

REASON FOR THESE DECLARATIONS: REFER TO REASON(S) FOR TRANSACTION SECTION
NAMED INSURED

JOHN M KYLEODVRV
3715 KIRKLYNN DR
NEW HAVEN, IN 46774-1947

AGENCY

HUPE INSURANCE SERVICES
PO BOX 15249
FORT WAYNE, IN 46885-5249
(260) 486-7488
www.hupe-insurance.com

POLICY NUMBER

POLICY PERIOD AT ADDRESS OF NAMED INSURED FROM 10/23/2020 TO 10/23/2021
(12:01 A.M. STANDARD TIME)

FMA8198831

YOUR PREMIUM

TOTAL ANNUAL PREMIUM \$3,478.00

YOU ARE SAVING MONEY

YOUR DISCOUNTS

ANTI-THEFT Vehicle: 001

PASSIVE RESTRAINT Vehicle: 001

**VEHICLE STATE TER YEAR MAKE/MODEL IDENTIFICATION NUMBER SYMBOL CLASS
VEHICLES**

001 IN 043 2016 CADI ESCALADE 1GYS3DKJXGR264503 0000005444 A16805

002 IN 043 2016 ADVE ADVENTURER 1234567890 A30102

ADDITIONAL VEHICLE INFORMATION

VEHICLE 001: 1GYS3DKJXGR264503 Above identification number is incorrect as given

Agreed value \$42,370.00

VEHICLE 002: 1234567890 Above identification number is incorrect as given

Stated amount \$12,345.00

DRIVER NAME BIRTH DATE

DRIVERS

001 LOKI STEVE PARKERPZBWF 05/05/1983

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SUMMIT AUTOMOBILE POLICY DECLARATIONS (CONTINUED)

NAMED INSURED POLICY NUMBER

JOHN M KYLEODVRV FMA8198831

Coverage is provided where premium & limit of liability are shown for the coverage.

COVERAGES, LIMITS OF LIABILITY, AND PREMIUMS

COVERAGE / LIMIT OF LIABILITY

VEHICLE

001

VEHICLE

002

VEHICLE ANNUAL PREMIUM \$2,773.00 \$635.00

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SUMMIT AUTOMOBILE POLICY DECLARATIONS (CONTINUED)

NAMED INSURED POLICY NUMBER

JOHN M KYLEODVRV FMA8198831

Coverage is provided where premium & limit of liability are shown for the coverage.

COVERAGES, LIMITS OF LIABILITY, AND PREMIUMS

ADDITIONAL COVERAGES

SUMMIT AUTO ENDORSEMENT - INCLUDES THE FOLLOWING:

PARKED AUTO COLLISION COVERAGE

TOWING & LABOR COSTS COVERAGE

TRANSPORTATION EXPENSES COVERAGE

PERSONAL EFFECTS COVERAGE

AUTO DEATH BENEFIT COVERAGE

RENTAL CAR LOSS OF USE COVERAGE

AIR BAG REPLACEMENT

AUTO LOAN/LEASE GAP COVERAGE

REPAIR OR REPLACEMENT COST COVERAGE

LOCK REPLACEMENT COVERAGE

LOCKOUT COVERAGE
FIRE, POLICE, RESCUE SQUAD CHARGE COVERAGE
PET INJURY COVERAGE
CHILD SAFETY SEAT COVERAGE
WAIVER OF DEDUCTIBLE FOR CERTAIN LOSSES
DOUBLED MEDICAL PAYMENTS COVERAGE
PORTABLE ELECTRONIC EQUIPMENT COVERAGE
For specific coverage details see endorsement. \$70.00

ADDITIONAL COVERAGES ANNUAL PREMIUM \$70.00

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SUMMIT AUTOMOBILE POLICY DECLARATIONS (CONTINUED)

