

# BOAT / WATERCRAFT INSURANCE QUOTE

NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

GARAGING : \_\_\_\_\_

HOMEOWNER?: \_\_\_\_\_ MARRIED?: \_\_\_\_\_

AUTO POLICY: \_\_\_\_\_

INSURED	SS#	DOB	DL#
_____	_____	_____	_____

BOAT / WATERCRAFT: YEAR / MAKE / MODEL	DESCRIPTION	SERIAL NUMBER (Hull ID)
_____	_____	_____

HULL INFO: HULL LENGTH	HULL MATERIAL	TOTAL VALUE (incl trailer)
_____	_____	_____

# OF MOTORS	REGISTRATION NUMBER
_____	_____

TOTAL HORSEPOWER	MAX SPEED	PROPULSION TYPE (OUTBOARD / INBOARD)
_____	_____	_____ (OUTBOARD / INBOARD)

LOSS PAYEE: \_\_\_\_\_

TRAILER: YEAR / MAKE / MODEL	DESCRIPTION	REGISTRATION NUMBER
_____	_____	_____

LIMITS REQUESTING: BI: \_\_\_\_\_ PD: \_\_\_\_\_ UB: \_\_\_\_\_  
COMP & COLL. DEDUCTIBLE: \_\_\_\_\_ MED PAY: \_\_\_\_\_ PE: \_\_\_\_\_  
WATER TOW: \_\_\_\_\_ BAHAMAS: \_\_\_\_\_ ROADSIDE: \_\_\_\_\_  
ADDITIONAL EQUIP. (fishing, scuba, etc.): \_\_\_\_\_  
RENTAL?: \_\_\_\_\_ TOWING?: \_\_\_\_\_  
COVERAGE REQUESTED (pip & bodily injury required?) \_\_\_\_\_

ACCIDENTS / VIOLATIONS / ARRESTS? \_\_\_\_\_

REFERRAL SOURCE: \_\_\_\_\_  
INFO TAKEN BY: \_\_\_\_\_ DATE: \_\_\_\_\_