

yahye suldan
770 GEORGESVILLE RD
COLUMBUS, OH 43228

Underwritten by:
Progressive Preferred Insurance Co
May 18, 2023
Policy Period: May 18, 2023 - May 18, 2024
Page 1 of 3
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 Preferred Insurance 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: Personal Use Only

Quote for 12 month policy period

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

Total policy premium	\$2,094.00
Paid in full discount	-220.00
Policy premium if paid in full	\$1,874.00

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
11 Payments, 9.09% Down	\$2,094.00	\$190.35	9 payments of \$193.37 and 1 of \$193.32
11 Payments, 12.50% Down	\$2,094.00	\$261.75	9 payments of \$186.23 and 1 of \$186.18
11 Payments, 16.67% Down	\$2,094.00	\$349.07	9 payments of \$177.50 and 1 of \$177.43
10 Payments, 20.0% Down	\$2,094.00	\$418.80	8 payments of \$189.14 and 1 of \$189.08
6 Pay, Seasonal, 20.0% Down	\$2,094.00	\$418.80	5 payments of \$338.04
10 Payments, 25.0% Down	\$2,094.00	\$523.50	9 payments of \$177.50
4 Pay, Seasonal, 25.0% Down	\$2,094.00	\$523.50	3 payments of \$526.50
3 Payments, 40.0% Down	\$2,094.00	\$837.60	2 payments of \$631.20
2 Payments, 50.0% Down	\$2,094.00	\$1,047.00	1 payments of \$1,050.00

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	\$1,874.00	\$1,874.00	None
11 Payments, 9.09% Down	\$2,204.00	\$200.35	9 payments of \$206.37 and 1 of \$206.32
11 Payments, 12.50% Down	\$2,204.00	\$275.50	10 payments of \$198.85

11 Payments, 16.67% Down	\$2,204.00	\$367.41	9 payments of \$189.66 and 1 of \$189.65
11 Payments, 20.0% Down	\$2,204.00	\$440.80	10 payments of \$182.32
10 Payments, 20.0% Down	\$2,204.00	\$440.80	8 payments of \$201.92 and 1 of \$201.84
6 Pay, Seasonal, 20.0% Down	\$2,204.00	\$440.80	5 payments of \$358.64
10 Payments, 25.0% Down	\$2,204.00	\$551.00	8 payments of \$189.67 and 1 of \$189.64
4 Pay, Seasonal, 25.0% Down	\$2,204.00	\$551.00	3 payments of \$557.00
4 Pay, Quarterly, 25.0% Down	\$2,204.00	\$551.00	3 payments of \$557.00
3 Payments, 40.0% Down	\$2,204.00	\$881.60	2 payments of \$667.20
2 Payments, 50.0% Down	\$2,204.00	\$1,102.00	1 payment of \$1,108.00

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 me at **1-318-744-4178**. 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
yahye sultan	12/24/1988	0	

Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$364
Bodily Injury Liability	\$25,000 each person/\$50,000 each accident		
Property Damage Liability	\$25,000 each accident		
Uninsured/Underinsured Motorist	\$25,000 each person/\$50,000 each accident		72
Uninsured Motorist Property Damage	Rejected		--
Medical Payments	Rejected		--
Comprehensive			591
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			1,067
See Auto Coverage Schedule	Limit of liability less deductible		
Total 12 month policy premium			\$2,094

Auto coverage schedule

- 2018 INTERNATIONAL LT625** Stated Amount: * \$47,000 (including Permanently Attached Equip)
VIN: **3HSDZAPR5JN094975** Garaging Zip Code: 43228 Radius: More than 500 miles
Personal use: Y Body type: Truck Tractor

Liability Premium	Liability Premium	UM/UIM Premium			
	\$358	\$72			
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$1,000	\$591	\$1,000	\$1067	\$2,088

2. **2030 Non-owned Attached Trailer ****
VIN: **None** Garaging Zip Code: 43228 Radius: More than 500 miles
Personal use: N Body type: 20

Liability Premium	Liability Premium \$6	Auto Total \$6
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*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.

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

Premium discount

Policy
Electronic Funds Transfer

Form QUOTE (03/17)