

PERSONAL AUTO QUOTE QUESTIONNAIRE

DATE: _____
Needed by: _____

CAR AND DRIVER INFO

1. Applicant's name _____ Ph# _____
2. Garaging Address _____
3. Mailing Address _____
4. Presently Ins'd? _____ Company _____ Exp. _____
Losses: _____ date of loss _____ Amt _____
5. Veh #1 New Purchase or Lease _____
6. Lienholder/Loss Payee info _____
7. Veh.#1 Year, make, model _____ Value\$ _____
8. Vin Veh #1 _____
9. Veh #2 New Purchase or Lease _____
10. Lienholder/Loss Payee info _____
11. Veh.#2 Year, make, model _____ Value\$ _____
12. Vin Veh #2 _____
13. Veh #3 New Purchase or Lease _____
14. Lienholder/Loss Payee info _____
15. Veh.#3 Year, make, model _____ Value\$ _____
16. Vin Veh #3 _____

***** (Lease (automatic 100/300/50 limits)) *****
***** (Need loss payee/lienholder info if loaned or leased*****) *****
***** (If no loan do not need comp/coll) *****

17. Driver 1: DOB: _____ DL# _____ SS# _____
18. Driver 2: DOB: _____ DL# _____ SS# _____
19. Driver 3: DOB: _____ DL# _____ SS# _____
20. Any Tickets/Accidents Driver 1 _____ Driver 2 _____ Driver 3 _____
21. Date(s) _____ Amount pd\$ _____

SEE PAGE 2 FOR LIMITS OF COVERAGE DESIRED

LIMITS OF COVERAGE DESIRED

VEHICLE #1

BI/PD: 10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50
PIP = : 10,000 -- -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Xtra-Med: -- Yes/No \$1000 - \$5000
Rental: -- Yes/No
Towing: -- Yes/No
UM: Stacked/Unst -- Yes/No
(Limits must be equal to or lower than BI/PD)
10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50

VEHICLE #2

BI/PD: 10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50
PIP = : 10,000 -- -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Xtra-Med: -- Yes/No \$1000 - \$5000
Rental: -- Yes/No
Towing: -- Yes/No
UM: Stacked/Unst -- Yes/No
(Limits must be equal to or lower than BI/PD)
10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50

VEHICLE #3

BI/PD: 10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50
PIP = : 10,000 -- -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Comp : -- Ded Amt. \$250/\$500/\$1000
Xtra-Med: -- Yes/No \$1000 - \$5000
Rental: -- Yes/No
Towing: -- Yes/No
UM: Stacked/Unst -- Yes/No
(Limits must be equal to or lower than BI/PD)
10/20/10 -- 25/50/25 – 50/100/50 – 100/300/50