



**SUNSET CORRIDOR  
INSURANCE SERVICES**

# INSURANCE 'SHOPPERS' QUOTE REQUEST

Name		Address		
City		County	Zip	

Home Phone	Business Phone	Occupation	Employer
------------	----------------	------------	----------

## AUTOMOBILE/RECREATIONAL VEHICLE

Present Insurance Company?	Present liability coverage: \$
Date Policy Expires?	Deductibles: \$ Collision Comprehensive

CAR	Year	Make	Model (complete description)	H.P./C.C.	Miles—1 way to work	Used in Business	Annual Miles	Principal Driver			Occasional Driver			Last 3 Years	
								Age	Sex	'B' student	Age	Sex	'B' student	#Citations	Accident Date
1															
2															
3															

## HOMEOWNERS/CONDO-OWNERS/RENTERS

Present Insurance Company?	Any losses in last 3 years?
Date Policy Expires?	Date: Type: Amt:

HOMEOWNERS Present Policy Dwelling Amount? \$	Square Feet in Dwelling?	Year Built?	<i>Thank you.</i>
CONDO-OWNERS or RENTERS (circle one) Present Personal Property Policy Amount? \$		Number of Units in Building?	