

**MASSACHUSETTS PERSONAL AUTO COVERAGE SELECTIONS PAGE**

This Page and Any Attached Endorsements Form a Part of Your Policy.

Insured:           DONALD            
 5073

Transaction: **Renewal**  
 Tran Effective: 3/19/09  
 Pol Number:                       
 Pol Effective: 3/19/09  
 Pol Expire: 3/19/10

Product:  
 Group Code:

Company:                                       
 Agent:           Insurance Agency, Inc            
 Agent Code:                      Agent Sub Code:                     

Vehicle 1					Vehicle 2				
Auto	Year	Make	Model	Body Style	Auto	Year	Make	Model	Body Style
1	2008	TOYOTA	PRIUS	4D HA					
Reg. Plate#		VIN		Class Sym	Reg. Plate#		VIN		Class Sym
				17 14					

COVERAGES	Vehicle 1				Vehicle 2				
	Parts 1-12	Limits	Deduct.	Premium	Adjust.	Limits	Deduct.	Premium	Adjust.
1 Bodily Injury to Others	\$20,000 Person \$40,000 Accident	NONE	508	508	\$20,000 Person \$40,000 Accident				
2 Personal Injury Protection	\$8,000 Person	Yourself Household	153	153	\$8,000 Person	Yourself Household			
3 BI By Uninsured Auto (\$20,000/\$40,000)	100,000 Person 300,000 Accident	NONE	17	17	Person Accident	NONE			
4 Damage to Someone Else's Property (\$5,000)	100,000 Accident	NONE	597	597	Accident	NONE			
5 Optional BI to Others Motorcycle Guest Excl:	250,000 Person 500,000 Accident	NONE	666	666	Person Accident	NONE			
6 Medical Payments	Person	NONE			Person	NONE			
7 Collision ACV	x Waiver	500	1,051	1,051	Waiver				
8 Limited Collision ACV									
9 Comprehensive ACV	\$100 Glass Ded	500	278	278	\$100 Glass Ded				
10 Substitute Transportation	30 Day MAX 900	NONE	62	62	Day MAX for each Disabement	NONE			
11 Towing and Labor	50 for each Disabement	NONE	8	8	Person	NONE			
12 Bodily Injury Caused By Underinsured Auto	100,000 Person 300,000 Accident	NONE	29	29	Person Accident	NONE			
<b>SAFE DRIVER INSURANCE PLAN</b>	Credit Surcharge		3,369	3,369	Credit Surcharge				
	<b>PREMIUM</b>				<b>PREMIUM</b>				

See attached page(s) for additional discounts, endorsements, and/or remarks.

**TOTAL PREMIUM 3,369**  
**CHANGE PREMIUM 3,369**  
**BILLED PREMIUM 3,369**

Vehicle 1				Vehicle 2			
Auto	Garage if Diff. from Residence	Territory	Lease	Auto	Garage if Diff. from Residence	Territory	Lease
1	DORCHESTER	21	N				
Secured Lender/Lessor-Additional Insured, if Rented				Secured Lender/Lessor-Additional Insured, if Rented			

Driver Information							Operator Status: E-Worked, P-Period, O-Occasional, H-Hobby				
Opr#	Operator Name	D.O.B.	Lic. Number	State	Lic. Date	Train	Defer	Veh. 1	Veh. 2	Veh. 3	Veh. 4
1	DONALD			MA	1/29/04	N					P