



AMENDED DECLARATIONS

Policy Number: 276-0072638376 -011
Policy Period: From 04/15/21 To 04/15/22 12:01 A.M. Standard Time

Underwritten by: Foremost Insurance Company Grand Rapids, Michigan
Home Office: P.O. Box 2450 Grand Rapids, Michigan 49501

AMENDED DECLARATIONS EFFECTIVE 04/15/2021
SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME POLICY NUMBER FOR THIS POLICY PERIOD.
REASON FOR CHANGE: POLICY INFORMATION.

YOU AS NAMED INSURED AND YOUR ADDRESS

STAN MARKIEWICZ
826 WALNUT ST
EL DORADO KS 67042

SERVICE PROVIDED BY:

LEVI DAULTON ASHMORE
FARMERS INSURANCE GROUP
229 N MAIN ST
EL DORADO KS 67042-2019

Telephone: (316) 321-2305 Agency Code: 89-5509-616

PREMIUM SUMMARY

We will insure you for the coverage for which a premium is shown. Detailed coverage descriptions and any limitations will be found in your policy.

Table with 2 columns: Coverage, TOTAL PREMIUM. Includes Vehicle Insurance (\$142) and TOTAL ANNUAL PREMIUM (\$142).

Additional Premium Resulting From This Change \$ 0

OPERATOR INFORMATION

Operator Name: #1 STAN MARKIEWICZ
License Number: K01788583
State: KS
Birth Date: 06/11/1961

VEHICLE INSURANCE

MOTORCYCLE DESCRIPTION

Unit #1: 2009 KAWASAKI KLR650
Type Of Use: PLEASURE
Garaging Location: 826 WALNUT ST EL DORADO KS 67042-4520
VIN: JKAKLEE119DA25426 CC: 0651 Territory: 001
Class: Y Estimated Annual Mileage: Rated Operator: #1
County: BUTLER

VEHICLE INSURANCE COVERAGES

LIMITS OF LIABILITY

PREMIUM Unit #1

Table with 3 columns: Coverage, Limits of Liability, Premium. Includes PART A - LIABILITY (BODILY INJURY, PASSENGER LIABILITY, PROPERTY DAMAGE), PART B - MEDICAL PAYMENTS (MEDICAL PAYMENT), PART C - UNINSURED MOTORIST (UNINSRD/UNDERINSD MOTORIST BI), and Annual Premium By Vehicle (\$142).

DISCOUNTS AND SURCHARGES

The following have been applied to your premium

	UNIT #1
RENEWAL PREMIUM DISCOUNT	\$ 7
MULTI-POLICY DISCOUNT	\$ 17
Total Discounts	\$ 24

VEHICLE INSURANCE ANNUAL PREMIUM	\$ 142
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MINIMUM EARNED PREMIUM \$ 50

FORMS AND ENDORSEMENTS

All Units	
	PP0457 06/19 UNINSURED MOTORIST BODILY INJURY-KS
	004559 03/13 MOTORCYCLE POLICY-FARMERS
	005810 06/18 AMENDMENT OF POLICY PROVISIONS-KS

SPECIAL INFORMATIONAL FORMS

004592 02/11 DELIVERY OF CANCELLATION/NON-RENEWAL
 737361 FIRST ACCIDENT WAIVER-ELIGIBLE
 741495 07/10 IMPORTANT NOTICE - STATED AMOUNT VALUE

ADDITIONAL FEE INFORMATION

In consideration of our agreement to allow you to pay in installments, the following service fee(s) apply per installment:

1-PAY	3-PAY	6-PAY	10-PAY	12-PAY
\$0.00	\$4.00	\$4.00	\$4.00	\$2.00

PROCESSED: March 24, 2021

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