

Auto/Recreational Vehicle Insurance Questionnaire

Named Insured:

First Name:_____ **Last Name:**_____ **Married? Y/N**

- **DOB:** _____
- **SS#:** _____
- **DL#:** _____
- **Phone:** _____
- **E-mail:** _____
- **Employment:** _____
- **Drive to Work? Y/N** **If Yes, Distance One Way?** _____

Co-applicant/Spouse

First Name:_____ **Last Name:**_____ **Married? Y/N**

- **DOB:** _____
- **SS#:** _____
- **DL#:** _____
- **Phone:** _____
- **E-mail:** _____
- **Employment:** _____
- **Drive to Work? Y/N** **If Yes, Distance One Way?** _____

Additional Drivers/Children of Driving Age:

First Name:_____ **Last Name:**_____

- **DOB:** _____
- **SS#:** _____
- **DL#:** _____
- **Student or Working? If working, Where?** _____
- **Good Student Discount? Y / N**
- **Relationship?** _____

First Name:_____ **Last Name:**_____

- **DOB:** _____
- **SS#:** _____

- DL#:_____
- Student or Working? If working, Where?_____
- Good Student Discount? Y / N
- Relationship? _____

First Name:_____ Last Name:_____

- DOB: _____
- SS#:_____
- DL#:_____
- Student or Working? Where?_____
- Good Student Discount? Y / N
- Relationship? _____

Physical Address:_____

Mailing Address:_____

(If different from Physical) _____

Vehicle Information:

Liability/Prop Damage Limits:_____ UM/UIM:_____

1. Year_____ Make_____ Model_____

VIN:_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N Roadside/Towing: Y / N Financed: Y / N

2. Year_____ Make_____ Model_____

VIN:_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

3. Year_____ Make_____ Model_____

VIN:_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

4. Year_____ Make_____ Model_____

VIN:_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

5. Year_____ Make_____ Model_____

VIN:_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

Rec Vehicle Information:

1. Type (ATV, Camper, Motorcycle, etc)_____

Year_____ Make_____ Model_____

VIN/S#:_____

If applicable, Length/CC's_____

Value_____

Comp Deductible:_____ Collision Deductible:_____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

2. Type (ATV, Camper, Motorcycle, etc)_____

Year_____ Make_____ Model_____

VIN/S#:_____

If applicable, Length/CC's _____

Value _____

Comp Deductible: _____ Collision Deductible: _____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

3. Type (ATV, Camper, Motorcycle, etc) _____

Year _____ Make _____ Model _____

VIN/S#: _____

If applicable, Length/CC's _____

Value _____

Comp Deductible: _____ Collision Deductible: _____

Rental: Y / N

Roadside/Towing: Y / N

Financed: Y / N

Lienholders:

Vehicle Number

1. Name & Address: _____

2. Name & Address: _____

3. Name & Address: _____

4. Name & Address: _____

5. Name & Address: _____

6. Name & Address: _____

7. Name & Address: _____

8. Name & Address: _____
