



PACIFIC INT'L UNDERWRITERS®

Phone: 800-562-8403 or 425-771-8988

Fax: 888-814-8701 or 425-775-9046

PUBLIC AUTO QUICK QUOTE SHEET

Agency Name _____

Phone: _____

Contact Person: _____

Fax/Email _____

NAMED INSURED: _____ Requested Effective Date _____

Type of operation _____

Garaging Address: _____ Radius: _____

Years driving experience _____ Years owned vehicle _____

Years in Business _____

Years of Verifiable Insurance _____ Present Insurance Carrier _____

Cancelled or Non-renewed? _____ Any Losses in in last 3 years? _____

If losses, date of loss, details, name of driver and amounts paid _____

Drivers

Full Name	License #	DOB	Years Exp	Years Emp	Viol/Acc last 3 years?

Vehicles

Year/Make	Current Value	Seating Capacity	# of inches if stretch

Percent of trips to the airport _____ Percent of unscheduled trips _____

Percent of trips arranged (at least) 24 hours in advance _____

Do drivers wear formal chauffeur attire or suits? _____

Does applicant transport unscheduled passengers? _____

Does the applicant charge by the hour? ___ Trip? ___ Or miles _____

Does the applicant have corporate contracts? _____ Is there a fare or meter box? _____

Does the applicant have personal auto insurance? _____

Any vehicles equipped with disability equipment (wheelchair lifts, etc)? _____

Limits

Liability _____

UM _____

MED PAY _____

HIRED _____

NONOWNED _____

PIP _____

Filing Requirement? _____

Deductibles

Spec Perils _____

Coll: _____

Comp: _____

Optional cov: _____

(Lease/Loan _____

Downtime) _____

Financed Value _____

Please note: This is not an application and the figures we are quoting are an indication only, subject to a properly completed application. You do not have binding authority.

Please save and attach to email - transportation@piuinc.com

P.O. Box 13530 Mill Creek WA, 98082 - Ph: 425-771-8988