence if you are asked by an officer for evidence of a complying policy.

Nationwide Property and Casualty

PO Box 8379

Canton, OH 44711-8379 NAIC Number: 37877



Nationwide's On Your Side® Nationwide<sup>®</sup> Claims Guarantee means fast and fair handling of your claim.

# 24 Hour Claims 1.800.421.3535

Report Claims anytime, anywhere in the U.S.A.

When calling, please give these details:

- 1. Policy number and zip code
- 2. Make and model year
- Location of accident, injuries and damages
- 4. Other vehicle and persons involved

For Billing Questions or to file a Claim, visit nationwide.com For questions about your policy, call your Nationwide Agent, JASON ANDREW HAMSTRA at 1-800-282-1446

Cut Here

No person shall operate a motor vehicle on the public highways of Colorado without a complying policy in full force and effect. When an accident occurs, or when requested to do so following any lawful traffic contact or during any traffic investigation by a peace officer, no owner or operator of a motor vehicle shall fail to present to the requesting officer immediate evidence of a complying policy.



# RECURRING ELECTRONIC FUNDS TRANSFER AUTHORIZATION

Date Prepared: July 19, 2022

MICHAEL PLEGGE 4267 QUARTZITE PL COLORADO SPRINGS, CO 80938-9611

# Electronic payment authorization

By signing this agreement, you authorize Nationwide Mutual Insurance Company, or any of its subsidiary and affiliated companies, to electronically deduct your premium payment(s) from the bank account listed on the reverse side, as allowed by U.S. law. This authorization covers all policies listed below and those changed or added as explained on the reverse side of this agreement.

# What to expect

Your installment payment debit(s) will occur no earlier than the due date listed on your billing statement. This authorization also allows us to electronically credit (and/or correct by electronic debit) any refund or payment that may be due to you to the same bank account below, unless you indicate otherwise.

## About this payment method

- \* Possible fees If our debit request for your payment is declined, a fee may be charged. Signing this form gives us authorization to electronically deduct a **one-time** fee from your account for the declined payment in an amount as permitted by your state Department of Insurance. If this fee is unpaid, your policy may be cancelled. In that event, you will receive separate notice of cancellation in accordance with applicable state law.
- \* Declined payments If our debit request for your payment is declined, your recurring electronic funds transfer payment method may be temporarily or permanently discontinued, which may result in a lapse or cancellation of your policy. If one or more of your electronic payments is declined, please contact us right away to arrange for a timely payment alternative.
- \* Viewing your bill You can access your bill through your online account at www.nationwide.com. If you don't have an online account, it's easy to sign up at www.nationwide.com using your account number. We also recommend you keep an electronic or printed copy of your bill for your personal records.
- \* Stopping automatic payments Your authorization allows us to continue taking premium payments from this account, or making deposits to it, until you tell us to stop. To withdraw/cancel your authorization, you must notify us by calling the phone number below.

**Please notify us 10 days in advance of when our authorization should end.** Doing so allows us and your bank to take action.

**Note:** If for any reason your payment changes, we'll notify you by emailing or sending you an updated summary on your statement.

#### What you need to do

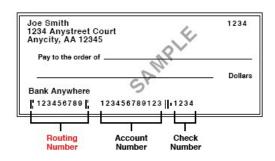
Please sign and submit this authorization form and retain a copy for your records.

If you have questions, please contact JASON ANDREW HAMSTRA at 1-800-282-1446. Please keep a copy of this agreement for your records.

#### **Account information**

Insuring companies for account 7268450915 are as follows:

Policy number	Policy type	Insuring company
7205J 083398	Auto	Nationwide Property and Casualty



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Name (print):	
Account holder signature:	Date:
Name (print):	
Joint account holder signature:	Date:

**Note:** If this account is a joint account, authorization by one account owner constitutes authorization by all account owners - whether a current owner of this account or added after the date this agreement is signed.

### Keep these terms and conditions in mind

- \* Late fees You may be charged a late payment fee if your payment isn't received by its due date. If you're charged this fee and it isn't paid, your policy may be cancelled.
- \* Payment application Your payments are applied to prior policy period balances and fees, if applicable, first, then to current policy period balances in this order: auto, property, recreational vehicle, commercial and life.
- \*Authorization continuation Your authorization does not become invalid by a change in company name or policy number. It applies to the policies identified (e.g., auto, homeowner, personal umbrella, etc.), and will apply to any additional policies added to your billing account with Nationwide Mutual Insurance Company, or any of its subsidiary and affiliated companies, after the date this agreement is signed, unless you expressly indicate otherwise.
- \*Outstanding balances If you have a balance due on your policies after the expiration or cancellation date, you authorize us to electronically debit this bank account for the outstanding balance.

