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AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLMENT PO BOX 3758 **GRAND RAPIDS MI 49501-3758** 

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CHARLES HENRY MOUNT JR 3440 MAYNARD CIR GAINESVILLE GA 30506-3734

# Your policy includes Towing and Roadside Assistance!

Look for your towing and roadside assistance card inside this package. It includes the toll-free towing and roadside assistance phone number and instructions on how to use this service.

**ELECTRONIC BILL SENT** 

Dear CHARLES HENRY MOUNT JR:

Your policy packet is enclosed. Please take a few minutes to read through the enclosed documents. This contract is your assurance of protection in case of an insured loss. Copies of your current policy forms are available upon your request. If you have any questions, please contact us at the address shown above or call us at 1-800-958-6108.

Thank you for choosing us for your insurance. We appreciate the opportunity to provide you coverage.

Sincerely,

AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLMENT 16 - 4433 - 001

#### P.S. Did you know ... Electronic payments are available!

To sign up for electronic payments, please go to foremostpayonline.com. You may choose to have us automatically withdraw your premium payments electronically from your designated account as they come due, or go to foremostpayonline.com to see your bill and make a payment. As always, simply call our billing service at 1-800-532-4221 with questions about your bill.

Need to report a claim? The Claims Contact Center is available to take your call 24 hours a day, seven days a week at 1-800-527-3907, or you may report a claim online at Foremost.com.

255 - 0080470780 - 01 Form 741176 07/13

COPY

# Important Notice Your Motor Home Policy AMOUNT STATED ON THE DECLARATIONS

The amount we pay for loss to your motor home is the Actual Cash Value at the time of a loss, including, where required by law, the applicable sales tax and fees, up to the amount shown on the Declarations, less any applicable deductible. The premiums for **PART D - COVERAGE FOR DAMAGE TO YOUR AUTO** are based on the amount shown on the Declarations. The amount shown on the Declarations is the amount you last reported to us.

Make sure your motor home is insured for the current actual cash value. The amount shown on the Declarations should reflect your motor home's current actual cash value, including any permanently attached equipment or accessories. Over time, your motor home's value may decrease, remain the same, or increase, especially if improvements are made. You may want to talk to an RV dealer or another knowledgeable source in your area to review the value of your motor home.

Please contact your insurance representative if the value of your motor home has changed. You'll find their name and contact information listed on your policy Declarations Page.

#### **Please Read Your Policy for Details**

This notice is not part of your policy. Please read your entire policy. The policy is our contract with you. If there are any differences between your policy and this notice, your policy will take precedence.

Make sure your insurance coverage keeps up with the changes in your life. If you have questions about your policy or coverage limits, or would like to make a change, please contact your insurance representative.

Thank you for your trust and confidence.

732792 07/19







# **MOTOR HOME** AMENDED **DECLARATIONS**

**Policy Number: 255 - 0080470780** -01 **Policy Period** 12:01 A.M. Standard

Time

From 02/11/22 To 02/11/23

Administrative Office P.O. Box 2450 Grand Rapids, Michigan 49501

> AMENDED DECLARATIONS EFFECTIVE 11/11/2022 SUPERSEDES ANY PREVIOUS DECLARATIONS BEARING THE SAME POLICY NUMBER FOR THIS POLICY PERIOD. REASON FOR CHANGE: POLICY INFORMATION.

#### YOU AS NAMED INSURED AND YOUR ADDRESS

CHARLES HENRY MOUNT JR 3440 MAYNARD CIR GAINESVILLE GA 30506-3734

#### YOUR POLICY IS SERVICED BY:

AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLMENT PO BOX 3758 GRAND RAPIDS MI 49501-3758

**Agency Code:** 16 - 4433 - 001 **Telephone:** 1-800-958-6108

#### PREMIUM SUMMARY

TOTAL PREMIUM AND OTHER AMOUNTS FOR THIS POLICY PERIOD

\$ 2,914.00

ADDITIONAL PREMIUM RESULTING FROM THIS CHANGE

\$ 544.00

#### OPERATOR INFORMATION

**Operator Name License Number** State **Birth Date Marital Status** #1 CHARLES HENRY MOUNT JR 056515102 GA 07/23/1969 M #2 JULIE LOCKLEAR-MOUNT 063190639 GA 05/14/1969 M

#### **UNIT #1 MOTOR HOME DESCRIPTION**

**Purchase** Year Length VIN Manufacturer Model Year 2003 38 4UZAAHAK63CL64230 ALLEGRO ALLEGRO BUS SERIES 2022

**Territory Location Address** County 3440 MAYNARD CIR HALL 004 GAINESVILLE GA 30506-3734

This Declarations with your policy provisions and any endorsements, issued to form a part thereof, completes the above numbered policy. We will insure you for the coverage for which a premium is shown. Detailed coverage descriptions and any limitations will be found in your policy.

