



EVIDENCE OF INSURANCE

Application Number
RIN6854378
Effective Dates
08/01/2018 to 08/01/2019 12:01 AM
Yearly Premium
\$123.00
For Services, call 1-877-900-0344

Agent Address	Company Address
GEICO Insurance Agency, Inc. One Geico Blvd Fredericksburg, VA 22412	American Bankers Insurance Company of Florida 11222 Quail Roost Drive Miami, FL 33157-6596

Insured Name & Mailing Address	Risk Address
VIBRANARAYANAN MOHANAPASHYAM NIHYA ANGAMUTHU 115 WEST RD 507 ELLINGTON CT 06029	115 WEST RD 507 ELLINGTON, CT 06029

Section I Coverage Information	Amount (\$)
CONTENTS	\$10,000
LOSS OF USE	\$2,000
Section I Deductible Information	Amount (\$)
STANDARD DEDUCTIBLE	\$500
Section II Coverage Information	Amount (\$)
PERSONAL LIABILITY	\$100,000
MEDICAL PAYMENTS TO OTHERS	\$1,000
ENDORSEMENTS REPLACEMENT COST CONTENTS	
NOTE: ALL COVERAGES ARE SUBJECT TO THE TERMS AND CONDITIONS LISTED IN THE POLICY FORMS.	



Payment Receipt For Application

RIN6854378

Total Yearly Premium	\$123.00
Down Payment	\$123.00
Remaining Balance	\$0.00

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Additional Interest Name & Mailing Address