Nationwide Mutual Insurance Company and Affiliated Companies, One Nationwide Plaza, Columbus, Ohio 43215-2220 nationwide.com. Nationwide, the Nationwide N and Eagle and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. 2016 Nationwide

Nationwide Life Insurance Company and/or Nationwide Life and Annuity Insurance Company, PO Box 182835, Columbus OH 43218 Life Insurance and Annuities are issued by Nationwide Life Insurance Company and/or Nationwide Life and Annuity Insurance Company, Columbus, Ohio. The general distributor for variable insurance products is Nationwide Investment Services Corporation, member FINRA. Nationwide, the Nationwide N and Eagle and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. © 2018 Nationwide



# **Electronic Services and Document Delivery Agreement**

At Nationwide Mutual Insurance Company, its subsidiaries and affiliates, including, without limitation, Allied Group, Inc. and Harleysville Group, Inc. (collectively, "Nationwide," "we" or "us"), we give you the ability to transact business with us electronically. This includes, but is not limited to, transacting business online at <a href="www.Nationwide.com">www.Nationwide.com</a>, on the Web sites of our affiliates, and through our mobile applications (collectively "Nationwide Website(s)" or "Site"). Your use of Nationwide Websites is governed by this Agreement, the <a href="Nationwide.com Terms and Conditions">Nationwide.com Terms and Conditions</a>, and any other terms and conditions referenced on the applicable website or mobile application (incorporated herein by reference). This Electronic Services and Document Delivery Agreement (the "Agreement") is a legally binding agreement between you and Nationwide. You may print or electronically save a copy of this Agreement to retain for your records. If you wish to transact business with Nationwide electronically, please carefully review and consent to the terms listed below.

# **Establishing an Online Account**

For Personal Users For Commercial Users

# **Your Security**

# **Your Consent to Use Electronic Signatures and Receive Electronic Documents**

Your Consent to Use Electronic Signatures
Your Consent to Receive Covered Documents Electronically
Your Right to Revoke Your Consent at Any Time
Your Right to Obtain Paper Copies
System Requirements
Enrollment with Our Equipment
State Specific Provisions

For Help When You Need It Limitation of Liability Disclaimer of Warranties Legal Effect

#### **Establishing an Online Account**

# For Personal Users

You understand that by accepting this Agreement, you authorize Nationwide to establish an online account for you with the access capability and privileges to manage your Nationwide accounts, policies, or other products sold or provided by Nationwide and perform financial transactions as available. You represent that you are the person registered as the owner of this online account and you acknowledge that you are the only person permitted to use your unique username and password to access your online account. You represent that you have authority to give instructions and authorize transactions with respect to your Nationwide products, including general authority over changes to your personal information, movement of funds, contract changes, purchase of products or services, changes to your current or past product or service, or any other online transaction facilitated or permitted by the use of a Nationwide Website. You are also confirming that you are authorized to, and do, consent on behalf of all the other account owners, authorized signers, authorized representatives, delegates, product owners and/or users identified with your Nationwide products to perform the above listed transactions. You understand that by consenting to this Agreement, Nationwide has full authorization from you to rely and act upon any instructions received from you without further inquiry



Nationwide is not responsible for errors or failures caused by any malfunction of your computer, browser, or software. Nationwide is also not responsible for computer viruses or related problems associated with the use of an online system, or any delay or failure in connection with your receipt of email notices.

Although there is no charge for the services covered by this Agreement, there may be costs associated with electronic access to the documents, such as usage charges from internet service providers and telephone companies. These costs are your responsibility.

Nationwide reserves the right to modify or discontinue the services covered by this Agreement or modify the terms of this Agreement at any time and for any reason. You understand and agree that your continued use or access of Nationwide's electronic services after any modifications are made to this Agreement signifies your acceptance of the updated or modified Agreement. We will notify you of material changes to this Agreement by either sending a notice to the email address you provide to us or by posting a notice on a Nationwide Website. Be sure to return to the Nationwide Websites periodically to review the most current version of this Agreement.

#### For Commercial Users

You understand by accepting this Agreement, you affirm that you are authorized on behalf of the First Named Insured to authorize Nationwide to establish an online account for the organization with the access capability and privileges to manage the organization's accounts, policies, or other products sold or provided by Nationwide and perform financial transactions as available. You further represent that you have the First Named Insured's authority to give instructions and authorize transactions with respect to its insurance and financial products included in the account, including general authority over changes to its movement of funds, contract changes, purchase of products or services, changes to its current or past product or service, or any other online transaction facilitated or permitted by the use of a Nationwide Website. You understand that by consenting to this Agreement, you affirm that you are authorized on behalf of the First Named Insured to give Nationwide full authorization to rely and act upon any instructions received from you without further inquiry.

Nationwide is not responsible for errors or failures caused by any malfunction of your computer, browser, or software. Nationwide is also not responsible for computer viruses or related problems associated with the use of an online system, or any delay or failure in connection with your receipt of email notices.

Although there is no charge for the services covered by this Agreement, there may be costs associated with electronic access to the documents, such as usage charges from internet service providers and telephone companies. These costs are your responsibility.

Nationwide reserves the right to modify or discontinue the services covered by this Agreement or modify the terms of this Agreement at any time and for any reason. You understand and agree that your continued use or access of Nationwide's electronic services after any modifications are made to this Agreement signifies your acceptance of the updated or modified Agreement. We will notify you of material changes to this Agreement by either sending a notice to the email address you provide to us or by posting a notice on a Nationwide Website. Be sure to return to the Nationwide Websites periodically to review the most current version of this Agreement.

# **Your Security**

To prevent misuse of your online account, you agree to protect the confidentiality of and be solely responsible for the use of your username, password, and other authentication or security measures as required by Nationwide. If you suspect that your information has been compromised, you agree to immediately contact Nationwide. You should never provide your Nationwide.com username, password or other authentication or security measure to anyone else. If you choose to do so, you understand that you are authorizing that person or entity to conduct transactions using your online account. You are responsible for any resulting transactions. You may not obtain or attempt to



obtain unauthorized access to the Nationwide Websites, or to any other protected materials or information, through any means not intentionally made available by Nationwide for your specific use.

# Your Consent to Use Electronic Signatures and Receive Electronic Documents

One way that we transact business online is by allowing you to opt-in for the electronic delivery of specific documents. As part of transacting business with us, some information is required to be delivered to you "in writing." This generally means that you are entitled to receive it on paper. However, with your consent, we may provide this information to you electronically by delivering it to your account on a Nationwide Website or by delivering it to your email address ("Electronic Delivery"). We also need your prior consent in order to use your electronic signature in lieu of using your "wet" traditional written signature.

# Your Consent to Use Electronic Signatures

By choosing to transact business with Nationwide electronically, you agree to use electronic signatures which shall have the same force and effect as your written signature. Electronic signatures may take various forms on Nationwide Websites, including checking a box.

# Your Consent to Receive Covered Documents Electronically

You consent to receive the following documents that may arise during your relationship with Nationwide (collectively, the "Covered Documents") electronically through your account on a Nationwide Website or your email address, instead of in paper format through U.S. Mail:

- Account Related Documents including, but not limited to, insurance applications and application
  materials, policy documents, disclosures, policy-related notices (e.g., notice of premium increase,
  notice of renewal, notice of conditional renewal, notice of nonrenewal, notice of cancellation and
  notice of change in terms or conditions), prospectuses, statements, and other documents as
  permitted by law;
- **Billing Documents** including, but not limited to, bills, billing statements, payment receipts, disclosures, notices and other documents as permitted by law;
- Information applicable to your use of Nationwide Websites such as quotes, claims documents, updates, notifications, transaction receipts, documents requiring your signature, information that you request or any other documents related to your use of Nationwide Websites; and
- Any other documents permitted or required by law.

Your consent does not mean that Nationwide must provide the Covered Documents electronically. Nationwide may, at its discretion, provide the Covered Documents through non-electronic means.

Your consent for Nationwide to use your electronic signature and to receive the Covered Documents electronically applies to all Nationwide products you currently own and all products you may purchase from Nationwide in the future and continues after a policy modification or renewal. Your consent to receive documents electronically does not mean that all Covered Documents will be delivered to you electronically.

Accepting this agreement will not automatically change the manner in which you currently receive communications from Nationwide. In order to activate and manage Electronic Delivery for specific documents, you may have to take additional steps on the Nationwide Websites, such as selecting which documents you would like electronically delivered to you on the Preferences Page.

Covered Documents will not be available online indefinitely. Please save the documents to your computer or print them off to retain copies for your records.



# Your Right to Revoke Your Consent at Any Time

If you would like to change the delivery method for certain types of documents or accounts, this may be done by changing your delivery preferences on the applicable Nationwide Website. Changing your delivery preferences does NOT revoke your consent to receive all documents electronically, nor does it revoke your consent to any other part of this Agreement.

However, if you would like to revoke your consent to receive ALL Covered Documents electronically, you may only do so by deleting your online accounts. This may be done by calling the Nationwide Support Center at 1-877-304-1065 and requesting your online accounts be deleted. Revoking your consent to the Electronic Delivery of the Covered Documents will terminate all of your online accounts on Nationwide Websites and may cause you to lose any relevant discounts related to the Electronic Delivery of documents, but will not terminate your relationship with Nationwide unless additional notice is given. The revocation of your consent will take effect within a reasonable time of the Nationwide Service Center receiving your email or as otherwise required by law.

# Your Right to Obtain Paper Copies

You may obtain paper copies of the Covered Documents at no additional cost. To request paper copies please contact the Nationwide Service Center at 1-877-669-6877. Please be assured that requesting a paper copy in no way withdraws your consent to this Agreement or changes your election to continue to receive the Covered Documents electronically.

# Your Responsibility to Provide Us with a Valid and Active Email Address

It is your responsibility to provide us with a valid and active email address. You may update your email address and other contact information by logging in to <a href="https://www.Nationwide.com">www.Nationwide.com</a> or by contacting the Nationwide Service Center at 1-877-669-6877.

E-mails returned as undeliverable may result in a suspension of Electronic Delivery of the Covered Documents. In the event of such a suspension, paper copies of the Covered Documents will be sent to you through U.S. mail at the last address you have provided. It is your responsibility to provide us with an updated mailing address.

# System Requirements

To receive, access, and reply to the applicable Covered Documents you will need:

- A personal computer or other access device which is capable of accessing the Internet;
- An Internet web browser which is capable of supporting 128-bit SSL encrypted communications;
- Software which permits you to receive and access Portable Document Format or ("PDF") files; and
- The ability to download or print agreements and disclosures.

Some states may require insurance documents to be displayed in a particular font size. To ensure that communications are displayed at the correct font size for your state, please make sure that the view size setting for the communications is set to 100% and your browser resolution is  $800 \times 600$ .

In order to retain the Covered Documents your system must have the ability to:

- Download and save files to your hard disk drive; and
- Print PDF files, or print Web pages and embedded HTML files.

Your consent confirms that you have the hardware and software described above, that you are able to receive and review electronic records, and that you have an active email account.



# **Enrollment with Our Equipment**

If you elect to receive the Covered Documents through one of our customer service representatives or by using our equipment, your enrollment may not be complete until you perform an additional action. At the time of your enrollment,

we will advise you if you must perform any additional action in order to consent to this Agreement. If you perform the required additional action, this action will constitute your affirmative consent to this Agreement.

# State Specific Provisions

# **Residents of Georgia Only**

You consent to the following: I AGREE TO RECEIVE ALL MAILINGS AND COMMUNICATIONS ELECTRONICALLY. SUCH ELECTRONIC MAILING OR COMMUNICATIONS MAY EVEN INCLUDE CANCELLATION OR NONRENEWAL NOTICES.

## **Residents of Kentucky and Tennessee Only**

By consenting to this Agreement, you, the policyholder, elect to allow for policies, notices and communications to be sent to the electronic mail address provided by you and you should be aware that this election operates as consent by you for all notices to be sent electronically, including notice of nonrenewal and cancellation. Therefore, you, the policyholder, should be diligent in updating the electronic mail address provided to Nationwide in the event that the address should change.

# For Help When You Need It

We appreciate your business and look forward to continuing to serve you. If you have any questions about this Agreement, please contact us at 1-877-669-6877.

# **Limitation of Liability**

#### Nationwide's liabilities

In no event will Nationwide, its respective service providers, employees, agents, officers and directors be liable to you for any punitive, indirect, direct, special, incidental or consequential damages. This includes any lost profits, costs of obtaining substitute service or lost opportunity, even if you've notified Nationwide about the possibility of such damages. This also includes any claims by any third parties arising out of (or in any way related to) the access, use or information and other materials present on the Site ("Content") or a linked website. This applies whether such claims are brought under any theory of law or equity. This limitation on liability includes (but is not limited to) transmission of viruses that infects a user's equipment, mechanic or electronic equipment failure, failure of communication lines, telephone or other interconnects, unauthorized access, theft, operational errors, strikes or other labor problems, or any force majeure.

