

MULLEN INSURANCE AGENCY, INC
Commercial Auto Quick Quote Sheet

Return to Mullen Insurance by fax at 972-681-6297, or email to s.latham@mulleninsurance.com

Agency Name: Mullen Insurance Agency, Inc. Fax/Email: 972-681-7601

Named Insured: _____
Mailing Address: _____
Physical Address: _____
Phone #: _____ Fax #: _____
Type of entity (sole proprietor, corporation, LLC, etc.): _____
Insured's operations: _____
Years in Business: _____ Any bankruptcies or liens in last 5 years? _____

Credit Verification

Owner's Name and Home Address: _____

Moved in last 60 days? _____

Social Security Number: _____

Drivers

Name (First/Last)	DOB	DL# (is this a CDL)	Gender	Marital Status	Job Desc.	# of Years Driving
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Vehicles

VIN Number	Year/Make/Model	Use*	Stated Amt	Garaging Zip	Radius	Avg Jobsites Per Day	GVW
1) _____	_____	_____	_____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____	_____	_____	_____

*Use options: B = Business, P = Personal, or B/P = Business and Personal

Underwriting

How many months prior verifiable insurance? _____ Name of prior carrier: _____
Current limits of liability: _____ Expiration Date: _____
Number of Additional Insureds needed: _____
How many employees do you have? _____ How many employees drive vehicles? _____
Do you operate over a regular route? _____
Do they carry General Liability? _____ If yes, what Company? _____

Limits of Insurance Requested

Liability: _____ Hired Auto coverage (yes/no): _____
Medical Payments: _____ Non-Owned Auto coverage (yes/no): _____
Uninsured Motorist: _____ Comprehensive Deductible: _____
Personal Injury Protection: _____ Collision Deductible: _____

Payment Plan Requested (available options are: 1) Pay in Full; 2) 25% down, 3-pay balance; 3) 25% down, 6-pay balance; and 4) 15% down, 9-pay balance: _____