			PREMIUM
PART A - LIAB	ILITY COVERAGE		
	BODILY INJURY LIABILITY	\$	34.00
	LIMITS OF LIABILITY:		
	\$100,000 EACH PERSON/ \$300,000 EACH ACCIDENT	Ċ	24.00
	PROPERTY DAMAGE LIABILITY LIMIT OF LIABILITY: \$50,000 EACH ACCIDENT	\$	34.00
PART C - UNIN	ISURED MOTORISTS COVERAGE		
P1417-09/18	UNINSRD MTR BI REDUCD/AT FAULT LIAB	\$	18.00
	LIMITS OF LIABILITY:		
	\$100,000 EACH PERSON/ \$300,000 EACH ACCIDENT		
	UNINSRD MTR PD REDUCD/AT FAULT LIAB	\$	4.0
	LIMIT OF LIABILITY: \$50,000 EACH ACCIDENT		
PART D - COV	ERAGE FOR DAMAGE TO YOUR AUTO		
	OTHER THAN COLLISION	\$	386.0
	ACTUAL CASH VALUE UP TO \$55,000		
	LESS \$1,000 DEDUCTIBLE THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL		
		^	100 0
	COLLISION ACTUAL CASH VALUE UP TO \$55,000	\$	192.0
	LESS \$1,000 DEDUCTIBLE		
	THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL		
OTHER COVER	RAGES		
5392-04/10	PERSONAL PROPERTY	\$	10.00
	AMOUNT OF INSURANCE: \$1,000 LESS \$1,000 DEDUCTIBLE		
6709-07/10	VACATION LIABILITY	\$	5.0
	LIMIT OF LIABILITY: \$10,000		
2707-06/94	EMERGENCY EXPENSE	\$	5.0
0444 04404	LIMIT OF LIABILITY: \$750		• • •
8644-06/94	TOWING AND ROADSIDE ASSISTANCE AMOUNT: REASONABLE AND NECESSARY EACH DISABLEMENT	\$	25.0
2217-06/94		\$	5.0
2217-00/94	SEE BENEFITS SCHEDULE	Ą	J.0
OTHER FORMS	S AND ENDORSEMENTS		
	AMENDMENT OF POLICY PROVISIONS-GA		INCLUDE
-	ADDITIONAL BENEFIT ENDORSEMENT		INCLUDEI
5484-01/05	MOTORHOME POLICY		INCLUDE

Form 085997 10/15 **INSURED COPY** 255-0080470780 -001 **PAGE** 2

# UNIT #1 DISCOUNTS AND SURCHARGES The following Discounts and Surcharges have been applied to Your Premiums.

ANTI-LOCK BRAKING SYSTEM DISCOUNT MULTI-POLICY DISCOUNT

-14.00-53.00

TOTAL DISCOUNTS

-67.00

			JNIT #2 MOTOR HO	ME DESCRI	PTION		Purchase
Year	Length	VIN	Manufacturer		Model	•	Year
2011	43	5VBBA87AXBA113199	TIFFIN		ALLEGRO SERIES		2022
Location Address				County		Territory	
3440 MAYNARD CIR GAINESVILLE GA 30506-3734			HALL		004		

