

# PACIFIC INTERNATIONAL UNDERWRITERS

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

## MOTORCYCLE / ATV FAX QUOTE

DATE:	AGENCY:	ATTN:
FAX:	PHONE:	EMAIL:
APPLICANT'S NAME	AGE:	
CITY:	STATE:	ZIP:
YEAR:	MAKE:	MODEL:
CC SIZE:	LIST ALL OPERATORS DRIVING RECORDS IN THE PAST (3) YEARS WITH DOB & VIOLATIONS. QUOTE IS BASED UPON YOUNGEST DRIVER INFORMATION	
OPERATOR #1:	MARRIED SINGLE	
YEARS EXPERIENCE:		
OPERATOR #2:	MARRIED SINGLE	
YEARS EXPERIENCE:		
DATE PURCHASED:	CURRENT INS. EXPIRATION DATE:	
DISCOUNTS: (Mark those that apply)		
SAFETY COURSE - Date Completed ____/____		VALID MC ENDORSEMENT (HIGH PERFORMANCE BIKES)
MULTIPLE GUIDEONE POLICIES, LIST POLICY #'S		
MULTI-UNIT DISCOUNTS:    2 UNITS                      3 UNITS                      4 OR MORE UNITS		
GARAGED                      MOTORCYCLE ASSOCIATION MEMBER                      HOMEOWNER		

COVERAGE	LIMITS	PREMIUM
LIABILITY BI/PD		
COMPREHENSIVE	DED.	
COLLISION	DED.	
MEDICAL		
UM/BI		
UM/PD		
SR-22 FILING		
ACCESSORIES (VALUE)		
	TOTAL:	

This quote is premium calculation only. Risk eligibility and binding are subject to the company's rules and application requirements. Submit risks can usually be approved by phone call to you underwriter

QUOTE GOOD FOR 30 DAYS