

A&T Logistics LLC
 14244 SHEPARD DR
 DOLTON, IL 60419

Underwritten by:
 Artisan and Truckers Casualty Co
 February 24, 2023
 Policy Period: Feb 24, 2023 - Feb 24, 2024
 Page 1 of 2
 Customer Phone number: 1-817-705-6683

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Artisan and Truckers Casualty Co, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through agent.progressive.com, your customized website. Claims service is available 24 hours a day, 7 days a week.

Policy information

Business: Commercial Trucker

Quote for 12 month policy period

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

Total policy premium	\$8,240.00
Paid in full discount	-1230.00
Policy premium if paid in full	\$7,010.00

Payment plans

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$3.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 25.0% Down	\$8,240.00	\$2,086.25	9 payments of \$686.75
4 Pay, Seasonal, 25.0% Down	\$8,240.00	\$2,086.25	3 payments of \$2,054.25
2 Payments, 50.0% Down	\$8,240.00	\$4,137.50	1 payments of \$4,105.50

Make payments by mail or at agent.progressive.com. Each payment includes a \$6.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
1 Payment	\$7,010.00	\$7,010.00	None
10 Payments, 25.0% Down	\$8,240.00	\$2,086.25	9 payments of \$689.75
4 Pay, Seasonal, 25.0% Down	\$8,240.00	\$2,086.25	3 payments of \$2,057.25
4 Pay, Quarterly, 25.0% Down	\$8,240.00	\$2,086.25	3 payments of \$2,057.25
2 Payments, 50.0% Down	\$8,240.00	\$4,137.50	1 payment of \$4,108.50

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 **1-855-657-8400**. 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
Andre Perkins	09/01/1972	0	

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$8,112
Bodily Injury and Property Damage Liability	\$750,000 combined single limit		
Uninsured Motorist	\$100,000 each person/\$300,000 each accident		42
Underinsured Motorist	\$100,000 each person/\$300,000 each accident		51
Medical Payments	Rejected		--
Subtotal policy premium			\$8,205
Federal Filing Fee			35
Total 12 month policy premium and fees			\$8,240

Auto coverage schedule

- 2016 FREIGHTLINER CASCADIA 125**
 VIN: **3AKJGLDR6GSGP6004** Garaging Zip Code: 60419 Radius: More than 500 miles
 Personal use: N Body type: Truck Tractor

Liability Premium	UM Premium	UIM Premium	Auto Total
\$7875	\$42	\$51	\$7,968

- 2030 Non-owned Attached Trailer ****
 VIN: **None** Garaging Zip Code: 60419 Radius: More than 500 miles
 Personal use: N Body type: 20

Liability Premium	UM Premium	UIM Premium	Auto Total
\$237			\$237

**Non-Owned trailer but only while attached to a listed power unit specifically described on the declarations page.