NAMED INSURED POLICY NUMBER

JOHN M KYLEODVRV FMA8198831

FORM DATE FORM TITLE

FORMS APPLICABLE TO POLICY

- * PP0001 09/18 PERSONAL AUTO POLICY PROVISIONS
- * PP0166 04/19 IN-AMENDMENT OF POLICY PROVISIONS
- * PP0266 09/18 IN-TERMINATION PROVISIONS
- * PP0305 09/18 LOSS PAYABLE CLAUSE ENDORSEMENT
- * PP0307 01/05 TRAILER/CAMPER BODY COVERAGE (MAXIMUM LIMIT OF LIABILITY)
- * PP0309 09/18 SINGLE LIABILITY LIMIT
- * PP0309 01/05 SINGLE LIABILITY LIMIT
- * PP0326 06/94 EXCLUSION-LIABILITY COVERAGE EXCLUSION ENDORSEMENT
- * PP0326 09/18 EXCLUSION-LIABILITY COVERAGE EXCLUSION ENDORSEMENT
- * PP0328 09/18 MISCELLANEOUS TYPE VEHICLE AMENDMENT-MOTOR HOMES
- * PP0328 06/98 MISCELLANEOUS TYPE VEHICLE AMENDMENT-MOTOR HOMES
- * PP0402 09/18 SINGLE UNDERINSURED MOTORISTS LIMIT
- * PP0441 09/18 IN-SINGLE UNINSURED MOTORISTS LIMIT
- * PP0469 09/18 IN-UNINSURED MOTORISTS COVERAGE
- * PP1301 12/99 EXCL-COVERAGE FOR DAMAGE TO YOUR AUTO ENDORSEMENT
- * PP1301 09/18 EXCL-COVERAGE FOR DAMAGE TO YOUR AUTO ENDORSEMENT
- * PP1303 09/18 TRUST ENDORSEMENT
- * PP1303 01/05 TRUST ENDORSEMENT
- * PP1306 01/09 CUSTOM EQUIPMENT EXCLUSION ENDORSEMENT
- * PP1402 09/18 IN-UNDERINSURED MOTORISTS COVERAGE
- * PP2316 10/13 PERSONAL VEHICLE SHARING PROGRAM EXCLUSION ENDORSEMENT
- * PP2323 04/19 IN-MISCELLANEOUS TYPE VEHICLE ENDORSEMENT
- * PP2323 12/13 IN-MISCELLANEOUS TYPE VEHICLE ENDORSEMENT
- * PP2324 09/18 IN-JOINT OWNERSHIP COVERAGE
- * PP2340 10/15 PUBLIC OR LIVERY CONVEYANCE EXCLUSION ENDORSEMENT
- * 2-7049 03/92 HOMEOWNERS - AUTOMOBILE DEDUCTIBLE WAIVER MAILER
- * 20-1456 09/86 HOMEOWNERS-AUTO DEDUCTIBLE WAIVER ENDORSEMENT
- * 20-1746 03/05 IN-NOTICE TO POLICYHOLDERS-FILING OF COMPLAINTS W/INSURANCE DEPT
- * 20-1768 08/91 MUTUAL POLICY CONDITIONS-APPLICABLE TO CENTRAL MUTUAL
- * 20-1769 08/91 PROVISIONS APPLICABLE TO CENTRAL MUTUAL & ALL AMERICA INS CO
- * 20-2199 06/19 FAIR CREDIT REPORTING POLICYHOLDER NOTICE-CENTRALS PATHWAY AUTO
- * 20-2199 01/11 FAIR CREDIT REPORTING POLICYHOLDER NOTICE-CENTRALS PATHWAY AUTO
- * 3-3063 05/16 PERSONAL VEHICLE SHARING PROGRAM REVISION ADVISORY NOTICE TO
- * 3-1824 05/16 STATED AMOUNT COVERAGE ANTIQUE OR CLASSIC AUTOS
- * 3-2394 08/07 MISCELLANEOUS TYPE VEHICLE AMENDATORY ENDORSEMENT
- * 3-2645 04/13 CENTRAL MUTUAL SUMMIT AUTO ENDORSEMENT
- * 3-3058 05/16 AGREED VALUE COVERAGE
- * 3-3061 05/16 AGREED VALUE COVERAGE ANTIQUE AND CLASSIC AUTOS
- * 3-2328 03/90 ADDITIONAL INTEREST ENDORSEMENT
- * 3-3062 05/16 ADVISORY NOTICE TO POLICYHOLDERS REGARDING PUBLIC OR LIVERY
- * 3-3059 05/16 AGREED VALUE COVERAGE - CENTRAL MUTUAL SUMMIT (R)

* Denotes forms attached with this transaction.

