

E-mail: insurance@mysai.co HOME INFORMATION FAX#: (970) 237- 3412

ACCOUNT OWNER INFORMATION

HOME INFORMATION

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

D.O.B.: _____

MARITAL STATUS: _____

OCCUPATION / HOW LONG: _____

ADDITIONAL APPLICANT INFORMATION

NAME: _____

GENDER: MALE FEMALE D.O.B.: _____

OCCUPATION / HOW LONG _____

CURRENT INSURANCE INFORMATION

CURRENT INSURANCE CARRIER/POLICY EXPIRATION: _____

DECLARED AMOUNT OF COVERAGE: _____

POLICY #: _____

To Obtain Your Insurance Score

In connection with this application for insurance, we may review your credit report or obtain or use a credit-based insurance score based on the information contained in that credit report. We will use this information to give the most accurate quote possible. We may use a third party in connection with the development of your credit score.

Please Initial: _____

IS HOME WITHIN CITY LIMITS: YES NO

FT TO FIRE HYDRANT: _____ Miles to Fire St. _____

ROOFING MATERIAL: _____
(ASPHALT, SLATE, WOOD, ETC.)

IF HOME IS MORE THAN 10 YRS OLD: (YEAR UPDATED)

ELECTRICAL: _____ PLUMBING: _____
(WATER HEATER)

HEATING: _____ ROOF: _____

PRIMARY TYPE OF HEAT: _____
(CENTRAL-GAS, ELECTRIC, FLOOR FURNACE, OTHER)

SUPPLEMENTAL HEATING: _____
(FIREPLACE, WOOD OR PELLET STOVE, GAS, ETC)

IS THERE A BUSINESS ON PREMISES: YES NO

DO YOU OWN ANY DOGS: YES NO

WHAT BREED OF DOG? _____

ALARM SYSTEM (Select all that apply):

LOCAL BURGLAR ALARM: YES NO

CENTRAL FIRE: YES NO

CENTRAL BURGLAR: YES NO

MORTGAGE COMPANY: _____

ADDRESS: _____

CITY / STATE / ZIP: _____

LOAN #: _____

MORTGAGE BILLED: YES NO

Are you interested in FLOOD INSURANCE? YES NO

Are you interested in EARTH QUAKE INS? YES NO

All rate quotes are subject to the accuracy of the information provided and are effective at the time the rate quote is requested. Rate quotes are not an implicit offer to insure and are provided only for the purpose of comparing prices or approximate costs in response to a specific request. All applicants are subject to eligibility guidelines and rates are subject to change without prior notice.

Email: insurance@mysai.co

RECREATIONAL VEHICLE INFORMATION

FAX: 970-237-3412

BOAT

PRIMARY OPERATOR: _____

YEARS EXPERIENCE: _____ SAFETY CLASS: _____
(DATE)

STORAGE ADDRESS: _____

SUMMER: _____

WINTER: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

HULL
YEAR: _____ MAKE: _____

MODEL: _____ LENGTH: _____

VIN#: _____

BODY: _____ STYLE: _____
(Fiberglass, Aluminum, Wood, etc.) (Inboard, Outboard, etc.)

MOTOR
YEAR: _____ MAKE: _____

MODEL: _____ HP: _____

MAX SPEED(MPH): _____ VALUE: _____

VIN #: _____

TRAILER
YEAR: _____ MAKE: _____

MODEL: _____ VALUE: _____

VIN #: _____

MOTOR HOME

YEAR: _____ MAKE: _____

MODEL: _____ LENGTH: _____

VIN#: _____

STYLE: _____
(Motorhome, Slide-in, Trailer)

STORAGE: _____

Annual Mileage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

MOTORCYCLE / ATV / SNOWMOBILE

YEAR: _____ MAKE: _____

MODEL: _____ CC's: _____

VIN#: _____

PRIMARY OPERATOR: _____

YEARS EXPERIENCE: _____ SAFETY CLASS: _____
(DATE)

Annual Mileage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

Email: insurance@mysai.co

VEHICLE INFORMATION

FAX: 970-237-3412

VEHICLE 1

YEAR: _____ MAKE: _____

MODEL: _____

VIN#: _____

How do you use this vehicle? _____
(Business, Work Commute, Pleasure, Etc.)

If driving to work, how many miles one way? _____

Annual Milage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

VEHICLE 3

YEAR: _____ MAKE: _____

MODEL: _____

VIN#: _____

How do you use this vehicle? _____
(Business, Work, Pleasure)

If driving to work, how many miles one way? _____

Annual Mileage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

VEHICLE 2

YEAR: _____ MAKE: _____

MODEL: _____

VIN#: _____

How do you use this vehicle? _____
(Business, Work, Pleasure, Etc.)

If driving to work, how many miles one way? _____

Annual Milage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW USED
(Month / Year)

LIEN ON VEHICLE 2: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____

VEHICLE 4

YEAR: _____ MAKE: _____

MODEL: _____

VIN#: _____

How do you use this vehicle? _____
(Business, Work, Pleasure)

If driving to work, how many miles one way? _____

Annual Mileage: _____ Odometer Reading: _____

PURCHASE DATE: _____ NEW / USED
(MONTH / YEAR)

LIEN ON VEHICLE 4: YES NO VALUE: _____

LIEN HOLDER: _____

ADDRESS: _____

LOAN #: _____