

PACIFIC INTERNATIONAL UNDERWRITERS

P.O. Box 2007 • 627 Dayton Street • Edmonds, WA 98020 • PH 800-562-8403 • FAX 888-814-8701

COLLECTOR CAR FAX QUOTE

DATE: _____ EMAIL: _____
 AGENCY: _____ CONTACT: _____
 FAX #: _____ PHONE #: _____

ALL DRIVERS MUST BE LICENSED AT LEAST 10 YEARS (SPOUSES CANNOT BE EXCLUDED)			
DRIVER #1	NAME:		AGE:
	MARRIED / SINGLE	MALE / FEMALE	
RECORD:			

DRIVER #2	NAME:		AGE:
	MARRIED / SINGLE	MALE / FEMALE	
RECORD:			

ARE ANY OF THE VEHICLES OWNED BY A BUSINESS OR CORPORATION? Y / N	
ARE ANY OF THE VEHICLES UNDER RESTORATION? Y / N	
IF YES, WHAT PERCENT IS RESTORED:	%

NO. & AGES OF THE CHILDREN IN HOUSEHOLD:			
LICENSED DRIVERS IN HOUSEHOLD WITH OUT 10 YEARS DRIVING EXPERINCE WILL BE EXCLUDED			
MILEAGE PLAN:	1000	3000	6000

GARAGING ADDRESS:				
ARE VEHICLES GARAGED ALL YEAR ROUND? Y / N				
	Year	Make	Model	Value

VEHICLE 1:
VEHICLE 2:
VEHICLE 3:

NAME OF PRIMARY CARRIER		
LIMITS OF PRIMARY INS.	(LIAB & UM)	PIP OR MED
DESIRED LIMITS FOR LIAB:	UM:	PIP:
*Liab limits cannot exceed primary limits		*Need signed release if NO PIP

LIST ANY MODIFICATIONS OR CUSTOMIZATIONS:	

OTHER VEHICLES IN HOUSEHOLD (PRIMARY AUTO MUST BE LESS THAN 15YRS OLD)			
1 YEAR:	MAKE:	3 YEAR:	MAKE:
2 YEAR:	MAKE:	4 YEAR:	MAKE: