

**NATIONAL GENERAL**  
an Allstate company

PO Box 3199 • Winston Salem NC 27102-3199

ALEXANDER GIL YLARRAZA  
APT A4  
11730 N 15TH ST  
TAMPA FL 33612

**Date:** 11/26/2025  
**Policy Number:** 2031050719

**Named Insured:**  
Alexander Gil Ylarraza  
**Policy Period:** 09/13/2025 - 03/13/2026  
**Policy Underwritten By:**  
Direct General Insurance Company  
**Agent:**  
Fortitude Insurances Services LLC  
5310 Sailor Rd  
Brooksville FL 34602  
(813) 753-4197

**Greetings from National General!**

Thank you for continuing to allow us to serve your insurance needs! Your policy has recently been changed and we have included an amended declarations page that reflects your current coverage, vehicles and drivers.

Your policy form and coverage endorsements may be viewed by going to our website: [www.MyNatGenPolicy.com](http://www.MyNatGenPolicy.com). Click on the Policy Documents link at the top and enter your Policy Number. You will be able to view, print and save your policy forms. The applicable forms are also listed in the "Forms and Endorsements" section on your Declaration Page. If you prefer to have copies of these policy documents delivered via U.S. Postal Service at no cost to you, please contact us at 1-877-468-3466 or your agent at (813) 753-4197.

Thank you again for choosing National General Insurance. We appreciate your business!



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## YOUR AUTOMATIC PAYMENTS SCHEDULE

Thank you for enrolling in our Automatic Payments program!

We recently processed a change to your policy that has affected your payment amounts.

Here are the scheduled payment amounts and draft dates. The payments will be automatically drafted from your account on the indicated draft date below. Please keep this schedule for future reference since no other billing notices will be sent to you.

Schedule Draft Date	Installment Amount
11/26/2025	\$15.00
11/26/2025	\$289.69
11/26/2025	(\$406.26)
12/08/2025	\$385.03
01/08/2026	\$385.01
02/09/2026	\$385.01
<b>Total Drafts:</b>	<b>\$1,053.48</b>

\* Each draft includes a \$16.58 installment charge.

**Thank you for choosing National General Insurance!**



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**ALEXANDER GIL YLARRAZA**

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**APT A4**  
**11730 N 15TH ST**  
**TAMPA, FL 33612**

Policy Period:  
**09/13/2025 - 03/13/2026**  
Policy Underwritten by:  
**DIRECT GENERAL INSURANCE COMPANY**

**24 Hour Claim Reporting: 1-800-468-3466**  
**For Policy Information: 1-877-468-3466**  
**www.MyNatGenPolicy.com**

Your Agent:  
**Fortitude Insurances Services LLC**  
5310 Sailor Rd  
Brooksville FL 34602  
(813) 753-4197

## FL PERSONAL AUTO DECLARATIONS PAGE

Endorsement Effective **11/26/2025 12:48 PM**

The following changes were made to your policy – Billing Information Updated

### Drivers and Household Residents

<b>#1</b>	Alexander Gil Ylarraza							
	<b>Driver Status</b>	<b>License #</b>	<b>Lic. State</b>	<b>Date of Birth</b>	<b>Gender</b>	<b>Marital Status</b>	<b>Driver Pts</b>	<b>Yrs. Lic.</b>
	Rated Driver	XXXXXXXXXX2440	FL	7/4/1986	Male	Married	0	2
<b>#2</b>	Victoria Gauna							
	<b>Driver Status</b>	<b>License #</b>	<b>Lic. State</b>	<b>Date of Birth</b>	<b>Gender</b>	<b>Marital Status</b>	<b>Driver Pts</b>	<b>Yrs. Lic.</b>
	Rated Driver			8/2/1989	Male	Married	0	0

### Insured Personal Auto(s) and Schedule of Coverages

<b>#1 2020 FORD F150 SUP</b>	<b>VIN:</b> 1FTEW1E42LKD82515-771920	
<b>Usage:</b> Pleasure/Commute		
<b>Garaging Location:</b> 33612		
<b>Loss Payee</b>	<b>Address</b>	
Westlake Financial Services	PO Box 76809, Los Angeles, CA 90076-0809	
<b>Coverages Provided</b>	<b>Limits/Deductibles</b>	<b>Premium</b>
Property Damage	\$10,000 Each Accident	\$279.00
Personal Injury Protection	\$10,000, \$1,000 Deductible Per Occurrence - Named Insured and Resident Relatives, Exclusion of Work Loss Benefit - Named Insured and Resident Relatives	\$1,015.00
Other Than Collision	\$1,000 Deductible	\$272.00
Collision	\$2,000 Deductible	\$604.00
	<b>Total For This Vehicle</b>	<b>\$2,170.00</b>

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## Premium and Fee Totals

<b>Combined Vehicle Coverage Premium</b>	<b>\$2,170.00</b>
Installment Underwriting Fee	\$10.00
MGA Policy Fee	\$25.00
<b>Total 6 Month Policy Premium</b>	<b>\$2,205.00</b>

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## Discounts Applied

### Policy Level

Credit Zip Match Discount  
Paperless Discount  
Payment Discount

### Vehicle Level

#1 Airbag Discount  
#1 Anti-lock Brakes Discount  
#1 Anti-theft Discount  
#1 PPA Zip Match Discount

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## Surcharges Applied

### Policy Level

Prior PIP Claim1

### Driver Level

#2 Unverifiable Driving Record Surcharge PPA

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## Important Notice

Online Policy Documents: Your policy form and coverage endorsements may be viewed by going to our website: [www.MyNatGenPolicy.com](http://www.MyNatGenPolicy.com). Click on the Policy Documents link at the top and enter your Policy Number.

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## Additional Policy Information

Insured email: ALEXANDERJOSEGILYLARRAZA@GMAIL.COM

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## Disclosure of Possible Additional Charges

The amounts below are authorized for use in this state. However, they are only charged if they apply to your policy.

FR Filing Charge	\$25.00
Late Charge	\$10.00
Nonsufficient Funds Charge	\$15.00
Reinstatement Charge	\$15.00

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## Forms and Endorsements

Form	Edition	Form Name
12448	05012024	PERSONAL INJURY PROTECTION COVERAGE - FLORIDA
13010	10012021	PRIVATE PASSENGER AUTO SAFETY GLASS AND COMPUTER CALIBRATION LIMITS OF LIABILITY ENDORSEMENT
14899FL	07012023	AMENDMENT OF POLICY PROVISIONS - RIGHT TO APPRAISAL
14926FL	10012023	AMENDMENT OF POLICY PROVISIONS - COVERAGE FOR DAMAGE TO YOUR AUTO
12352	12012020	FLORIDA PERSONAL AUTO POLICY



Authorized Signature