

Name: _____
Address: _____
Phone #: _____
Email Address: _____

Date: _____
Date of Birth: _____
Social Security #: _____

*ATV / RTV
Golf Cart
Snowmobile
Dunebuggy*

Type: _____ (atv, off-road motorcycle, rtv, dunebuggy, golf cart, snowmobile)
Year: _____
Manufacturer: _____
Model: _____ VIN: _____
CC's: _____
Value: \$ _____
Kept in a fully enclosed, locked structure? YES NO

Current Insurance Company: State Farm Allstate Geico Progressive Other _____

Expiration Date: _____

Current Limits:

Bodily Injury/Property Damage	\$ _____	Comprehensive Deductible	\$ _____
Underinsured/Uninsured	\$ _____	Collision Deductible	\$ _____
Uninsured Motorist Property Damage	\$ _____	Trailer	YES NO
Medical Coverage	\$ _____	Trailer Value:	_____

How do you pay? Monthly Quarterly Every 6-months Annually Other _____

Notes (lienholders?, Other Drivers?):