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SUMMIT AUTOMOBILE POLICY DECLARATIONS (CONTINUED)

NAMED INSURED POLICY NUMBER

JOHN M KYLEODVRV FMA8198831

PRESIDENT SECRETARY DATE

THESE DECLARATIONS REPLACE ALL PRIOR DECLARATIONS IF ANY, AND WITH POLICY PROVISIONS AND ENDORSEMENTS,

COMPLETE THIS POLICY

05/05/2021

REASON(S) FOR TRANSACTION

New business issued

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3-2328 03/90

ADDITIONAL INTEREST ENDORSEMENT

It is agreed the insurance extended by this policy for Bodily Injury Liability, Property Damage Liability, and Medical

Payments will also apply to the interest named below as an additional insured, provided coverage arises out of

acts or omissions of any person or organization qualifying as an insured under Part A of this policy. The inclusion

of an additional insured does not increase the limits of the Company's liability.

Name and Address of Additional Insured: SEE DECLARATIONS

Policy Number:

Effective on Policy Effective Date or on

SEE DECLARATIONS (whichever is later).

THIS ENDORSEMENT IS SUBJECT TO ALL TERMS, CONDITIONS AND EXCLUSIONS OF THIS POLICY.

3-2328 03/90

FMA 8198831

20-2154 01/10

Reference #:

20-2154 01/10

FAIR CREDIT REPORTING ACT POLICYHOLDER NOTICE

Central Insurance Companies uses an insurance score code derived from a consumer credit report in underwriting personal insurance policies. This information was used in developing your insurance premium and was only one of many

factors considered.

We obtained this consumer credit information from a consumer reporting agency: LexisNexis Consumer Center, PO Box

105108, Atlanta, Georgia, 30348-5108, Telephone 1-800-456-6004. Please note, LexisNexis does not make any decision

regarding how the consumer credit information is used in underwriting your insurance policy. LexisNexis is merely an information provider.

LexisNexis orders your consumer credit report and runs it through a mathematical scoring model which assigns various weights based on the information contained in the report. The score code developed at the conclusion of the process

is a representation of the likelihood of future loss activity.

LexisNexis identified the following characteristics from your credit report that had an influence on the insurance score code

you received:

Please note that nearly all credit reports sent through the scoring model have information that influences the score code even for persons with a high credit rating.

It is important to understand that while these characteristics influence your score code, they don't necessarily determine the

code you receive. In certain cases, particularly for persons with a very high credit rating, the factors listed may have had no

effect on the code received. They are simply listed in order to comply with state laws that require insurance companies to list

the most significant adverse credit history factors.

LexisNexis publishes a guide to help consumers better understand the consumer credit characteristics it analyzes in its scoring model. On the internet, go to www.consumerdisclosure.com. On the upper part of the screen, click on Reports. This

will take you to a screen with a list of report options. On this screen, click on Credit Reports/Insurance Scores. A listing of all

of the characteristics analyzed by the scoring model is provided, along with explanatory detail.

Under the federal Fair Credit Reporting Act, you have the right to obtain a free copy of your consumer report from the consumer reporting agency within 60 days of this notice. You also have the right to dispute with the consumer reporting agency the accuracy or completeness of any information in your consumer report. Once you have directly notified the consumer reporting agency of your dispute, the agency must, within a reasonable period of time reinvestigate and record the

current status of the disputed information. If after reinvestigation, such information is found to be inaccurate or unverifiable,

such information must be promptly deleted from your records. If the reinvestigation does not resolve the dispute, you may file

a brief statement setting forth the nature of the dispute with the consumer reporting agency. Your filed statement will then be included or summarized in any subsequent consumer report containing the information in question. For complete information regarding the Federal Consumer Credit Protection Law, please refer to the Code of Laws of the United States of America, Title 15, Chapter 41, Subchapter III.