	UNIT #2 SUMMARY	PREMIUM
PART A - LIAB	ILITY COVERAGE	
	BODILY INJURY LIABILITY LIMITS OF LIABILITY: \$100,000 EACH PERSON/ \$300,000 EACH ACCIDENT	\$ 39.00
	PROPERTY DAMAGE LIABILITY LIMIT OF LIABILITY: \$50,000 EACH ACCIDENT	\$ 38.00
PART C - UNIN	SURED MOTORISTS COVERAGE	
PP1417-09/18	UNINSRD MTR BI REDUCD/AT FAULT LIAB LIMITS OF LIABILITY: \$100,000 EACH PERSON/\$300,000 EACH ACCIDENT	\$ 18.00
	UNINSRD MTR PD REDUCD/AT FAULT LIAB  LIMIT OF LIABILITY: \$50,000 EACH ACCIDENT	\$ 4.00
PART D - COV	ERAGE FOR DAMAGE TO YOUR AUTO	
	OTHER THAN COLLISION ACTUAL CASH VALUE UP TO \$208,400 LESS \$1,000 DEDUCTIBLE THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	\$ 1,301.00
	COLLISION ACTUAL CASH VALUE UP TO \$208,400 LESS \$1,000 DEDUCTIBLE THIS DEDUCTIBLE MAY DIMINISH 25% PER CLAIM-FREE RENEWAL	\$ 746.00
OTHER COVER	RAGES	
5392-04/10	PERSONAL PROPERTY AMOUNT OF INSURANCE: \$1,000 LESS \$1,000 DEDUCTIBLE	\$ 10.00
6709-07/10	VACATION LIABILITY LIMIT OF LIABILITY: \$10,000	\$ 5.00
2707-06/94	EMERGENCY EXPENSE LIMIT OF LIABILITY: \$750	\$ 5.00
8644-06/94	TOWING AND ROADSIDE ASSISTANCE AMOUNT: REASONABLE AND NECESSARY EACH DISABLEMENT	\$ 25.00
2217-06/94	SCHEDULED MEDICAL BENEFITS SEE BENEFITS SCHEDULE	\$ 5.00

# OTHER FORMS AND ENDORSEMENTS

2174-07/19	AMENDMENT OF POLICY PROVISIONS-GA	INCLUDED
5025-07/10	ADDITIONAL BENEFIT ENDORSEMENT	INCLUDED
5484-01/05	MOTORHOME POLICY	INCLUDED

### **UNIT #2 TOTAL PREMIUM AND OTHER AMOUNTS**

\$ 2,196.00

### UNIT #2 DISCOUNTS AND SURCHARGES The following Discounts and Surcharges have been applied to Your Premiums.

ANTI-LOCK BRAKING SYSTEM DISCOUNT

\$ -43.00

MULTI-POLICY DISCOUNT

\$ -176.00

TOTAL DISCOUNTS

\$ -219.00

#### **UNIT #2 LOSS PAYEE**

TRUIST PO BOX 200047 KENNESAW GA 30156-9246

MINIMUM EARNED PREMIUM \$ 0.00

#### **SPECIAL INFORMATIONAL FORMS**

004592	02/11	DELIVERY OF CANCELLATION/NON-RENEWAL
732792	07/19	POLICY AMOUNT STATED ON DECLARATION
740410	11/02	GEORGIA ID CARD

**PROCESSED**: November 2, 2022

INSURED COPY

255-0080470780

-001 **PAGE** 4

#### THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

# UNINSURED MOTORISTS COVERAGE REDUCED BY AT-FAULT LIABILITY LIMITS - GEORGIA PP1417 09/18

#### **SCHEDULE**

Any amount payable for damages under this coverage will be in excess of the applicable per accident deductible.

Uninsured Motorists Coverage	Per Accident Deductible Applies
Bodily Injury Liability	Yes \$ Deductible Amount
Property Damage Liability	Yes \$ Deductible Amount

#### PART C - UNINSURED MOTORISTS COVERAGE

Part **C** is replaced by the following:

#### **Insuring Agreement**

- A. We will pay compensatory damages in excess of any applicable deductible shown in the Schedule or in the Declarations for this coverage which an "insured" is legally entitled to recover from the owner or operator of an "uninsured motor vehicle" because of:
  - **1.** "Bodily injury" sustained by an "insured" and caused by an accident; and
  - 2. "Property damage" caused by an accident.

The owner's or operator's liability for these damages must arise out of the ownership, maintenance or use of the "uninsured motor vehicle". We will pay under this coverage only after the limits of liability under any applicable liability bonds or policies have been exhausted by payment of judgments or settlements. However, if a settlement is made between an "insured" and the insurer of the "uninsured motor vehicle" for an amount that does not exhaust the limits of liability under any applicable liability bonds or policies, we will not pay under this coverage unless we previously consented to such settlement in writing.

Any judgement for damages arising out of a suit brought without our written consent is not binding on us.

