



Quick Quote Questionnaire Date\_\_\_\_\_

Agency\_\_\_\_\_ Contact Person\_\_\_\_\_ Page 1

Phone #\_\_\_\_\_ email address:\_\_\_\_\_ fax #\_\_\_\_\_

Named Insured\_\_\_\_\_ Proposed Effective Date\_\_\_\_\_

Names of Principals\_\_\_\_\_ Indiv/Partnership/Corp/LLC/Other\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Type of Business\_\_\_\_\_ Radius of Operation:\_\_\_\_\_

Date Business Started:\_\_\_\_\_ Experience of Operators:\_\_\_\_\_

Provide complete description of operations performed and how equipment will be used:\_\_\_\_\_

Prior Carrier\_\_\_\_\_ Agent Know Personally?\_\_\_\_\_

What other Coverage Do You Write\_\_\_\_\_

Overall Financial Condition / Net Worth: \_\_\_\_\_

Bankruptcies/ Tax or Credit liens within past 5 years: \_\_\_\_\_

Any policy or coverage Declined, Cancelled or Non-Renewed in prior 3 years? \_\_\_\_\_ If yes, explain below.

Current Terms & Deductibles\_\_\_\_\_ W C Exp Mod \_\_\_\_\_

Prior Losses (Last 5 Years) Provide Details\_\_\_\_\_

Logging Risks – Contracted with?\_\_\_\_\_

Maintenance Program/Safety Program in place?\_\_\_\_\_ Provide Details\_\_\_\_\_

Fire extinguishers / Fire Suppression located on units – provide details\_\_\_\_\_

Any Equipment Rented/Leased To or From Others? Please explain\_\_\_\_\_

Any Equipment used Underground or Over Water? Please explain\_\_\_\_\_

Location of Equipment when not in use:\_\_\_\_\_

AGENT'S RECOMMENDATION / GENERAL COMMENTS:

\_\_\_\_\_

# Quick Quote Questionnaire

Date \_\_\_\_\_

Named Insured: \_\_\_\_\_

**Page 2**

**\*\*\*To Bind need complete description of units – Year, Make, Model, Serial #  
and if modifications to units provide detailed descriptions\*\*\***

<i>Unit #</i>	<i>Year</i>	<i>Make &amp; Model</i>	<i>Serial #</i>

<i>Unit #</i>	<i>Limit of Insurance</i>	<i>Deductible</i>	<i>Rate</i>	<i>Premium</i>

<i>Unit #</i>	<i>Loss Payee / Additional Insured Info</i>

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

(Quotes are good for 60 days – resubmit if change in schedule or loss experience)

