



NEW or RENEWAL

Agency Name - Address & Producer

PROJECTED EFFECTIVE DATE

EXPIRATION DATE

PRODUCER

PHONE

EMAIL

TRANSPORTATION INSURANCE Quick Quote Sheet

Insured Information

Name				TAX ID #			DOT#			MC#				
Address				City				State			ZIP			
DBA				Business Type (Corp, LLC, Sole)						Garage State				
Contact				EMAIL					Phone					
Yrs in Business			Yrs Experience			# Trucks			# Trailers			CDL (Y or N)		
CARGO Hauled with Percentage														
Contract			Common			Private			Exempt			Same Cargo & Radius (Y or N)		
CAUTO - Coverage Limits			Target Premium Commercial Auto					GL Target Premium						
Auto Liability Limit			Uninsured Motorist Limit					General Liability Limit						
Auto Liability Deductible			UM CSL or Split Limit					General Liability Deductible						
Medical Payments			Hired Auto (Y or N)					Non-Owned Auto (Y or N)						
Current Insurance Carrier								Policy Number						
How Long with Current Carrier?								Insurance Ever Cancelled or Non-Renewed					Reason	

Insured Operations

Radius of Operation (Miles)		0 - 50		50 - 200		200 +		Longest Haul						
Annual Miles Per Vehicle				Farthest City of Travel										
Physical Damage Information			Target Premium Physical Damage					TIV						
SCOL	COMP		Collison		Deductible		Total # of Vehicles							
Current Insurance Carrier								Policy Number						
How Long with Current Carrier?								Insurance Ever Cancelled or Non-Renewed					Reason	
Motor Truck Cargo Information			Target Premium Motor Truck Cargo					TIV						
Cargo Limit		Cargo Deductible			Reefer Coverage (Y or N)									
Current Insurance Carrier								Policy Number						
How Long with Current Carrier?								Insurance Ever Cancelled or Non-Renewed					Reason	

Insured Vehicles and Drivers List

Vehicle Number	VIN #	Year	Make	Veh Type	Bus Class	Gross Weight	Longest One Way Trip	Est. Annual Miles	Value

Driver Number	Driver Name (First Middle Last) and Address	Date of Birth	DL State	Drivers License Number	DL Expir.	Years of CDL License	Date of Hire	# of Acc. and/or Viol(3YR)
								(A)
								(V)
								(A)
								(V)
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