- B. "Insured" as used in this endorsement means:
  - 1. You or any "family member".
  - 2. Any other person "occupying" "your covered auto".
  - 3. Any person for damages that person is entitled to recover because of "bodily injury" to which this coverage applies sustained by a person described in 1. or 2. above.
- **C.** "Property damage" as used in this endorsement means injury to or destruction of:
  - "Your covered auto" (including its resulting loss of use).

- 2. Any property owned by a person listed in 1. or 2. of the definition of "insured" while contained in "your covered auto".
- **D.** "Uninsured motor vehicle" means a land motor vehicle or trailer of any type:
  - 1. To which there is neither:
    - **a.** Cash or securities on file with the Georgia Director of Public Safety; nor
    - **b.** A liability bond or policy;

applicable at the time of the accident.

- 2. To which a liability bond or policy applies at the time of the accident but its limit of liability is either:
  - a. Less than the sum of the limits of liability applicable to the "insured" for Uninsured Motorists Coverage under this Policy and any other policy; or
  - b. Reduced by payments to others to an amount which is less than the sum of the limits of liability applicable to the "insured" for Uninsured Motorists Coverage under this Policy and any other policy.
- 3. Which is a hit-and-run vehicle whose operator or owner cannot be identified and which hits or which causes an accident resulting in "bodily injury" or "property damage" without hitting:
  - a. You or any "family member";
  - **b.** A vehicle which you or any "family member" are "occupying"; or
  - c. "Your covered auto".

If there is no physical contact with the hit-and-run vehicle, the facts of the accident must be corroborated by an eyewitness to the accident other than the "insured" making the claim.

- **4.** To which a liability bond or policy applies at the time of the accident but the bonding or insuring company:
  - a. Denies coverage; or
  - **b.** Is or becomes insolvent.

However, "uninsured motor vehicle" does not include any vehicle or equipment:

- 1. Owned by or furnished for the regular use of you or any "family member".
- 2. Operated on rails or crawler treads.
- **3.** Designed mainly for use off public roads while not on public roads.

4. While located for use as a residence or premises.

#### **Exclusions**

- **A.** We do not provide Uninsured Motorists Coverage for "property damage" or "bodily injury" sustained by any "insured":
  - 1. If that "insured" or the legal representative settles the "bodily injury" or "property damage" claim without our consent. However, an "insured" may, without our consent, release the insurer of the "uninsured motor vehicle" from further obligation to pay damages after accepting from such insurer a settlement which exhausts the limits of liability under any applicable liability bonds or policies.
  - 2. When "your covered auto" is being used as a public or livery conveyance. This includes but is not limited to any period of time "your covered auto" is being used by any "insured" who is logged into a "transportation network platform" as a driver, whether or not a passenger is "occupying" the vehicle.

This Exclusion (A.2.) does not apply to a share-the-expense car pool.

- 3. Using a vehicle without a reasonable belief that that "insured" is entitled to do so. This Exclusion (A.3.) does not apply to a "family member" using "your covered auto" which is owned by you.
- **4.** If the property is contained in or struck by a motor vehicle (other than "your covered auto") owned by you or any "family member".
- **B.** This coverage shall not apply directly or indirectly to benefit:
  - 1. Any insurer or self-insurer under any of the following or similar law:
    - a. Workers' compensation law; or
    - b. Disability benefits law.
  - 2. Any insurer of property.
- **C.** We do not provide Uninsured Motorists Coverage for punitive or exemplary damages.

#### **Limit Of Liability**

A. The limit of "bodily injury" liability shown in the Declarations for each person for Uninsured Motorists Coverage is our maximum limit of liability for all damages, including damages for care, loss of services or death, arising out of "bodily injury" sustained by any one person in any one accident. Subject to this limit for each person, the limit of "bodily injury" liability shown in the Declarations for each accident for Uninsured Motorists Coverage is our maximum limit of liability for all damages for "bodily injury" resulting from any one accident.

The limit of "property damage" liability shown in the Declarations for each accident for Uninsured Motorists Coverage is our maximum limit of liability for all "property damage" resulting from any one accident.

This is the most we will pay regardless of the number of:

- 1. "Insureds":
- 2. Claims made;
- Vehicles or premiums shown in the Declarations; or
- Vehicles involved in the accident.
- **B.** The limit of liability shall be reduced by all sums paid because of the "bodily injury" or "property damage" by or on behalf of persons or organizations who may be legally responsible.

