

Named insured

D & G CABINETS & GRANITE LLC  
4349 NW 36TH ST  
GAINESVILLE, FL 32605

**Policy number: 01288415**

Underwritten by:  
Progressive Express Ins Company  
September 7, 2023  
Policy Period: Oct 26, 2023 - Oct 26, 2024  
Page 1 of 2

**progressivecommercial.com**  
**Online Service**

Make payments, check billing activity, print policy documents, update your policy or check the status of a claim.

**1-800-895-2886**

For customer service and claims service,  
24 hours a day, 7 days a week.

# Commercial Auto Insurance Coverage Summary

## This is your Renewal Declarations Page

This Renewal Declarations Page is effective only if the minimum amount due to renew your policy is received or postmarked by October 26, 2023.

Your coverage begins on October 26, 2023 at 12:01 a.m. This policy expires on October 26, 2024 at 12:01 a.m.

Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for an auto may not be combined with the limits for the same coverage on another auto, unless the policy contract allows the stacking of limits. The policy contract is form 6912 (02/19). The contract is modified by forms 2852FL (02/19), 1652FL (02/23), 4852FL (02/19), 4881FL (02/19) and Z228 (01/11).

The named insured organization type is a corporation.

### Outline of coverage

Description	Limits	Deductible	Premium
Liability To Others			\$4,046
Bodily Injury Liability	\$25,000 each person/\$50,000 each accident		
Property Damage Liability	\$25,000 each accident		
Uninsured Motorist - Nonstacked	\$25,000 each person/\$50,000 each accident		680
Basic Personal Injury Protection			312
Without Work Comp-Named Insured & Relatives	\$10,000 each person	\$0	
Medical Payments	Rejected		--
Comprehensive			1,114
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			1,763
See Auto Coverage Schedule	Limit of liability less deductible		
<b>Total 12 month policy premium</b>			<b>\$7,915</b>
Discount if paid in full			-1196
<b>Total 12 month policy premium if paid in full</b>			<b>\$6,719</b>

### Rated drivers

1. GIOVANNI ACUNA

**Auto coverage schedule**

1. **2021 RAM PROMASTER 2500** Stated Amount: \* \$40,000 (including Permanently Attached Equip)  
VIN: **3C6ERVDGXME508027** Garaging Zip Code: 32605 Radius: 200 miles  
Personal use: N Body type: Cargo Van

Liability Premium	Liability Premium	UM Premium	PIP Premium		
	\$1647	\$378	\$149		
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$500	\$434	\$500	\$792	<b>\$3,400</b>

2. **2022 RAM RAM 2500** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)  
VIN: **3C6UR5FLONG143465** Garaging Zip Code: 32605 Radius: 200 miles  
Personal use: Y Body type: Pickup Truck

Liability Premium	Liability Premium	UM Premium	PIP Premium		
	\$2399	\$302	\$163		
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$500	\$680	\$500	\$971	<b>\$4,515</b>

\*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.

**Premium discounts**

Policy	
01288415	Multi-Product
Vehicle	
2021 RAM PROMASTER 2500	Airbag, Anti-Lock Brakes and Anti-Theft Device Standard
2022 RAM RAM 2500	Airbag and Anti-Lock Brakes

**Loss Payee information**

1. Loss Payee	Auto 2	US BANK PO BOX 3490 OSHKOSH, WI 54903 2022 RAM RAM 2500 (3C6UR5FLONG143465)
---------------	--------	--

**Agent signature**



**Company officers**



Secretary