

BURNELL TOMPKINS  
3254 DEAN NURSERY RD  
LUCEDALE, MS 39452

Underwritten by:  
Blue Hill Specialty Ins Co  
May 9, 2023  
Policy Period: May 9, 2023 - May 9, 2024  
Page 1 of 3  
Customer Phone number: 1-601-508-2515

## Commercial Auto Insurance Quote

Dear BURNELL TOMPKINS,  
Thank you for your interest in Progressive.

We're excited about the opportunity to work with you. Below you'll find a quote that's custom-designed around your needs. Our goal is to give you the best and most competitively priced coverage for your business.

### What you get

You get affordable rates, savings opportunities for safe driving, and nationally recognized claims service that keeps you and your business on the road and in business. Most importantly, you get the peace of mind that comes with Progressive's responsive, comprehensive approach to customer service.

By becoming a Progressive customer, you join a confident group of business owners who expect the most from their insurance company. You're important to us. That's why we're here for you 24 hours a day, seven days a week. Whether you need to update your policy, report or check the status of a claim, or simply ask a question, call us at 1-844-779-5952, or you can visit us online at [progressivecommercial.com](http://progressivecommercial.com).

### How you get it

If you're comfortable with your quote, please visit us online at [progressivecommercial.com](http://progressivecommercial.com) or call us any time at 1-844-779-5952 to purchase your policy. And thank you again for thinking of us. We hope we can serve you and your commercial auto needs.

### Policy information

Business: Dirt Sand & Gravel (For A Fee)

### Quote for 12 month policy period

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

Total policy premium	\$11,062.84
Paid in full discount	-1070.00
Policy premium if paid in full	\$9,992.84

### Payment plans

**Electronic Funds Transfer (EFT)** assures that your payment is on time. Each payment includes a \$5.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
11 Payments, 16.67% Down	\$11,062.84	\$2,592.35	9 payments of \$852.05 and 1 of \$852.04
10 Payments, 20.0% Down	\$11,062.84	\$2,930.84	8 payments of \$908.56 and 1 of \$908.52
6 Pay, Seasonal, 20.0% Down	\$11,062.84	\$2,930.84	5 payments of \$1,631.40
10 Payments, 25.0% Down	\$11,062.84	\$3,439.09	8 payments of \$852.09 and 1 of \$852.03

4 Pay, Seasonal, 25.0% Down	\$11,062.84	\$3,439.09	3 payments of \$2,546.25
3 Payments, 40.0% Down	\$11,062.84	\$4,963.84	2 payments of \$3,054.50
2 Payments, 50.0% Down	\$11,062.84	\$5,980.34	1 payments of \$5,087.50

**Make payments by mail** or at progressivecommercial.com. Each payment includes a \$12.00 installment fee.

Payment plan	Total premium	Initial payment	Payments
1 Payment	\$9,992.84	\$9,992.84	None
11 Payments, 16.67% Down	\$11,597.84	\$2,681.53	9 payments of \$903.64 and 1 of \$903.55
11 Payments, 20.0% Down	\$11,597.84	\$3,037.84	10 payments of \$868.00
10 Payments, 20.0% Down	\$11,597.84	\$3,037.84	8 payments of \$963.12 and 1 of \$963.04
6 Pay, Seasonal, 20.0% Down	\$11,597.84	\$3,037.84	5 payments of \$1,724.00
10 Payments, 25.0% Down	\$11,597.84	\$3,572.84	8 payments of \$903.67 and 1 of \$903.64
4 Pay, Seasonal, 25.0% Down	\$11,597.84	\$3,572.84	3 payments of \$2,687.00
4 Pay, Quarterly, 25.0% Down	\$11,597.84	\$3,572.84	3 payments of \$2,687.00
3 Payments, 40.0% Down	\$11,597.84	\$5,177.84	2 payments of \$3,222.00
2 Payments, 50.0% Down	\$11,597.84	\$6,247.84	1 payment of \$5,362.00

### 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 **1-844-779-5952**. 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
BURNELL TOMPKINS	05/14/1956	0	

### Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$10,165
Bodily Injury and Property Damage Liability	\$1,000,000 combined single limit		
Uninsured/Underinsured Motorist	Rejected		--
Uninsured Motorist Property Damage	Rejected		--
Medical Payments	Rejected		--
<b>Subtotal policy premium</b>			<b>\$10,165.00</b>
PCAA Administration Fee			150.00
MWUA Fee			309.45
MS Stamping Fee			25.79
State Surplus Lines Tax			412.60
<b>Total 12 month policy premium and fees</b>			<b>\$11,062.84</b>

## Auto coverage schedule

- 1984 PETERBILT 359**  
VIN: **1XP9DB9X9EP176209** Garaging Zip Code: 39452 Radius: 100 miles  
Personal use: N Body type: Truck Tractor

Liability Premium	Liability Premium	Auto Total
	\$9824	<b>\$9,824</b>

- 2030 Non-owned Attached Trailer \*\***  
VIN: **None** Garaging Zip Code: 39452 Radius: 100 miles  
Personal use: N Body type: 20

Liability Premium	Liability Premium	Auto Total
	\$341	<b>\$341</b>

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

## Premium discount

Policy .....

Electronic Funds Transfer

Please review all the information on your quote for accuracy. Incomplete or inaccurate information could alter your rate, and rates are subject to verification. If you have any questions, please call us at 1-844-779-5952.

Form QUOTE (03/17)