This includes all sums paid under Part A of the Policy.

- **C.** No one will be entitled to receive duplicate payments for the same elements of loss under this coverage and:
  - 1. Part A or Part B of this Policy; or
  - 2. Any Personal Property Coverage provided by this Policy.
- D. We will not make a duplicate payment under this coverage for any element of loss for which payment has been made by or on behalf of persons or organizations who may be legally responsible.
- **E.** We will not pay for any element of loss if a person is entitled to receive payment for the same element of loss under any workers' compensation law.
- **F.** No payment will be made for loss paid or payable to the "insured" under Part **D** of the Policy.

#### Other Insurance

If there is other applicable similar insurance available under more than one policy or provision of coverage that is similar to the insurance provided under this Part of the Policy:

- 1. The following priorities of recovery apply:
  - First The Policy affording Uninsured Motorists Coverage to the "insured" as a named insured or family member.
  - Second The Uninsured Motorists Coverage applicable to the vehicle the "insured" was occupying at the time of the accident.
- We will pay only for our share of the loss. Our share is the proportion that our limit of liability bears to the total of all limits applicable on the same level of priority.

# PERSONAL PROPERTY COVERAGE

**Motor Home 5392** 04/10

#### **DEFINITIONS**

"Insured" as used in this coverage means named insured, spouse and "family member".

#### PERSONAL PROPERTY COVERAGE

We will pay up to the Limit of Liability shown in the Declarations to insure risk of direct, sudden, and accidental physical loss to an "insured's" personal property unless the loss is excluded elsewhere in this endorsement.

Personal Property coverage includes an "insured's" dog(s) or cat(s) while occupying "your motor home" or at the site where you have been granted the exclusive right to use as a place to park and reside in "your motor home" for recreational purposes.

We do not under any circumstances insure loss, damage, or remediation costs caused by or resulting from the presence of mold, mildew, or other fungi, their secretions, and dry and wet rot of any kind regardless of the cause, condition or loss that led to their formation or growth.

#### **Special Limits**

Special Limits of Liability apply to the following groups of personal property. These limits do not increase the total Limit of Liability provided by Personal Property Coverage. The Special Limit of Liability for each group is the maximum we will pay for any one loss for all property included in the following groups. The maximum we will pay for all groups combined is \$1,000.

#### **Special Limits**

0	f Liability	Personal Property Group
1.	\$ 500	Firearms
2.	500	Furs
3.	500	Gold
4.	500	Silver
5.	500	Jewelry & watches
6.	500	Memorabilia, souvenirs, trading cards, collector's items, and similar articles whose age or history contribute to their value.

# **Property We Do Not Insure**

We do not insure:

1. Animals except an "insured's" dog(s) or cat(s).

Musical Instruments

- 2. Land motor vehicles.
- 3. Boats and boat motors or engines.
- 4. Trailers.

**7.** 1,000

- 5. Aircraft.
- 6. Money, checks, and securities.
- 7. Documents or records whether media is paper, tape, disc, or other electronic storage media.

- Credit cards, money transfer cards, or stored value cards.
- 9. Deeds, bills, notes, or other evidence of debt.
- 10. Salesperson's samples and merchandise for sale.

#### **EXCLUSIONS**

We do not insure loss caused directly or indirectly by any of the following. Such loss is excluded regardless of any other cause or event contributing concurrently to the loss.

- **1.** Loss caused intentionally by any "insured" or performed at any "insured's" direction.
- Loss caused intentionally by any person having lawful possession or the right to use an "insured's" personal property. This includes any person who rents or borrows "your motor home".
- 3. Loss caused by nuclear reaction, explosion, radiation or radioactive contamination.
- Loss caused by war, whether declared or undeclared, including civil war, insurrection, rebellion or revolution.
- **5.** Loss arising out of using an "insured's" Personal Property for any "business" purpose.
- 6. Loss arising out of any illegal activity.
- 7. Loss to an "insured's" Personal Property caused only by impact of the "motor home's" wheels with the road or ground.
- 8. Loss due to mysterious disappearance.
- 9. Loss due and confined to:
  - **a.** Wear and tear, marring, scratching, freezing, deterioration; or
  - **b.** Latent defect, mechanical breakdown, manufactured defect, mechanical failure.
- Loss due and confined to leakage from rain, sleet or snow or its resulting damage whether or not wind-driven.
- **11.** Loss to Personal Property separately described and specifically insured elsewhere in this or any other policy.
- 12. Loss caused by continuous or repeated seepage or leakage of water or steam from within a plumbing, heating, automatic fire protection sprinkler system or air conditioning system or from within an appliance that occurs over a period of weeks, months or years.
- **13.** Death or injury to an "insured's" dog(s) or cat(s) resulting from heat, dehydration, exposure to weather, illness or other natural cause.

