ACORD		VIRGINIA GARAGE AND DEALERS COVERAGES/LIMITS SECTION													DATE (MM/DD/YY)		
PRODUCER																	
COVERAGES	/LIMI1	rs						•									
COVERAGES		COV					LIMI	TS OF LIABILITY		COVER		LIMITS OF LIABILITY					
		AUTO SYMBOLS			GARAGE OPERATIONS							21 21				AUTOMOBILE	
	-	22	-	1					OTHER THAN	-							
	-								AUTO ONLY	TO ONLY MEDICAL PAYMENTS		22 28		PREM OPERATIONS			
LIABILITY		23 29			EA ACCIDENT \$ \$								9				
		24			AGGREGATE \$				UNLIMITED			24		BI			
						DEALERS ONLY: LIMITED				UNINSURE		22 2					
PERSONAL INJURY PROTECTION		25			EXT MED EXP \$							IDENT	\$				
		27			INCOME LOSS \$			\$				24	PROPERTY D	DAMAGE \$			
510/														DEI	DUCTIBLE	MAXIMUM	
	SICAL	DAI	MAG	jF		_	LOC #		ENTER	THE LIMIT F	OR EACH LOCA	TION		PE	RAUTO	DED PER LOSS	
COMP SPECIFIED		22 27						\$ \$						\$			
PERILS		23		28				\$						\$		\$	
		24		31				\$						\$		\$	
COLLISION		22 24			28										DUCTIBLE		
OTUER		23		27		31								\$			
OTHER																	
						_		1						DEI	DUCTIBLE	MAXIMUM	
GAR	AGE I	KEE	PER	S			LOC #		ENTER THE LIM	IT FOR EACH	LOCATION		# OF AUTOS	PE	RAUTO	DED PER LOSS	
LEGAL		COMP SPECIFIED						\$								\$	
LIABILITY			RILS	20		30		\$						\$		\$	
								\$						\$		\$	
DIRECT BAS	DIRECT BASIS PRIMARY COLLISION EXCESS					\$								_			
PRIMA			N		30		\$								_		
								\$									
OTHER																	
PHYSICAL DAMAG		DTIN						# DEALER/	# TRANS	3-	# HOISTS	TEMPO	RARY LOCATION		т	ANSIT LIMIT	
							REPAIRER PLATES PORTATION P			LATES							
COVERED AUTO S	VMBOL	\$		NOI	N-REP							\$			\$		
(21) ANY AUTO	THIDOL	0						AUTOS OTHER TH. AUTOS SUBJECT 1			HIRED AUTOS C		I GARAGE BUS		(32) COI	MPANY USE	
(22) ALL OWNED A (23) OWNED PRIV						(2	(6) OWNED A	AUTOS SUBJECT 1 CALLY DESCRIBED	FO UM LAW	(30) AUTOS LEFT FOR SERVICE/REPAIR/STORAGE (31) AUTOS ON CONSIGNMENT AND DEALER AUTOS							
· ,			1030			(2	() SPECIFIC	ALLI DESCRIBEL	AUTUS	(31)7		ISIGINIVIENT AI	ND DEALER AUT	55			
ENDORSEMENTS/REMARKS																	
								-									
																IF ISSUED,	
																ST 60 DAYS	
							ECT A	ND AT AN	Y TIME 1	HERE	FTER FO	OR REA	SONS ST	ATE	D IN TH	IE POLICY.	
NOTICE OF INSUR														SONG		HAN YOU. SUCH	
INFORMATION	AS WI	ELL /	AS C	DTHE	ER PE	RS	ONAL AN	D PRIVILEGED	INFORMATIO	ON COLLE	CTED BY US	S OR OUR	AGENTS MAY	IN C	ERTAIN CI	RCUMSTANCES	
																T CORRECTION /AILABLE UPON	
REQUEST. CON																	
	~																
I ACKNOWLED BODILY INJUR																	
													INITIALS	OF NA	MED INSU	JRED(S)	
										TED HERE	WILL APPL	Y TO ALL F		Y REN	IEWALS, C	CONTINUATIONS	
AND CHANGES	UNLES	SSIN	NOTI	FY Y	00 0	THE	ERWISE IN	N WRITING.									
APPLICANT'S									DATE (M	M/DD/YY)	PRODUCER'S	5					
SIGNATURE											SIGNATURE						

ACORD 138 VA (2/98)