

Boat Quote Date: _____

Name: _____
Address: _____
Address: _____

Phone: _____
County: _____
How Long at Address _____

Driver 1: _____ DOB: _____ DT: _____ Married: _____ Education: _____
SS#: _____ PA#: _____ Occupation: _____ YRS: _____
Driver 2: _____ DOB: _____ DT: _____ Married: _____ Education: _____
SS#: _____ PA#: _____ Occupation: _____ YRS: _____
Driver 3: _____ DOB: _____ DT: _____ Married: _____ Education: _____
SS#: _____ PA#: _____ Occupation: _____ YRS: _____
Driver 4: _____ DOB: _____ DT: _____ Married: _____ Education: _____
SS#: _____ PA#: _____ Occupation: _____ YRS: _____

All Children: Names & Date of Birth:

Boat 1: YR: _____ Make/Model: _____ VIN: _____
Length: _____ Inboard or Outboard: _____ Hull: _____ Value: _____
Engine Make: _____ S# _____ Value: _____
Horsepower: _____ Top Speed: _____
Trailer Make: _____ S# _____ Value: _____

Boat 2: YR: _____ Make/Model: _____ VIN: _____
Length: _____ Inboard or Outboard: _____ Hull: _____ Value: _____
Engine Make: _____ S# _____ Value: _____
Horsepower: _____ Top Speed: _____
Trailer Make: _____ S# _____ Value: _____

Safety Course: _____ Type: _____ Sonar: _____ Radio: _____
Depth Finder: _____ Sprinklers: _____ Fire Extinguishers: _____

ACCIDENTS:

VIOLATIONS:

SUSPENSIONS:

Past 5 Years

DO YOU OWN A HOME? _____

DO YOU OWN AN AUTO? _____

CURRENT CARRIER: _____ Prem: _____

CURRENT CARRIER: _____ Prem: _____

LIFE INSURANCE

Do you have life? _____

What type? _____

What Company? _____

Paying Per Month? _____

LIABILITY

UM BOATER _____

UIM BOATER _____

COMP DED _____

COLL DED _____

Quoted By: _____ Date: _____

Company Quoted: _____

Quoted Premium: _____

SOURCE: _____