



Tow Truck Quick Quote Application

1. Applicant _____
2. Garaging Location _____
3. Years in Business _____
4. Proposed Eff. Date _____
5. Commerce Commission Filing Needed [] Yes [] No
6. Type of Business _____

7. Use:
- Towing only
- Towing & Storage
- Towing, Storage & Repair *

* Garage Application is required for repair operation.

11. Driver's Information:

Name	Date of Birth	Date of Hire	#Yrs. Exp.	Moving Violations & Accidents—Last 3 Yrs. <input type="checkbox"/> MVR's attached
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

12. Vehicle Information:

Year	Make	Body Type/ Model **	GVW	Radius	Present Value
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

** If Tow Truck, indicate whether hook type or flatbed and carrying capacity (number of vehicles)

13. Prior Carrier – Last 3 years: _____

Being Cancelled [] Yes [] No
 Describe losses or provide 3 years loss runs _____

14. Coverage Limits:

- | | | |
|-----------------------------------|-------------|------------------|
| A. Liability-Auto & Garage _____ | F. On-Hook | Limit _____ |
| B. UM/UIM _____ | | Deductible _____ |
| C. Med Pay _____ | G. Off-Hook | Limit _____ |
| D. Comprehensive-Deductible _____ | | Deductible _____ |
| E. Collision-Deductible _____ | | |

15. Required Pricing: _____ Liability _____ Physical Damage _____

Remarks: _____