#### **OUR PAYMENT METHODS**

The amount we pay for loss to an "insured's" personal property, except for dog(s) or cat(s), will be the lowest of:

- 1. The difference between the actual cash value of the property immediately before the loss and its actual cash value immediately after the loss;
- 2. The actual cash value of the lost or damaged part of the property at the time of the loss;
- **3.** The amount required to repair or replace the lost or damaged property;
- **4.** The Amount of Insurance shown on the Declarations Page; or
- **5.** Any applicable Special Limits of Liability on certain property.

The amount we will pay for loss to an "insured's" dog(s) or cat(s) will be:

- 1. \$1,000 regardless of the number of dog(s) or cat(s) involved in any one loss.
- 2. \$1,000, less any payment we made toward veterinary expenses, if an "insured's" dog(s) or cat(s) dies in, or as a result of, a covered loss.

We may make a cash settlement or repair or replace the property with property of like kind and quality. We will give the named insured notice of our intention within 30 days after we receive an "insured's" proof of loss. The damage to an "insured's" property will reduce the Limit of Liability available during the policy period by the amount of the damage. Coverage will return to the Limit of Liability shown in the Declarations upon completion of the repairs or replacements.

If, as a result of loss to the "insured's" personal property we pay the "insured" in cash or by replacement, at our option, we have the right to take legal title of the "insured's" property.

#### Pairs, Sets or Series of Objects

In case of loss to a part of a pair, set or series of objects, pieces or panels, either interior or exterior, we may:

- Repair or replace any part to restore the property to its value before the loss.
- **2.** Pay the difference between actual cash value of the property before and after the loss.
- **3.** Pay the reasonable cost of providing a substitute to match the remainder of the property as closely as possible.

We will not be obligated to repair or replace the entire pair, set or series of objects, pieces or panels, either interior or exterior, when a part is lost or damaged.

#### **Stolen Property**

Before a loss for stolen property is paid or the property is replaced, we may return any stolen property to an "insured" at our expense with payment for any damage.

#### **Deductibles**

Any loss to an "insured's" personal property will be subject to the personal property deductible shown in the Declarations.

But in the event of one loss to "your motor home" and personal property the total deductible will not exceed the amount shown in the Declarations for "your motor home".



2 of 2 - 5392 04/10

All other provisions of your policy apply.

FOLD ALONG PERFORATIONS BEFORE ATTEMPTING TO REMOVE YOUR CARD. FOLDING WILL MINIMIZE THE CHANCE OF THE CARD BEING TORN.

### GEORGIA INSURANCE POLICY INFORMATION CARD

FOREMOST INSURANCE COMPANY POLICY NUMBER

255 0080470780

YEAR MAKE/MODEL 2003 ALLEGRO

GRAND RAPIDS, MICHIGAN

ORIGINAL ISSUE DATE EXPIRATION DATE 02/11/22 02/11/23

VEHICLE IDENTIFICATION NUMBER 4UZAAHAK63CL64230

CHARLES HENRY MOUNT JR
Insured's
Name
And
Address
CHARLES HENRY MOUNT JR
JULIE LOCKLEAR-MOUNT
3440 MAYNARD CIR
GAINESVILLE GA 30506-3734

Agent's AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLM PO BOX 3758 GRAND RAPIDS MI 49501-3758

The current status of actual motor vehicle liability insurance coverage is maintained by the Georgia Department of Motor Vehicle Safety and is accessible to law enforcement agencies upon a check of the vehicle registration.

#### MOTOR VEHICLE INSURANCE INFORMATION CARDS

Your motor vehicle insurance information card(s) for the vehicle indicated are contained in this sheet.

LOOK AT THE CARDS CAREFULLY. Compare the information shown on them to the vehicle's registration. If the information does not agree, contact your agent immediately so that the necessary corrections can be made. If these are renewal cards, keep them in a safe place until they take effect. Destroy the old cards only after the new ones are in force.

