

FLORIDA UTILITY SERVICES 1, LLC
3336 GRAND BLVD. SUITE 102
HOLIDAY, FL. 34690
863-904-5574

September 2, 2015

Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL. 32399

RECEIVED FPSC
15 SEP 11 AM 9:18
COMMISSION
CLERK

RE: Docket # 140175-WU. Application for a staff assisted rate case for Crestridge Utilities, LLC in Pasco County.

Dear Commission Clerk:

Enclosed please find a copy of the auto policy quote for the company trucks. This cost should be allocated to all utilities. Please see enclosed spreadsheet reflecting allocation of costs.

Thank You.

On behalf of the utility,



Mike Smallridge

MORRISON INS INC
 PO BOX 3646
 HOLIDAY, FL 34690

PROGRESSIVE

Underwritten by:
 Progressive Express Ins Company
 August 31, 2015
 Policy Period: Aug 31, 2015 - Aug 31, 2016
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FLORIDA UTILITY 1
 SERVICES LLC
 3336 GRAND BLVD STE 102
 HOLIDAY, FL 34690

Customer Phone number: 1-352-302-7406

Commercial Auto Insurance Quote

Thank you for contacting me about your auto insurance needs. I am pleased to provide you with a quote from Progressive Express Ins Company, a company that offers competitive rates and many outstanding services. Progressive gives you access to your policy information through progressiveagent.com, your customized Web site. Claims service is available 24 hours a day, 7 days a week by calling 1-800-274-4499.

Policy information

Business type: Construction-Builders & General Contractors
 Sub business type: Heavy Construction - Road & Utilities

Quote for 12 month policy period

If you pay your premium in full, you will receive a discount as shown.

Total policy premium	\$4,542.00
Paid in full discount	-646.00
Policy premium if paid in full	\$3,896.00

Payment plans

Payment Method: 10 payments

Electronic Funds Transfer (EFT) assures that your payment is on time. Each payment includes a \$1.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 0.0% Down	\$4,542.00	\$454.20	9 payments of \$455.20
11 Payments, 2.5% Down	\$4,542.00	\$567.75	10 payments of \$398.43
11 Payments, 6.67% Down	\$4,542.00	\$757.16	10 payments of \$379.49
10 Payments, 20.0% Down	\$4,542.00	\$908.40	9 payments of \$404.74
6 Pay, Seasonal, 20.0% Down	\$4,542.00	\$908.40	5 payments of \$727.72
10 Payments, 25.0% Down	\$4,542.00	\$1,135.50	9 payments of \$379.50
4 Pay, Seasonal, 25.0% Down	\$4,542.00	\$1,135.50	3 payments of \$1,136.50

Make payments by mail or at progressiveagent.com. Each payment includes a \$3.00 service charge.

Payment plan	Total premium	Initial payment	Payments
10 Payments, 10.0% Down	\$4,542.00	\$454.20	9 payments of \$457.20
11 Payments, 12.5% Down	\$4,542.00	\$567.75	10 payments of \$400.43
11 Payments, 16.67% Down	\$4,542.00	\$757.16	10 payments of \$381.49
10 Payments, 20.0% Down	\$4,542.00	\$908.40	9 payments of \$406.74
6 Pay, Seasonal, 20.0% Down	\$4,542.00	\$908.40	5 payments of \$729.72
10 Payments, 25.0% Down	\$4,542.00	\$1,135.50	9 payments of \$381.50
4 Pay, Seasonal, 25.0% Down	\$4,542.00	\$1,135.50	3 payments of \$1,138.50
4 Pay, Quarterly, 25.0% Down	\$4,542.00	\$1,135.50	3 payments of \$1,138.50

1 Payment	\$3,896.00	\$3,896.00	None
OPF	\$4,542.00	\$4,542.00	None

To purchase insurance

Please review the information on your quote for accuracy; incomplete and inaccurate information could affect your rate. These rates are subject to verification of information. If you have any questions or would like to purchase a Progressive policy, please call me at **1-727-934-5751**. Your coverage will begin once your initial payment has been received. Thanks again for the opportunity to work with you.

Rated drivers

Failure to accurately and completely report all driver information may result in premium differences and service delays.

Name	Age	Marital status	Points	Additional information
MICHAEL SMALLRIDGE	46	Married	0	
JACKIE LOVE	54	Single	3	

Outline of coverage

The policy limits shown for a vehicle may not be combined with the limits for the same coverage on another vehicle unless the policy contract or endorsements indicate otherwise.

Description	Limits	Deductible	Premium
Liability To Others			\$3,059
Bodily Injury Liability	\$25,000 each person/\$50,000 each accident		
Property Damage Liability	\$25,000 each accident		
Uninsured Motorist Non-Stacked	\$25,000 each person/\$50,000 each accident		374
Basic Personal Injury Protection			162
Without Work Comp-Named Insured Only	\$10,000 each person	\$0	
Medical Payments	\$2,000 each person		40
Comprehensive			243
See Auto Coverage Schedule	Limit of liability less deductible		
Collision			664
See Auto Coverage Schedule	Limit of liability less deductible		
Total 12 month policy premium			\$4,542.00

Auto coverage schedule

- 2000 GMC SONOMA** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)
VIN: **1GTC51459YK290080** Garaging Zip Code: 34690 Territory: 33 Radius: 200 miles
Personal use: N Body type: Pickup Use class: S

Liability Premium	Liability	UM/UIM BI	PIP	Med Pay	
	\$1193	\$187	\$81	\$16	
Physical Damage Premium	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
	\$1,000	\$78	\$1,000	\$201	\$1,756

2. **2008 MITSUBISHI RAIDER** Actual Cash Value (plus \$2,000.00 Permanently Attached Equip)
 VIN: **1Z7HC28K585619791** Garaging Zip Code: 34690 Territory: 33 Radius: 200 miles
 Personal use: Y Body type: Pickup Use class: S

	Liability	UM/UIM BI	PIP	Med Pay	
Liability Premium	\$1866	\$187	\$81	\$24	
	Comp Deductible	Comp Premium	Collision Deductible	Collision Premium	Auto Total
Physical Damage Premium	\$1,000	\$165	\$1,000	\$463	\$2,786

Premium discounts

Policy	
	Business Experience
Vehicle	
2000 GMC SONOMA	Air Bag and Anti-lock Brakes
2008 MITSUBISHI RAIDER	Anti-Theft Standard, Air Bag and Anti-lock Brakes
Form QTE FL (05/08)	

	Percent	# Customers		
Total	100.0%	2189	\$	4,542.00
PC	5.8%	126		261.44
WLWW	13.9%	304		630.78
CHARLIE CREEK	6.5%	143		296.71
HOLIDAY GARDENS	20.7%	453		939.94
CRESTRIDGE	28.1%	615		1,276.08
EAST MARION	4.7%	102		211.64
FOUR POINTS	11.4%	250		518.73
BIMINI BAY	9.0%	196		406.68
	100.0%	2189	\$	4,542.00