#### Your liabilities

Nationwide has the right to deny you access and use of the Site and its Content if you violate (as Nationwide may determine in its sole and absolute discretion) any provision of the <a href="Nationwide.com Terms and Conditions">Nationwide reserves the right to seek all other remedies available at law and in equity. You agree, at your own expense, to defend, indemnify and hold Nationwide harmless from any claim or demand (including reasonable attorneys' fees) made by a third party in connection with (or arising out of your access to, or use of) the Site or any of its Content in a manner other than as expressly authorized by the <a href="Nationwide.com Terms and Conditions">Nationwide.com Terms and Conditions</a>. This includes your breach of the <a href="Nationwide.com Terms and Conditions">Nationwide.com Terms and Conditions</a>, or your violation of applicable laws or any rights of any third party.

## **Disclaimer of Warranties**

ALL INFORMATION AND OTHER MATERIALS PRESENT ON NATIONWIDE WEBSITES, INCLUDING, WITHOUT LIMITATION, PRODUCTS AND SERVICES ON NATIONWIDE WEB SITES ARE PROVIDED "AS IS,"



WITHOUT ANY WARRANTIES ABOUT THE CONTENT'S NATURE OR ACCURACY (EITHER WHEN POSTED OR AS A RESULT OF THE PASSAGE OF TIME) AND WITHOUT ANY REPRESENTATIONS OR GUARANTEES.

NATIONWIDE MAKES NO REPRESENTATIONS, WARRANTIES OR GUARANTEES THAT THE NATIONWIDE WEBSITES WILL BE ACCESSIBLE CONTINUOUSLY AND WITHOUT INTERRUPTION, OR ERROR FREE.

# Legal Effect

By signing this Agreement, you agree to the terms and conditions herein, and acknowledge and agree that your consent is provided and/or obtained in connection with a transaction affecting interstate commerce subject to the Electronic Signatures in Global and National Commerce Act and the Uniform Electronic Transactions Act, or a similar electronic transactions law, as adopted by state law. You further agree that:

The Covered Documents made available to you on a Nationwide Website or delivered to your email address shall have the same meaning and effect as if you were provided a paper document, whether or not you choose to view the document(s), unless you previously withdrew your consent to receive documents by electronic means in accordance with this Agreement.

The Covered Documents are considered received by you when Nationwide sends the electronic notification to the email address you provide unless Nationwide receives notice that the email notification was not delivered to you at the email address you provided.

With respect to electronic Billing Documents, delays experienced due to the use of this service will not change any payment due date or the potential imposition of late fees. If you do not receive an anticipated e-mail notice, log on to www.Nationwide.com for up-to-date information about your account(s).

Except to the extent otherwise set forth in the Agreement or any other Nationwide agreement applicable to other portions of Nationwide Websites, this Agreement sets forth the entire understanding between Nationwide and you with respect to your access to, and use of, Nationwide Websites and supersedes all prior or contemporaneous understandings regarding access and use

Any provision of this Agreement that shall be proven unenforceable under any law or regulation shall not affect the validity or enforceability of any other provision of this Agreement.

This Agreement and any dispute arising from this Agreement, or the subject matter hereof, shall be governed by the laws of the United States and the State of Ohio.

Signature:	Date:
Email: mrpcos6770@outlook.com	



#### **PAYMENT RECEIPT**

Account/Policyholder: MICHAEL PLEGGE

Total paid: \$143.75

Date received: July 19, 2022

Date and time paid: July 19, 2022 10:36 AM EST

**Account/Policy number:** 7268450915 **Receipt number:** 000000205510246

Thank you for your payment

This notice confirms we received your authorization on July 19, 2022 10:36 AM EST for a one-time electronic payment of \$143.75. Thank you for making this payment.

Per your authorization, we will debit a single payment from your bank account on or after July 19, 2022 10:36 AM EST. Here are the details of your payment:

Account/Policy number: 7268450915

Receipt number: 000000205510246
Bank name: ENT CREDIT UNION

Account type: CHECKING Amount of payment: \$143.75

Paid by: MICHAEL PLEGGE

# For help when you need it

We appreciate your business and look forward to continuing to serve you. If you have any questions, please contact Nationwide at 8642861373. Please visit us online at nationwide.com for more information.

Payment received by: als61p