FOLD ALONG PERFORATIONS BEFORE ATTEMPTING TO REMOVE YOUR CARD. FOLDING WILL MINIMIZE THE CHANCE OF THE CARD BEING TORN.

#### GEORGIA INSURANCE POLICY INFORMATION CARD

FOREMOST INSURANCE COMPANY POLICY NUMBER

255 0080470780

YEAR MAKE/MODEL 2003 ALLEGRO

GRAND RAPIDS, MICHIGAN
ORIGINAL ISSUE DATE EXPIRATION DATE
02/11/22 02/11/23

VEHICLE IDENTIFICATION NUMBER 4UZAAHAK63CL64230

CHARLES HENRY MOUNT JR

Insured's
JULIE LOCKLEAR-MOUNT
3440 MAYNARD CIR
Address GAINESVILLE GA 30506-3734

Agent's AFFINITY BRKG LLC DBA GOOD SAM
Name C/O FX INS AGENCY LLC-FULFILLM
Address PO BOX 3758

GRAND RAPIDS MI 49501-3758

The current status of actual motor vehicle liability insurance coverage is maintained by the Georgia Department of Motor Vehicle Safety and is accessible to law enforcement agencies upon a check of the vehicle registration.

# KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION

IN CASE OF ACCIDENT: Report all accidents to your agent as soon as possible or call TOLL FREE:

1-800-527-3907

Obtain the following information:

- 1. Name and address of each driver, passenger and witness.
- 2. Name of Insurance Company and policy number for each vehicle involved.

Form 740410 11/02



# KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION

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1-800-527-3907

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- 1. Name and address of each driver, passenger and witness.
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Form 740410 11/02

## FOLD ALONG PERFORATIONS BEFORE ATTEMPTING TO REMOVE YOUR CARD. FOLDING WILL MINIMIZE THE CHANCE OF THE CARD BEING TORN.

### **GEORGIA INSURANCE POLICY INFORMATION CARD**

FOREMOST INSURANCE COMPANY

POLICY NUMBER 255 0080470780

YEAR MAKE/MODEL 2011 TIFFIN

GRAND RAPIDS, MICHIGAN
ORIGINAL ISSUE DATE EXPIRATION DATE 02/11/23

VEHICLE IDENTIFICATION NUMBER 5VBBA87AXBA113199

Insured's JULIE LOCKLEAR-MOUNT JR
Name And Address GAINESVILLE GA 30506-3734

Agent's AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLM PO BOX 3758 GRAND RAPIDS MI 49501-3758

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LOOK AT THE CARDS CAREFULLY. Compare the information shown on them to the vehicle's registration. If the information does not agree, contact your agent immediately so that the necessary corrections can be made. If these are renewal cards, keep them in a safe place until they take effect. Destroy the old cards only after the new ones are in force.

FOLD ALONG PERFORATIONS BEFORE ATTEMPTING TO REMOVE YOUR CARD. FOLDING WILL MINIMIZE THE CHANCE OF THE CARD BEING TORN.

#### GEORGIA INSURANCE POLICY INFORMATION CARD

FOREMOST INSURANCE COMPANY POLICY NUMBER

255 0080470780

YEAR MAKE/MODEL 2011 TIFFIN

GRAND RAPIDS, MICHIGAN
ORIGINAL ISSUE DATE EXPIRATION DATE
02/11/22 02/11/23

VEHICLE IDENTIFICATION NUMBER 5VBBA87AXBA113199

Insured's JULIE LOCKLEAR-MOUNT JR
Name And Address GAINESVILLE GA 30506-3734

Agent's AFFINITY BRKG LLC DBA GOOD SAM C/O FX INS AGENCY LLC-FULFILLM PO BOX 3758 GRAND RAPIDS MI 49501-3758

The current status of actual motor vehicle liability insurance coverage is maintained by the Georgia Department of Motor Vehicle Safety and is accessible to law enforcement agencies upon a check of the vehicle registration.

# KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION

IN CASE OF ACCIDENT: Report all accidents to your agent as soon as possible or call TOLL FREE:

1-800-527-3907

Obtain the following information:

- 1. Name and address of each driver, passenger and witness.
- 2. Name of Insurance Company and policy number for each vehicle involved.

Form 740410 11/02



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