

TWFG INS SERVICES  
1201 LK WOODLAND 4020  
THE WOODLANDS, TX 77380



MICHAEL A COTICCHIO  
3100 NE 48TH COURT  
308  
LIGHTHOUSE POINT, FL 33064

**Policy number: 969278936**

Underwritten by:  
Progressive American Insurance Co  
January 12, 2024  
Policy Period: May 1, 2023 - May 1, 2024  
Page 1 of 3

**1-954-730-7989**

**TWFG INS SERVICES**

Contact your agent for personalized service.

**agent.progressive.com**

**Online Service**

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

**1-800-274-4499**

To report a claim.

# Boat Insurance Coverage Summary

## This is a copy of your Declarations Page

Your coverage began on May 1, 2023 at the later of 12:01 a.m. or the effective time shown on your application. This policy period ends on May 1, 2024 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy limits shown for a watercraft may not be combined with the limits for the same coverage on another watercraft, unless the policy contract or endorsements indicate otherwise. The policy contract is form 2749 FL (07/19). The contract is modified by forms Z910 (12/16), Z820 (12/16), A314 (09/21) and A359 FL (08/22).

### Drivers and household residents

**Michael A Coticchio**

Additional information: Named insured

**Michele Coticchio**

**Outline of coverage****2019 Ranger 243 Cruise**

Total Horsepower: 200

Hull ID #: RGR19341C919

Registration number: IL9934kz

Propulsion type: Outboard

Number of motors: 1

Outboard #1

Year: 2019

Make: Mercury

Horsepower: 200

	Limits	Deductible	Premium
Liability To Others			\$92
Bodily Injury and Property Damage Liability	\$300,000 combined single limit each accident		
Fuel and Oil Spill Coverage	\$1,076,000 per occurrence		2
Uninsured Boater	\$300,000 combined single limit each accident		23
Medical Payments	\$1,000 each person		1
Comprehensive	Agreed Value \$55,000	\$2,500	1,366
	Named Storm Deductible	\$5,000	
Collision	Agreed Value \$55,000	\$1,000	173
Included with Comprehensive and Collision:			
Disappearing Deductible			
Wreckage Removal			
Marine Electronics			
Coastal Navigation	75 Nautical Miles		included
Hurricane Haul Out	Selected		20
<b>Subtotal policy premium</b>			<b>\$1,677.00</b>
2022-7 FIGA Assessment			21.80
2023 FIGA Assessment			11.74
<b>Total 12 month policy premium and fees</b>			<b>\$1,710.54</b>

**Premium discounts**

Policy	
969278936	Automatic Card Payments (ACP), Home Owner, Prompt Payment and Transfer
Driver	
Michael A Coticchio	Safety Course and Responsible Driver
Michele Coticchio	Safety Course and Responsible Driver
Vehicle	
2019 Ranger	Original Owner
243 Cruise	

**Lienholder and Additional Interest information**

Vehicle	Lienholder	Additional interest
2019 Ranger 243 Cruise	NORTH SHORE BANK	Palm Aire at Coral key apts
RGR19341C919	Minneapolis, MN 55439	condominium Inc.
		lighthouse point, FL 33064
		NORTH SHORE BANK
		Minneapolis, MN 55439

**THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU. (THIS SEPARATE DEDUCTIBLE ALSO APPLIES TO TROPICAL STORM LOSSES.)**

**Important information regarding Coastal Navigation restrictions**

A coastal navigation limit applies to this policy. Unless you pay a premium for Coastal Navigation Limit coverage, you are not covered for losses that occur in ocean waters more than 75 nautical miles from the coast of the United States or Canada or for losses that occur in any territory or territorial waters of any country other than the United States or Canada.

**Important information on the watercraft value**

The watercraft dollar amount that is listed on the declarations page is the amount that you indicated and includes the watercraft, motor(s), trailer (if you selected coverage for your trailer), permanently attached equipment, marine electronics and portable boating equipment.

**Policyholder inquiries**

You may call your agent at 1-954-730-7989 to present inquiries or obtain information about coverage, and to obtain assistance with any complaints.

**Agent signature**



**Company officers**



Secretary

(Executing in the name of and on behalf of the underwriting company listed above.)