

27 Pine Hollow Road, Oyster Bay, NY 11771
Phone 516-922-9131
Fax 516-922-9014

email: custserv@oysterbayinsurance.com www.oysterbayinsurance.com

Date:

Personal Auto Insurance Quote Sheet

					Applicant	Informa	tion				
Full	Name:										
			Last		First	ı	M.I.	Date	of Birth	SS	\$#
			Last		First		M.I.	Date	of Birth	SS	5 #
Address: Best Phone:											
			Street Address			Apartment/Unit #					
			City			State			ZIP Code		
			()	()			_				
							Own Ho	me Y/N	Rei	nt Apartm	ent Y/N
Email				Referred by:							
								-			
						nformati					
	First N	ame	Last Name		DOB	License	# / State	Married/Sing	•	pation	# Miles to work
<u>1</u>											
3											
4											
1	Student		Drivers Ed		Defensive Driv				n Driving I		
3	Student Student		Drivers Ed Drivers Ed		Defensive Driv	_			n Driving I n Driving I		
4	Student		Drivers Ed		Defensive Driv				n Driving I		
				.,			.,	P 7: 2:22			
					Vehicle	Informat	tion				
	Year	Make	Model	VIN			Drive	r # Antiloo Run Br	k Airbag akes	s Alarm	Daytime Lights
1								Y/N	Y/N	Y/N	Y/N
2								Y/N	Y/N	Y/N	Y/N
4								Y/N Y/N	Y/N Y/N	Y/N Y/N	Y/N Y/N
5								Y/N	Y/N	Y/N	Y/N
		ļ.					<u> </u>	.,		-,	.,
					Co	verage					
			. ,	D.F.							
		=	l/) _ APIP (Additiona	al DID)					
		-	ments		_						
			Motorist								
			d or None		Veh 1	Veh 2	\	/eh 3	Veh	4	
	Con	prehens	sive <i>Ded or No</i>	ne							
	Ren	tal Limit	t								
		ing Limi									
	Oth	er <i>Expla</i>	nin								

Complete other side

Tickets/Accidents Claims past 5 years

Drv#	*Date	Description (Ticket/Accident)	Conv Date
Example	4/5/45	0 150/15	0/00/45
<u>1</u> Example	4/5/15	Speed 50/45	8/20/15
2	2/12/15	Accident – at fault, rearended vehicle ahead	8/1/16
*!!		ate if not sure	
"Use app	roximate d	ate ii not sure	
Current C	ompany:	Current Expiration Date:	
Current Li	mits: BI	/PD	
Length of	time with o	current company (#yrs/#months)//	
		Other	
Indicate pr	ior address	s if less than 3 years at current address:	
•		,	
If any drive	ers have be	en licensed for less than 3 years, please indicate date licensed (date passed ro	oad test):
-			·
If any drive	er is a stude	ent, please indicate if they have a B average or better for good student discou	nt and name/location of school:
		for business purposes? If yes, please explain how vehicle is used daily, milea	ge, # of jobs per day, equipmer
in vehicle,	etc.		