

DEREK S PICKARD  
2986 LONG POND DR  
DRACUT, MA 01826

**Policy Number: 939103708**

Underwritten by:  
Progressive Casualty Insurance Co  
November 23, 2021  
Policy Period: Dec 11, 2021 - Jun 11, 2022  
Page 1 of 3

**1-781-224-0909**

**JOHNSON & ROHAN INS**  
Contact your agent for personalized service.

**progressiveagent.com**

**Online Service**  
Make payments, check billing activity, update  
policy information or check status of a claim.

## Auto Insurance Coverage Summary

### Your policy information has changed This is your revised Renewal Coverage Selections Page

The coverages, limits and policy period shown apply only if you pay for this policy to renew.

Your coverage begins on December 11, 2021 at 12:01 a.m. This policy expires on June 11, 2022 at 12:01 a.m.

This coverage summary replaces your prior one. This page and any attached endorsements form a part of your policy and contain a full explanation of your coverage. The policy contract is form 9609A MA (11/16). The contract is modified by forms A057 MA (05/14), Z624 MA (05/14), 9869 MA (05/14), Z628 MA (11/07), Z625 MA (11/07) and Z538 MA (05/14).

#### Policy changes effective December 11, 2021

Changes requested on:	Nov 22, 2021 03:03 p.m.
Requested by:	DEREK S PICKARD
Premium change:	-\$445.00
Changes:	The 2008 NISSAN ALTIMA has been removed. The Multi-Car discount has been removed from your policy.

#### Drivers and household residents

	Additional Information
DEREK S PICKARD	Named Insured

**Outline of coverage**

This policy provides only the coverages for which a premium charge is shown.

**Auto 1**

**2017 GMC SIERRA C1500/K1500 CREW PICKUP**

VIN: **1GTV2LEC3HZ274627**

Principal garaging address: 01826

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: Less than 1 month

**Coverages Parts 1-12**

<b>Compulsory insurance</b>	Limits	Deductible	Premium
Bodily Injury to Others (Part 1)	\$20,000 each person/\$40,000 each accident		\$406
Personal Injury Protection (Part 2)	\$8,000 each person	\$0	47
Bodily Injury Caused by An Uninsured Auto (Part 3) (Compulsory Limits \$20,000/\$40,000)	\$20,000 each person/\$40,000 each accident		9
Damage to Someone Else's Property (Part 4) (Compulsory Limit \$5,000)	\$100,000 each accident		455
<b>Optional insurance</b>	Limits	Deductible	Premium
Optional Bodily Injury to Others (Part 5)	\$20,000 each person/\$40,000 each accident		5
Collision (Part 7)	Actual Cash Value	\$1,000 w/waiver	619
Comprehensive (Part 9) Comprehensive Window Glass	Actual Cash Value	\$500 \$0 glass	180
<b>Total 6 month policy premium</b>			<b>\$1,721.00</b>

**Part 5 - Optional Bodily Injury To Others**

The limits shown for this Part are the total limits you have under Compulsory Bodily Injury to Others (Part 1) and this Part. This means that the Compulsory limits are included within the limits shown for this Part and are not in addition to them.

**Premium discount**

Several discounts are available and your premium has been reduced if one or more discounts are indicated below. Contact customer service for further details.

Policy	Discount
939103708	Continuous Insurance: Gold

**Lienholder information**

Vehicle	Lienholder
2017 GMC SIERRA C1500/K1500 1GTV2LEC3HZ274627	WELLS FARGO AUTO FIN PHOENIX, AZ 85038

**Driver information**

Name	Date of birth	
DEREK S PICKARD	May 4, 1993	
License status	Years licensed	Operator status
Valid	11	Rated

Check carefully that all operators of your auto(s) are shown. Your failure to list a household member or any individual who customarily operates your auto may have very serious consequences.

NOTICE: If you or someone else on your behalf has knowingly given us false, deceptive, misleading or incomplete information and if such false, deceptive, misleading or incomplete information increases our risk of loss, we may refuse to pay claims under any or all of the Optional Insurance Parts and we may cancel your policy. Such information includes the description and the place of garaging of the vehicle(s) to be insured, the names of all household members and customary operators required to be listed and the answers given above for all listed operators. We may also limit our payments under Part 3 and Part 4. Check to make certain that you have correctly listed all operators and the completeness of their previous driving records. We may verify the accuracy of the previous driving records of all listed operators.

We will not pay for a collision or limited collision loss for an accident which occurs while your auto is being operated by a household member who is not listed as an operator on your policy. Payment is withheld when the household member, if listed, would require the payment of additional premium on your policy because the household member would be classified as an inexperienced operator or would require payment of additional premium on your policy under our rates.

Countersigned by  \_\_\_\_\_  
Authorized Signature

 \_\_\_\_\_  
Authorized Signature